09 Chapter

The future of psychosocial risk management and the promotion of well-being at work in the EU: A PRIMA time for action

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1. Introduction

The idea of the development of a framework for the management of psychosocial risks was born in May 2004 at the World Health Organization Headquarters in Geneva. With an international perspective, WHO challenged members of the now PRIMA-EF consortium to come up with a best practice framework that could, in the long run, be promoted at the international level. The PRIMA-EF consortium was subsequently set up at the WHO EURO Network meeting as an alliance of WHO Collaborating Centres in Occupational Health and initial funding to start developing the framework idea was received by SALTSA (confederation of Swedish Trade Unions and the then National Institute for Working Life). It was decided that since substantial knowledge and best practice was already available in the European Union (EU) in relation to the management of psychosocial risks, it would make sense to start building the framework at the EU level and then work to develop it further for use at the international arena. In the meantime, a fruitful context had developed in the EU with the signing of the work-related stress framework agreement by European Social partners in 2004. A call was then announced by the EC DG-Research through the 6th Framework Programme that specifically focussed on psychosocial risks, work-related stress and workplace violence, harassment and bullying (or mobbing). The PRIMA-EF project was funded through this call. The call represented a challenge in itself as it asked for a consideration of a number of issues in relation to this area. Special focus should be placed to small and medium-sized enterprises, gender and corporate social responsibility as well as standards and indicators.

In order to meet these challenges successfully, PRIMA-EF has been built on a review, critical assessment, reconciliation and harmonisation of what exists and has proved valid in the EU for management of psychosocial risks and the promotion of (mental) health, and safety at the workplace and beyond it. The framework has been built from a theoretical analysis of the risk management process, identifying its key elements in logic and philosophy, strategy and procedures, areas and types of measurement, and from a subsequent analysis of typical risk management approaches as used

within the EU. It is meant to accommodate all existing (major) psychosocial risk management approaches across the EU.

The model developed is relevant to both the enterprise level and the wider macro policy level as particular challenges in relation to psychosocial risks and their management exist at both these levels. On the enterprise level, there is a need for systematic and effective policies to prevent and control the various psychosocial risks at work, clearly linked to companies' management practices. On the national and the EU levels, the main challenge is to translate existing policies into effective practice through the provision of tools that will stimulate and support organisations to undertake that challenge, thereby preventing and controlling psychosocial risks in our workplaces and societies alike. At both levels, these challenges require a comprehensive framework to address psychosocial risks.

The developed framework was used to examine key issues of relevance to the management of psychosocial risks at work, such as policies, stakeholder perceptions, social dialogue, corporate social responsibility, monitoring and indicators, standards and best practice interventions at different levels. In doing so, the project aimed at identifying the current state of the art in these areas, to develop frameworks of best practice with associated guidance, and to suggest priorities and avenues for improvement.

This chapter summarises the main findings of the project and identifies existing gaps in current policies and practices. It concludes with some recommendations on how to overcome them, finally suggesting the way forward.

2. Main findings of the project

2.1. Key concepts in the European framework for psychosocial risk management

In reviewing best practice models for psychosocial risk management across the EU, a number of key concepts can be identified and have been incorporated in PRIMA-EF. The first is that psychosocial risk management is synonymous to best business practice. As such, best practice in relation to psychosocial risk management essentially reflects best practice in terms of organisational management, learning and development, social responsibility and the promotion of quality of working life and good work.

In addition, psychosocial risk management is a systematic, evidence-informed, practical problem solving strategy. It starts with the identification of problems and an assessment of the risk that they pose; it then uses that information to suggest ways of reducing that risk at source. Once completed, the risk management actions are evaluated. Evaluation informs the whole process and should lead to a re-assessment of the original problem and to broader organisational learning. In real situations a mixture of foci and strategies must be used to deal effectively with a hazardous situation in which there are many challenges to health and safety. The over-riding objective of psychosocial risk management is to produce a reasoned account of the most important work organisation factors associated with ill-health (broadly defined) for a specific working group and one grounded in evidence (Leka, Griffiths, & Cox, 2005).

Psychosocial risk management is an activity that is closely related to how work is organised and carried out. As a consequence, the main actors are always managers and workers that are responsible for the work to be done. It is very important that managers and workers feel the 'ownership' of the psychosocial risk management process. Outsourcing ownership to service providers is a failure factor, even when, e.g. in the case of a rehabilitation programme, most of the activities can be done by external agents.

Contextualisation, tailoring the approach to its situation, is a necessary part and facilitates its practical impact in workplaces. Because national and workplace contexts differ, contextualisation is always needed to optimise the design of the risk management activities, to guide the process and maximise the validity and benefit of the outcome.

Closely related to contextualisation is the concept of tailoring. Tailoring aims to improve the focus, reliability and validity of the risk management process. It improves the utilisation of the results of the risk assessment and the feasibility of the results and helps to make effective action plans. Tailoring is often needed to find a useful approach and tools for managing the actual psychosocial risks at work. When planning the assessment and management of psychosocial risks at a workplace, several choices and decisions should be made to prepare for action. At the enterprise level, these must be made taking into consideration the size of the enterprise (especially small and medium-sized

enterprises (SMEs) require specific attention due to problems such as lack of resources), its occupational sector, characteristics of the workforce (such as gender, age, and contingent work) as well as the wider context of the country.

In good psychosocial risk management models, the validity of the expertise that working people have in relation to their jobs is recognised. Inclusion of all parties in prevention efforts can reduce barriers to change and increase their effectiveness. Including all actors can also help increase participation and provide the first steps for prevention. Access to all the required information is also facilitated with a participative approach. At the policy level, participation is also relevant for the effectiveness and ownership of workers' representatives. Therefore, synergy can be created between good risk management approaches for psychosocial risks on the one hand and social dialogue and dialogue with external stakeholders on the other hand. These dialogues are also important because psychosocial risk management is part of responsible business practices in any organisational context (and transparency and communication are key in any responsible business policy). As such participation and social dialogue should underpin the psychosocial risk management process.

In every day practice, psychosocial risks have many causes. Typically, factors like characteristics of work organisation, work processes, workplace, work-life balance, team and organisational culture, and societal arrangements (e.g. the provision of occupational health services and social security arrangements) all play a role. Some of these may be very apparent; others may require a good analysis to identify them as underlying causal factors. As a consequence there are usually no quick fix solutions at hand; a continuous management process is usually required. To be effective it is important to understand the most important underlying causal factors before solutions that are fit for purpose are selected.

Although the emphasis, as stipulated in European legislation on health and safety, is on primary risk prevention targeted at the organisation as the generator of risk, specific actions targeted at the individual level can also play an important role depending on the magnitude and severity of the problem within organisations and its effect on employee health. The management of psychosocial risks is about people, their (mental) health status and business and societal interests. Protecting the psychosocial health of people is not only a legal obligation, but also an ethical issue.

Psychosocial risk management is relevant not only to occupational health and safety policy and practice but also to broader agendas that aim to promote workers' health, quality of working life and innovation and competitiveness across the EU. Psychosocial risk management can contribute to the creation of positive work environments where commitment, motivation, learning and development play an important role and sustain organisational development.

Another key concept is that of minimum standards for psychosocial risk management that can and must be met across EU countries and irrespective of workplace contexts. Here management refers to the management process and its direct outputs (measures taken). Such standards must be rooted in legal requirements and the policy context and best practice principles.

However, policies for psychosocial risk management require capabilities, respectively at the macro level and at company level. The capabilities required comprise:

o   adequate knowledge of the key agents (management and workers, policy makers),
o   relevant and reliable information to support decision-making,
o   availability of effective and user friendly methods and tools,
o   availability of competent supportive structures (experts, consultants, services and institutions, research and development).

Within the EU there are great differences in existing capabilities. In those countries where only minor capabilities are available, this is a major limitative factor for successful psychosocial risk management practice as this is linked to lack of awareness and assessment of the impact of psychosocial risks on employee health and the healthiness of their organisations. It is also linked to inadequate inspection of company practices in relation to these issues.

The execution of a risk management project is a professional undertaking that should be based on scientific know-how and subject to common sense with an awareness of the sensitivities of those involved. For those with a recognised professional background, their codes of conduct, ethical principles and advice and issues of best practice should be brought to bear. Its completion is also framed by the national and European health and safety legislation and by employers' legal duty of care. It is essential that those involved have evidence of their competence and are fully aware of the ethical aspects of this work as well as the legal and scientific aspects.

2.2. Monitoring and indicators in psychosocial risk management

Chapter 2 presented the development of a European indicator model for monitoring psychosocial risks at work and evaluating psychosocial risk management. It included an analysis of methodologies for monitoring psychosocial risks at work and their management. It also identified gaps between available indicators and those that are considered to be necessary to monitor psychosocial risks and the process of psychosocial risk management.

Several methodologies for measuring indicators in this area were identified. In these methodologies, indicators can be translated into questions or checklist items to be transmitted verbally or in written form, either by regular questionnaire, by a web or internet based survey or in a checklist. An inventory of available methodologies for monitoring in general and psychosocial risks in particular was developed, on the basis of which it was concluded that the appropriate methodology of monitoring is heavily dependent on the aim, context and specific topic of the survey. Large organisations may benefit from questionnaires and web-based surveys, whereas checklists may be more suitable for SMEs. In reviewing indicators available in existing monitoring instruments on quality of work and more specifically on psychosocial risks at work, a gap was identified. Indicators on exposure and risks as well as indicators on outcomes appear to be already available in many monitoring instruments, but indicators on preventive action and intervention are lacking.

Several important criteria that need to be taken into account while developing an integrated model for monitoring psychosocial risks. The PRIMA-EF indicator model, built on the basis of the developed framework, meets these criteria: (1) it identifies indicators on exposure (e.g. psychosocial risk factors), outcomes and preventive action or interventions, (2) it illustrates the cyclical process of psychosocial risk management, and (3) it addresses three levels of impact: the individual level, the organisational level and the society/sector or national/EU level. Next to these more content-related criteria, context-related criteria were also considered, in particular: (1) the need to consider policy relevance next to 'scientific' relevance, (2) data availability, and (3) comparability considered from a multinational perspective.

There appear to be sensitive data available. The main statistical data base is the European Working Conditions Survey (EWCS) by the European Foundation for the Improvement of Living & Working Conditions. These data allow trend analyses to some extent since 1990 and the data allow subgroup comparisons by e.g. gender, country and sector (as well as several other characteristics). However, data are measured at the employee level and the survey mainly covers exposure and outcome indictors but not action indicators. This project as well as two large reviews on (national) surveys considering psychosocial issues (Dollard et al., 2007; Weiler, 2007) support the same conclusion: psychosocial risk management and preventive action have been a neglected aspect of monitoring and have been missing in the indicators defined so far. The difference between exposure and outcome measures on consecutive measurements could be considered as indicative of risk management, but does not necessarily relate to effective risk management. It is considered important that indicators of that type should be further developed.

The main conclusion of this project is that actions are needed to improve monitoring of psychosocial risk management at different measurement levels. A recent, promising initiative comes from the European Agency for Occupational Safety and Health at Work and focuses on monitoring of psychosocial risk management at EU-level collecting relevant data at the employer (establishment) level. The data to be collected may further support the development of indicators and their operationalisation and, in doing so, facilitate psychosocial risk management at the enterprise and policy levels across the EU.

2.3. Standards for psychosocial risk management

Standardisation is a voluntary activity performed by and on behalf of parties interested in establishing standards and other standardisation products in response to their needs. It is considered as an integral part of the EU strategy to achieve the Lisbon goals by carrying out better regulation, by simplifying legislation, by increasing competitiveness of enterprises and by removing barriers of trade at the international level (EC, 2002). According to the European Commission (2006) standardisation contributes to the functioning and strengthening of the internal market.

Chapter 3 presented an overview of the most important standards concerning psychosocial risks at work, including harassment and violence that are commonly accepted at the European and

international levels. It reviewed standards that refer directly to the concepts of psychosocial risk, stress, harassment and violence, as well as important standards of indirect concern to these issues. The review is addressed to enterprises and social partners and indicates key reference points in terms of legislation and guidance that can be of help when undertaking actions aimed at preventing and managing psychosocial risks at the workplace.

The review of standards indicated that although there are many general standards in the area of occupational health and safety, most of these are regulations concerning occupational safety and health, which obligate employers to evaluate and reduce risk at the workplace; therefore indirectly addressing psychosocial risks. But, their weakness lies in the fact that they do not always explicitly define what could be considered as risk factor (more specifically a psychosocial risk factor). Even though research documents point out the relationship between psychosocial characteristics of work (such as, demands, social support, insecurity) and employees' health, most stakeholders perceive workplace hazards as primarily relating to physical aspects of the work environment. It was therefore recommended that EU and national member state regulations explicitly refer to psychosocial risks and thereby make explicit the employer's responsibility of monitoring and preventing such risks.

The review displayed interesting diversification of terminology used in the case of psychosocial risk standards. It pointed also out that the group of standards concerning 'outcomes' is particularly small. Employers are expected to evaluate the level of psychosocial risk in organisations by taking into account potential effects of this risk both at the organisational and individual level; therefore it was concluded that despite such difficulties, one should aspire to establish a standard which would specifically address psychosocial risks and their management. Furthermore as standards can reduce the need for regulation and government intervention (EC, 1985), they may be particularly useful in promoting best practice in countries where implementation of legislation is poor.

2.4. Social policies, infrastructure and social dialogue in relation to psychosocial risk management

In the general political framework of psychosocial risk management, a noticeable change has taken place in recent years. Whereas until the nineties, European social partner agreements were implemented as council decisions or directives, subsequent issues were covered by less binding framework or 'collective' agreements. On this 'autonomous' implementation route, social partners commit to discuss and implement the agreement at national level through their member organisations and to monitor the process. Due to this shift from 'hard' to 'soft' regulation, implementation results depend highly on the quality of industrial relations at national level, particularly the ability and the will of social partners to negotiate as equals, to reach consensus on relevant issues and to find innovative solutions. In that sense, successful Social Dialogue is crucial for combating psychosocial risks at the workplace.

Social dialogue is a core element of the European social model (Weiler, 2004), and although a number of initiatives have been taken to develop social dialogue indicators and to collect data, internationally and across Europe, with regard to psychosocial risk management, a systematic approach is still lacking. Chapter 4 reviewed the policy context of psychosocial risk management as well as social dialogue structures across Europe.

In spite of all progress on social dialogue that has been achieved up to now, the process faces several challenges. A major one accrues from EU enlargement. In the new EU member states from Central and Eastern Europe (CEE), social dialogue does not yet have the same longstanding tradition as in the old EU countries and structures are still comparatively weak, in particular the organisation of social partners at sector level. Moreover, due to high unemployment rates, the power relations between employers and trade unions are often imbalanced. Over the last years, efforts have been made at EU level to improve the capabilities of new member states for social dialogue. Still, inequalities between old and new EU countries can be observed and need to be addressed further on.

Another challenge concerns differences in perceptions and perspectives of social partners and their subsequent effect on prioritisation of issues in the social dialogue process; the difference in opinion among the stakeholders has at times hampered the development of initiatives to manage and prevent psychosocial risks at work. Additionally, as today's globalized markets place on enterprises strong demands for competitiveness, a short term economic orientation is often prevalent, whereas sustainable work systems that balance competitiveness with quality of working life require a long term perspective.

There is therefore an urgent need to address these challenges and to develop stronger social dialogue structures, for social dialogue will play a key role on the development, implementation and sustainability of initiatives, in the area of psychosocial risk management, that are based on voluntary approaches or on a combination of both 'hard' and 'soft' law. As a first step a framework for social dialogue indicators in the area of psychosocial risk management was developed which comprises the core dimensions and aspects that need to be considered in order to ensure a high quality of indicators. The next step will be the development of concrete indicators. Therefore, joint efforts of scientists and stakeholders are crucial. The long term goal is to develop a standardised reporting sheet for Social Dialogue indicators in the area of psychosocial risk management that is easily applicable as well as comprehensive and therefore allows monitoring the progress of Social Dialogue in this area throughout the EU. Tools, guidance and training on psychosocial risk management for all parties involved can help to make Social Dialogue more successful.

2.5. Exploring stakeholders' perceptions on social policies, infrastructures and social dialogue

Little research has been conducted on the topic of perception of psychosocial risk factors by stakeholders. Chapter 5 presented the findings of the PRIMA-EF stakeholders' survey, which was conducted in the 27 EU member states to investigate their perceptions in relation to psychosocial risks and their management. The survey included questions on the perceived effectiveness and needs of European regulations as concerns psychosocial risk management and psychosocial risk perception and the role of social dialogue in this area. The survey found that European legislation on the topic of health and safety at work (Directive 89/391) needed to be implemented more widely and effectively in relation to the assessment and management of psychosocial risks. The main barriers to its application was the low priority assigned to these risks, the complex and far from unanimous perception of them, the general lack of awareness, and the absence of agreement among the social partners. Results also indicated that problems in applying Directive 89/391 were due mainly to the fact that it did not explicitly mention psychosocial risks and due to the lack of practical tools for managing them.

All stakeholders agreed that appropriate psychosocial risk assessment was essential for the prevention of work-related stress and this needed to include an evaluation of a number of areas (from employee reports, to company policies and systems). Occupational health and safety specialists were reported to have a crucial role to play in this respect and the need for specialised training programmes targeting graduates and health and safety professionals was considered particularly pressing. At the national level, respondents considered that work-related stress was insufficiently acknowledged and this perception was particularly higher among new EU-27 stakeholders. Furthermore, only the employers' associations considered the acknowledgement to be appropriate, while both trade unions and government institutions agree on the inadequacy of such acknowledgment. The main reasons for the perceived inadequacy of national schemes were a general lack of awareness about the problem, its low priority, limited specific policies and regulations, and a lack of appropriate tools for evaluating and managing psychosocial risks.

As regards the respondents' perception of available support for the management of psychosocial risk factors in the form of infrastructures such as occupational health services at national and local levels, a general dissatisfaction was expressed. Stakeholders only acknowledged the importance of, and confidence they have in, support from independent experts. Finally, most of the stakeholders acknowledged the importance of social dialogue but considered it unsatisfactory. The survey brought to light a substantial difference between the old EU-15 and the EU-27 member states as regards the level of national awareness of psychosocial risks and work-related stress in relation to the importance of the issues.

The results clearly highlight a number of issues that need to be addressed; amongst them are training and awareness raising, development of appropriate infrastructure and support and most importantly addressing stakeholder perceptions and promoting social dialogue. PRIMA-EF can be used as an awareness raising instrument across the EU and relevant training can be provided to all stakeholder groups as necessary across EU member states.

On the other hand, the positive perception of independent experts that was highlighted can be further strengthened through the development, for example, of an expert network of excellence on psychosocial risk management across the EU that will support government agencies, stakeholders and enterprises in this area. More importance must also be given to practitioners to whom specific

postgraduate training in psychosocial issues should be provided, since these are often the people who are responsible for psychosocial risk management in the everyday work context. The new Member States seem to assign more importance to this issue since there are fewer opportunities for specific training in these countries due to lack of expertise at national level.

2.6. Corporate social responsibility and psychosocial risk management

Chapter 6 explored the link between CSR and psychosocial risk management, this was expected to offer new insights into psychosocial risk management, and also offer new perspectives for future management approaches. On the basis of the findings, a number of the resulting opportunities for future activities can were identified. Firstly, it was considered important that further guidance and standards in the area had to be developed and indicators needed to be formalised, as this would allow clarity among enterprises and policy-makers. Further, benchmarking needed to be promoted across companies, sectors and countries as it would allow appropriate actions to be taken to address gaps in practice. These tools should be promoted across experts, practitioners, enterprise networks on the one hand, and government officials and policy makers on the other and could be also used as an awareness raising tool. Further research is also needed to define the business case for psychosocial risk management as well as to address the ethical dilemmas in the psychosocial risk management process. Perhaps the most important challenge lies in instilling a change in perspective by businesses in order to see psychosocial risk management as part of good business practice. A CSR inspired approach, underpinned by the legal context, can prove useful towards this end.

2.7. Policy-level interventions for psychosocial risk management

A substantial degree of diversity can be observed across strategies to prevent and manage psychosocial risks and their associated health effects. A common distinction has been between organisational and individual orientations, or between primary, secondary and tertiary prevention. The important level of policy-level interventions is often neglected in the mainstream academic literature.

Chapter 7 reported the findings of a comprehensive literature review of various policy approaches to tackle psychosocial risks, work-related stress, violence and harassment at the European level. It also included the findings from interviews and focus groups with key stakeholders at the policy level who had been involved in some form of policy-level intervention for psychosocial risk management. The focus groups were conducted to define indicators for psychosocial risk management at the macro (national) level. The indicators were then piloted with national networks to ascertain their usefulness for benchmarking purposes.

Findings indicated that a number of initiatives at the policy level have been implemented in the recent past, with good results, however, analysis and overall evaluation of these initiatives is lacking. Emphasis must therefore be placed at conducting careful analysis and evaluation of these interventions and efforts. In doing so, it would be important to evaluate not only their effectiveness but also their process in order to identify success and failure factors that are important for the societal learning process. This would also help to improve collaboration across member states and promote policy learning and transfer of knowledge in the area of psychosocial risk management.

It was further reported that a number of methods (such as awareness of relevant legislation, standards, guidance from international organisations, participation in networks etc.) could be used by policy makers but often their level of awareness of them is lacking. The significance of the dissemination of guidance and examples of best practice for psychosocial risk management was also highlighted.

The main barrier to the development of policy level interventions was reported to be the lack of government support for macro initiatives, especially in new member states. Although awareness of psychosocial issues has increased over the past few years, a lot more needs to be done, especially at the macro level. The societal impact of existing interventions has not been significant and further efforts need to be made to communicate research findings to policy makers and the general public.

At the national level, although many member states had enacted and implemented legislation relating to occupational health and safety, these initiatives were largely driven by internal discussions and a few European directives; there are no significant efforts made by member states to collaborate with each other in order to aid policy learning and transfer, in the area of occupational

heath and safety and psychosocial risk management. Increased collaboration will also help address differences between new and old member states. Efforts at raising awareness and prioritisation of psychosocial issues were reported to have had a positive impact and should be continued, with increased focus on new member states. Both 'hard' and 'soft' law approaches must be pursued where appropriate. Development of new initiatives and implementation must be based on processes involving social dialogue and consultation on a tripartite plus basis, including experts. Further, the link between corporate social responsibility and psychosocial risk management must be clearly identified, presenting an established business case, to encourage employers to engage in practices above and beyond mere compliance.

2.8. Best practice in interventions for the prevention and management of work-related stress and workplace violence and bullying

Chapter 8 presented the findings of a comprehensive review of risk management approaches and an analysis of evidence-based best practice interventions for work-related stress and workplace violence and bullying in order to develop a comprehensive and unifying framework for the evaluation and assessment of interventions reflective of the European experience. In order to ensure a comprehensive review of risk management approaches to both the prevention and management of work-related stress and workplace violence and bullying, representative of the European context, it was attempted to identify approaches in a variety of different occupational sectors, sizes of enterprises, and across various European countries. Special reference was made to approaches that promote best practice through corporate social responsibility and social dialogue principles, and to gender-friendly approaches. Interviews with over seventy experts involved in developing, implementing and/or evaluating interventions from across Europe were also conducted.

The findings were used to identify the success factors for interventions for managing psychosocial risks; these were based on intervention content, intervention design and intervention context. Key issues for success were provided for organisations and experts that wish to implement psychosocial risk management interventions. These were organisational readiness to change, a realistic and comprehensive intervention strategy, and a commitment towards supporting continuous improvement.

The participants placed special emphasis on the importance of raising awareness of psychosocial issues, and the role of education in achieving this: both in organisations and management and in other key stakeholders in the process. Additionally, the importance of capacity and competency building within organisations and management, and extending this to the macro level to include policy makers, was highlighted. The importance of developing the business case for psychosocial risk management was identified as a key priority for future action; namely, linking the business case more strongly to responsible business practices, including a concentrated focus on the social well-being and health of employees as key constructs. Finally, the experts outlined the importance of developing a comprehensive approach to the management and evaluation of interventions for work-related stress, and workplace violence and bullying by incorporating the use of a multi-modal intervention approach (i.e. concentrated focus on both the individual and the organisation); and the need to further develop tools which would assist organisations and practitioners in the implementation of interventions and the evaluation of outcome criteria. Such tools would address process issues on how to effectively translate intervention 'action plans' into a 'successful' intervention; and, additionally, outline sets of evaluation criteria (including the subsequent evaluation of the process issues) and sets of best practice methods. It was emphasised that – in order to facilitate effective translation into practice – outlined criteria must be tailored to the needs, aims, objectives and competencies of organisations and practitioners.

There was consensus amongst the experts on the key priorities for action; namely, the importance of competency building exercises, comprehensive stress management techniques, the further integration of process issues into the evaluation of interventions, and the importance of the development of the business case.

A substantial degree of convergence can be observed between the observed success factors, challenges and barriers to a best-practice intervention, and the key priorities outlined by experts for the prevention and management of work-related stress, and workplace violence and bullying. Many of the success factors discussed were reflected in key priorities, and were additionally reflected, to a degree, in the challenges and barriers articulated by the experts. This indicates a large degree of

convergence on best-practice criteria for interventions seeking to prevent or manage work-related stress, workplace violence and bullying. However, there still exist continued gaps in knowledge, and within the evidence-base which practitioners draw on to guide/facilitate translating this research into effective practice.

3. Way forward: challenges to be addressed

Many of the priorities for action that have been highlighted are inter-related. Using the philosophy underlying PRIMA-EF, these issues can be addressed as follows.

3.1. Development of appropriate infrastructure and support – building capacities

An appropriate infrastructure for the management of psychosocial risks cannot be found in all EU member states and, hence is sometimes lacking at national and local levels. This also applies to occupational health services provision. Due to the prevalence and impact of psychosocial risks, psychosocial risk management should represent a higher priority in national and international agendas and stakeholders must be made more aware of its importance. In addition psychosocial risk management tools and guidelines (such as the ones developed through this project) and their use should be promoted across the EU. It is important that an increase of national capabilities is considered if progress both at EU and national levels is to be achieved and the gap between policy and practice is to be addressed and minimised.

3.2. Training and awareness raising – developing tools at the enterprise level

One of the key priorities identified by the results of the project is awareness raising on psychosocial risks across the enlarged EU and across stakeholders. It is important that specific training programmes on psychosocial risk management are developed and promoted, for stakeholders, for occupational health and safety professionals and for health and safety inspectors. Training courses on PRIMA-EF could be developed and delivered to these parties across the EU. This could be facilitated by the establishment of a network of excellence in psychosocial risk management. Further research could be conducted to develop PRIMA-EF packages (addressing all levels and key aspects of the framework) for use at the enterprise and the macro policy levels.

3.3. Addressing stakeholder perceptions and promoting social dialogue

Social dialogue is a useful form of communication among social partners and needs to be fostered at national and European level as a means of closing the gap in perception between the various stakeholders and facilitating civil dialogue and facilitated coordination (facilitated coordination relates to those policy areas where the national governments and stakeholders are the key actors). Social dialogue is also critical during the process of implementation of EU Directives and stakeholder agreements, as it involves the incorporation of such standards through national political-administrative systems and is not just a top-down process. Studies of implementation show that successful implementation also depends on how the upstream process of developing e.g. legislation has been handled (Dehousse, 1992). Also, regarding implementation, national adaptation depends on the level of embeddedness of existing national structures (Knill, 1998). Social dialogue plays a critical role in the development and implementation of initiatives for psychosocial risk management at the macro as well as the organisational level and hence should be promoted, especially in the new member states, where existing social dialogue structures are weak.

3.4. Developing a European standard for psychosocial risk management

A standard is "a universally agreed-upon set of guidelines for interoperability". Primarily the use of European standardisation in the area of occupational health supports the competitiveness of firms, as a healthier workforce has a direct impact on it. Currently there are a few complementary European approaches to addressing psychosocial risks at work, some of these have been outlined in recent

European documents such as the European Commission's Guidance on Work-Related Stress (2002a), the European Standard (EN ISO 10075- 1&2) on Ergonomic Principles Related to Mental Work Load (European Committee for Standardization, 2000), the European Commission's Green Paper on Promoting a European Framework for Corporate Social Responsibility (2001). These approaches are based on different but related paradigms, which might lead to confusion and misinterpretation. Standards for addressing psychosocial risks at work, therefore, need to be developed based on a framework unifying these approaches.

3.5. Promoting a CSR-inspired approach

A CSR approach to psychosocial risk management (that sees legal requirements as the floor and not as the ceiling) is based on the recognition that a company cannot be responsible externally without being responsible internally towards its own workforce. It recognises that a healthy workforce and healthy organisations are key for the optimum use of human and social capital, and so for a vital economy. It will help for increasing productivity, fostering innovation, improving economic performance and improving the functioning of the labour market (including strengthening of associated social security arrangements and social inclusion impacts). However, the business case for promoting psychosocial risk management needs to be developed and presented to employers.

3.6. Development and evaluation of tools and initiatives at the policy level

The importance and impact of policy interventions for the management of psychosocial risks has been largely ignored in the mainstream academic literature. The evaluation of the policy process, especially the implementation of the policy plan is an important step, but one that is often overlooked or avoided. Evaluation must consider a wide variety of different types of information and draw it from a number of different but relevant perspectives. The results of the evaluation should allow the strengths and weaknesses of both the policy plan and the implementation process to be assessed. They should provide the basis for societal learning. Also, better transference of best practice between ministries within countries, between countries as well as between international organisations will lead to the development of effective tools which could be implemented and evaluated effectively.

4. Conclusion: A PRIMA time for action

Current data and reports, experts and policy makers agree that psychosocial risks and issues like work-related stress, workplace violence, harassment and bullying are major concerns to occupational health and safety with an associated big impact on the health of people, organisational performance, and member state and EU economies. This has been identified by the EC with the recent introduction of the European Pact for Mental Health, part of which focuses on the workplace level.

The current global economic crisis has already started having a further negative effect on people's lives – this will undoubtedly impact on their mental health and that of their families as well as on European economy. The protection of people's mental health in an ever-challenging socioeconomic and work context is not only a priority but also an ethical responsibility.

The PRIMA-EF project has met the challenge of developing a European framework for psychosocial risk management. A number of priorities have been identified on the basis of this framework for the future of psychosocial risk management and the promotion of mental health at work in the EU. It is now a pressing time for bold decisions and the promotion of this unifying European approach at the EU level to promote the translation of knowledge and policy into effective practice at the enterprise and macro levels: a PRIMA time for action.

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