

European Examples of Good Practice in prevention of work-related stress

Karen Albertsen, NIOH, Denmark,
Isabelle Leleu, EUROGIP, France,
Maria Karanika, I-WHO, UK

Working on stress



- European week for safety and health at work in 2002
- Initiated by The European Agency for Safety and Health in Bilbao
- Topic Centre of Good practice - FIOH
- Task Group - examples of good practice in stress prevention in EU

Task:

- Report “How to tackle Psycho-social Issues and Reduce Work-related stress”
- National, regional and local levels
- All EU member states
- Prevention of stress, violence and bullying
- Transferable across EU
- Initiatives from a number of sources



Snowball Method:

- No systematic screening
- Use of EU - OSH experts, network, contacts
- Collecting a "databank" with more than 40 examples
- Discussion of selection according to the commission

Result: Mixture of examples of

- Legislation and national regulation
- Tools for screening and evaluation
- Guidelines for practice
- Interventions at work sites

The general picture

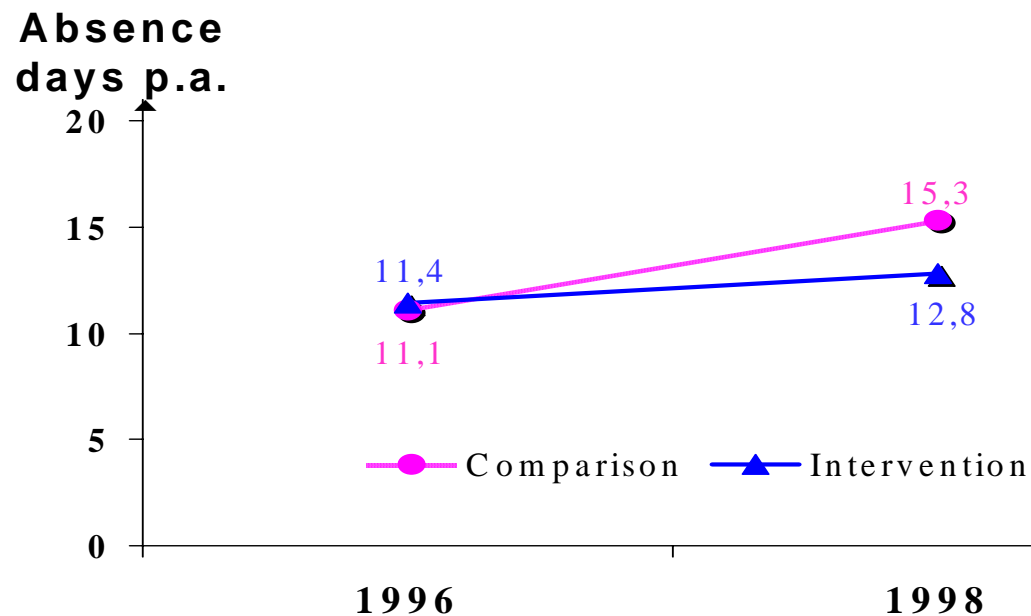
- High attention to the psychosocial field in Europe
- National legal frameworks ahead of the EU directive
- Still difficult to obtain compensation
- Many initiatives at the national level
- Increased awareness on Psychosocial issues in labour inspection

What is Good practice?

- Attractive concept - but less informative
- Good intentions, good efforts, good results?
- 4/9 initiatives formally evaluated on outcome measures

Results from "IPAW", Denmark

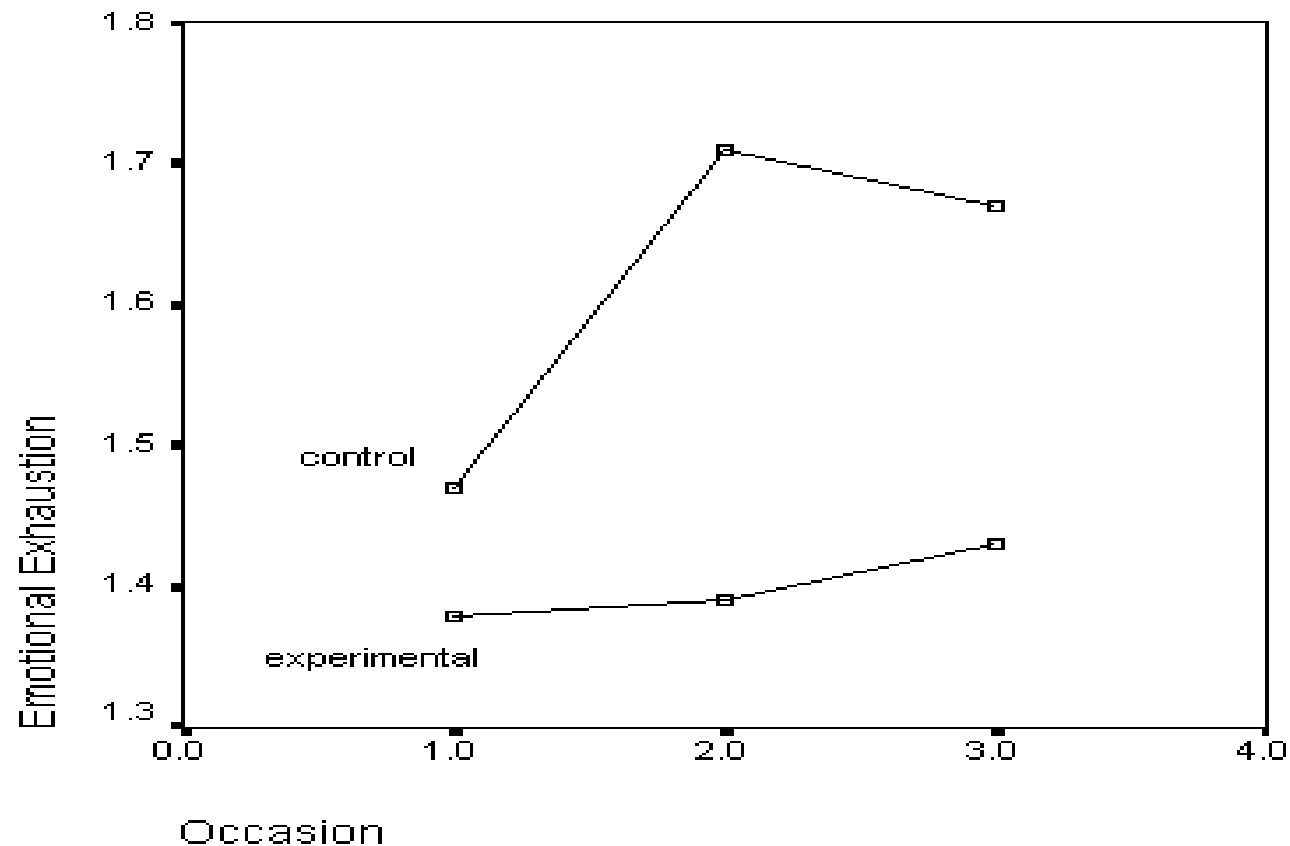
Absence days on intervention- and comparison workplaces



Results from “Work and Well-being”, UK

- Improved well-being
- Increased job satisfaction
- Reduction in reported problems
- Increase in musculoskeletal pain

Results from "Take-Care", Netherlands



Other criteria for Good Practice

- Targeting stressors, not stress
- Adequate Risk Analysis
- Involvement of the employees in the implementation process

Level of intervention:

| | Individual level | Individual-organisational interface | Organisational level |
|-----------------------------|-------------------------|--|-----------------------------|
| Interventions | 7/9 | 4-5/9 | 4-5/9 |
| Tools and guidelines | 7/7 | | |

“Road Access and bus drivers”, Sweden

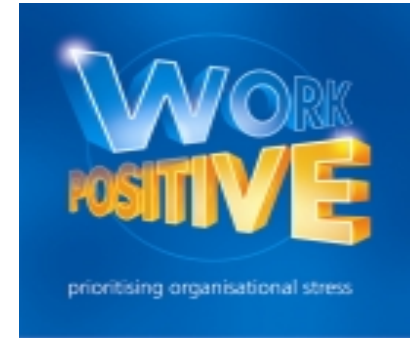
- **Interventions at the organisational level:**
 - Changed bus routes
 - Increased number and length of separate lanes
 - Active signal priority - computerised systems
 - Reduced number of stops
 - Computerised passenger information system

Results from “Road Access and Bus drivers”

- Reduction in distress after work
- Reduction in job hassles
- Decrease in systolic blood pressure
- Improved control in driving situation
- Better passenger service

“Risk Assessment/Risk Management framework”, UK

- Five steps in the assessment process:
 - Identification of potential risks
 - Assessment of health profiles
 - Search for associations
 - Identification of practice and resources
 - Identification of residual risk



Stepwise approach

- “Work Positive” (SMEs), Scotland and Ireland
- Five steps in the process:
 - Raising Awareness
 - Benchmarking
 - Identification of risk
 - Identifying and implementing the solutions
 - Evaluation

Involvement of employees

- Continuum of involvement: from none to large influence in planning, implementation and evaluation
- Large in 3/9 cases
- Method: “Health Circles” - A participative approach to improve Health, Germany
 - Employees as experts
 - Support from management, unions, H&S experts...

Summary Points:

- High attention and many initiatives
- Good practice? - Need for formalised evaluations
- More focus on stressors compared to stress
- More involvement of employees

Download:

Report issue 309 from:
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ami
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