

Summary:

High-Level Conference on Mental Health and Work

30-31 January 2024 - Brussels, Belgium

The Belgian presidency of the Council of the European Union brought together European experts and decision-makers in Brussels for a conference on mental health and work. The first day focused on **primary prevention** and the establishment of healthy workplaces by implementing upstream measures to prevent workers from being exposed to psychosocial risks at work. The second day focused on **secondary and tertiary prevention**, i.e., keeping people at work by detecting and dealing with the first signs of ill-being in workers and helping them return to work after sick leave. The aim was to tackle the issue as a continuum and in all its complexity.

Prevention of psychosocial risks, stress and burnout at work

Bringing mental health out of the shadows

Belgian Deputy Prime Minister and Minister of the Public Service Petra De Sutter opened the conference by emphasising that **the issue should dominate the political agendas of the coming decades**. In her view, mental health at work has remained in the shadows for too long. Across Europe, absenteeism is on the rise, emerging technologies such as artificial intelligence are having a profound impact on the world of work, and the boundaries between work and non-work time are becoming blurred. Moreover, none of Europe's citizens have been spared by the successive crises we were recently confronted with. In her view, **the foundations to help reverse the trend are there**, national legislation across Europe can be seen as good practices, and there are many initiatives in the public and private sectors that can provide inspiration. Vice-President of the European Commission, Margaritis Schinas, and European Commissioner for Health and Food Safety, Stella Kyriakides, spoke along the same lines, emphasising that **the Commission has placed the mental health of its citizens at the heart of its priorities**. Mental health problems - which they described as a silent pandemic - affect one in six citizens and almost half of all workers in Europe, leading to an economic and social cost estimated at over 4% of GDP. To tackle this, the Commission has launched an ambitious and holistic approach covering all aspects: prevention, treatment, and reintegration, as well as combating stigmatisation.

"The comprehensive approach to mental health is one of the pillars of the European health union. What we are saying to all citizens, knowing that so many of them are facing challenges nowadays, is that 'it's ok not to be ok'." Stella Kyriakides

The burden and cost of inaction

Afterwards, H el ene Sultan-Taieb, Professor at the Universit e du Qu ebec  a Montr eal, presented a three-part study aimed at determining - for the 27 Member States of the European Union - **the proportion of depression and cardiovascular disease resulting from exposure to five psychosocial risk factors at work** (i.e., pressure at work, effort-reward imbalance, job insecurity, long working hours, and moral harassment). Once these 'attributable fractions' to occupational exposure to psychosocial risks had been determined (17%-35% for depression and 5%-11% for cardiovascular disease), H el ene Sultan-Taieb moved on to the second part of the study: determining the impact - and therefore the burden - in terms of morbidity (disability) and mortality (premature death). Once this impact has been translated into 'physical units' (i.e., Years Lived with Disability and Years of Life Lost), it is possible - and this was the subject of the third part of the study - to calculate the monetary cost. Insofar as **these costs - which are currently borne by workers, employers, and national social security systems** - result from damage caused by exposure to psychosocial risks at work, they *de facto* reflect the cost of inaction in terms of prevention in this area and **could therefore be avoided**. These results will certainly

provide food for thought in future discussions on public health priorities, as well as on the prevention strategies needed to halt the spread of work-related stress in Europe.

Psychosocial risks at work in the digital age

William Cockburn, Executive Director of the European Agency EU-OSHA, described the state of affairs within European companies and the various work-related risk factors. The OSH-Pulse study (2022) revealed that around half of the respondents were subject to high time pressure or work overload, 1/4 to insufficient communication or cooperation, 1/5 to a lack of autonomy or influence over the pace of work, 16% to violence and 7% to harassment. Moreover, **for 44% of respondents, stress at work has increased as a result of the pandemic**. Building on this, EU-OSHA's ESENER longitudinal survey showed that 1/3 of companies reported having a stress prevention plan. This rate was higher in Member States that had introduced legal provisions. Legislation is an obvious driving force. However, it is more effective if it is supported by key players, in particular labour inspectorates, the social partners and occupational health and safety experts. The survey also signalled that particular attention needed to be paid to SMEs, as around 30% of them did not report any psychosocial risks, due to a lack of awareness of the topic, a lack of expertise or specialised support, or a reluctance to talk openly about these issues. To raise awareness and provide support to companies - and as part of its new campaign on digitisation - EU-OSHA ended its presentation by discussing **the essential factors for preventing psychosocial risks in a digital world**: a human-centred approach, equal access to information, consultation and participation of workers, and transparency in the operation of digital tools.

The protective effect of job quality

Based on data from the European Working Conditions Survey (EWCS) conducted every five years by Eurofound, Agnès Parent-Thirion's presentation began by taking **stock of the prevalence of a certain number of psychosocial risks at work in Europe**. Eleven indicators were examined to reflect five major psychosocial risks: job insecurity, poor work relations, poor employment conditions, low participation in decision-making, and organisational injustice. Workers' exposure to each of these risks has a well-documented impact on their health, wellbeing, and performance. The second part of the presentation showed how, on the basis of these findings, prevention can be guided by (both at company level and at employment policy level) an instrument dear to the Dublin Foundation: the *job quality index*. This composite indicator - which, as its name suggests, gives an account of the quality of a given job - is a reliable predictor of the level of wellbeing and commitment of the workers concerned. In this way, **workers who have a good quality job according to the index have favourable scores in terms of wellbeing, health, commitment and work-life balance**. However, the opposite situation was observed for critical workers during the pandemic (e.g., healthcare workers) whose job quality deteriorated drastically, compromising their health, wellbeing, and work-life balance. Building on these findings, Agnès Parent-Thirion concluded her presentation through a more forward-looking reflection on how the European workforce will have to cope with future challenges that are likely to generate major inequalities between skilled and less-skilled workers. Amongst these challenges, labour shortages caused by demographic changes in European

countries will inevitably require measures to better guarantee the sustainability of working and employment conditions.

The vision of the European social partners

After listening to a number of presentations containing a numerical overview of the situation of psychosocial risks in Europe, it was time to hear the views of the European social partners on the issue. **Esther Lynch, General Secretary of the European Trade Union Confederation (ETUC)**, welcomed the initiative of the Belgian presidency of the Council of the European Union to put this issue at the top of the European agenda. Figures from academic research and European surveys show that psychosocial risks affect many workers, but, she insisted, it is still difficult to talk about them, to put the experiences that affect mental health at work into words. Esther Lynch expressed her concern about the future challenges facing the workplace, particularly as a result of the increasing digitalisation of the economy, which will lead to even greater pressure on workers and, to be assumed, an upsurge in psychosocial risks. Against this backdrop, Esther Lynch argued in favour of a specific Directive on psychosocial risks. According to Lynch, too many companies do not yet take psychosocial risks seriously. Therefore, they would need to be forced to do so, even if it means stepping up inspections.

For **Kris De Meester, Chairman of the Safety and Health Committee of BusinessEurope**, there is no doubt that European employers consider psychosocial risks a crucial issue, because the mental health of workers guarantees a motivated and committed workforce, the cornerstone of sustainable businesses. However, he remains cautious in regard to the approach to be favoured as, in his view, psychosocial risk factors produce paradoxical effects that can be both beneficial and detrimental to the workforce. Kris De Meester stated that if the aim of a specific Directive is to identify the elements that really help improve the situation and support social dialogue, BusinessEurope is not *per se* opposed to the initiative. He is, however, more reticent about an approach centred on risk analysis.

Valeria Ronzitti, Secretary General of SGI Europe was delighted that the issue of mental health, as a broader public health policy, was being highlighted by the Belgian presidency and by the Commission. She pointed out that the European social partners had identified stress as a structural problem in the workplace as early as 2004, when they concluded a framework agreement on the subject. She pointed out that the public sector is unique in this respect: employers and employees are in the same boat when it comes to staff shortages, difficulties in recruiting or retaining staff, and increasing pressure, the latter being tested severely by the pandemic. She declared that she was in favour of dialogue between the social partners on this issue, and open to the possibility of this leading to a Directive.

Concluding the panel of social partners, **Danny Van Assche, representing SMEunited**, said he was opposed to any legislative initiative. In his view, this would only generate additional red tape and stress for the self-employed and entrepreneurs. *Instead*, he advocated working on the culture of organisations.

The deleterious effects of precarious work on mental health

The Council Conclusions on mental health and precarious work of 9 October 2023 - promoted by the outgoing Spanish Presidency - aim to encourage the Member States, the European Commission, and the social partners to take actions to combat precarious work. Precarious work is work that is "poorly paid, insecure and unprotected and does not provide a family's livelihood". **This work can lead to problems in health management.**

According to the Council Conclusions, the Member States should be able to guarantee a high level of work experience, with a commitment to social dialogue. Workers with mental health problems should be able to remain at work and reintegration into the workforce should be possible. Member States must help workers avoid psychosocial risks. To this end, the Commission should also adopt an appropriate policy on psychosocial risks and provide for the right of disconnection. Employers should include psychosocial risks in their risk analysis and promote collective prevention measures in the workplace. Social dialogue is of paramount importance here.

The various actors contributing to better mental health, such as the government and health services, should be strengthened and coordinate their actions. The commission should improve the information data on precarious work and mental health problems so that it has qualitative data to conduct policies that also aim to provide tools and share good practices.

Member States should take actions to overcome the stigma surrounding mental health problems and must pay attention to scientific research, sensibilisation and training and the enforceability of their legislation.

Navigating the storm: preventing psychosocial risks in times of crisis

The Covid-19 pandemic has shown that a crisis is likely to increase exposure to certain occupational risks. The aim of this parallel session was to determine the impact in terms of psychosocial risks. To understand the mechanism, the session began with a presentation by Professor Evangelia Demerouti, author of the indispensable JD-R (Job Demands-Resources) model, who outlined the recent adaptation of her model to times of crisis. She **described the impact of the crisis on the balance - crucial to workers' wellbeing - between demands and resources within organisations**, and the levers available for taking preventive action in such a context. It is clear that in such circumstances, appropriate leadership and management are fundamental. At the same time, she stressed that workers can also initiate bottom-up interventions to mitigate the effects of the crisis and preserve the balance between the demands they face and the resources they need to deal with them, for example by taking breaks to recuperate.

This session also provided an opportunity to look at two contrasting situations in terms of exposure to occupational risks during the crisis. The first of these, that of **teleworkers**, was analysed by Professor Michel Ajzen. He highlighted the fact that teleworking, the use of which became widespread during the crisis and was then normalised in the aftermath, is not a panacea in terms of wellbeing at work. Academic research has revealed the negative

effects of hybrid working, including the fact that the absence of co-presence between workers is likely to lead to a loss of meaning at work. To counter this, Professor Ajzen emphasised the role of front-line managers who can reinvigorate the collective dynamic by balancing remote work with moments of co-presence. The second situation - that of **so-called 'essential' workers**, who found themselves on the front line at the height of the crisis - was addressed by Professor Meinald Thielsch, who set out to describe the imbalances faced by crisis centre workers. For these workers, trained to perform sprints on an episodic basis, the pandemic was like running a marathon without the training or resources to do so. Professor Thielsch therefore called for the number of staff in crisis centres to be increased, and for them to benefit from a training plan to deal with crises more calmly. At the end of the session, there was no doubt that lessons could be learned from past experiences to better anticipate future crisis episodes.

Harmonising a legislative framework for psychosocial risks

This session covered the idea that several international legal instruments already provide for the principle that psychosocial risks caused by work and should be taken into account when formulating a policy on wellbeing at work. This is the case, amongst others, in the Universal Declaration of Human Rights, the ILO Declaration on Fundamental Principles and Rights at Work, ILO Conventions No 155 (safety and health at work) and No 190 (violence and harassment at work) and the Council of Europe's European Social Charter.

At the European Union level, the **European Pillar of Social Rights** is particularly important. Although psychosocial risks are addressed in a number of European directives and European social partners' agreements, the issue of mental health is really addressed for the first time in European Commission Communications of 28 June 2021 'EU strategic framework on health and safety at work 2021-2027: Occupational safety and health in a changing world of work' and of 7 June 2023 'A comprehensive approach to mental health'.

Meanwhile, several EU Member States have regulations that address certain aspects of psychosocial risks, either in-depth or more surface-level. The fact that regulations vary widely across EU Member States means that not all Member States offer the same level of protection to their workers. It is essential that the EU and national levels are brought together. **A legislative initiative at the EU level was therefore deemed necessary to achieve a 'level playing field'**. Such an initiative is important because it appears that the obligation to comply with legislation is one of the main reasons for employers to take action regarding wellbeing at work.

A specific directive on psychosocial risks fits best within the framework of OSH regulation and should therefore be based on Article 153(1) and (2)(b) TFEU. This directive should include at least the following elements: the scope, a coherent definition of psychosocial risks, the role of all actors in the enterprise involved in the elaboration and application of the wellbeing policy with particular attention to information and training. It must also establish a set of minimum prevention measures taking into account the characteristics of the job, work organisation, interpersonal relations at work, working conditions and the physical working environment. Finally, the employer must pay attention to the interaction between the various risk factors that determine psychosocial risks.

Shaping healthy workplaces together

"Shining a light on mental health, it is shining a light on you, on social partners and all of you here. Shaping healthy workplaces together, it starts with the acknowledgment that mental health is part of occupational health and safety."
Lieve Verboven, ILO-Brussels

In this session, the floor was given to European and national social partners who came to present joint initiatives. The European social partners from the construction sector described the specific features of working conditions in their sector: a changing work environment, long working hours, mobile working, activities impacted by technological developments and economic recessions. The project they presented focused on aspects such as the content and organisation of work and its requirements. Additionally, the hospital and healthcare sector - one of the largest in Europe, and already experiencing severe constraints before the pandemic - developed a project focusing on staff recruitment and retention, the ageing workforce and the growing demands and expectations of patients. Finally, the National Labour Council presented its recommendations to Belgian companies and sectors on the prevention of burn-out.

The presentations described a number of success factors for achieving consensus between the social partners. To start, psychosocial risks need to be recognised as **part of health and safety at work**. The social partners need to develop a common understanding of the issue by acquiring knowledge and experience so that they can work and make progress in this area. Successful action plans are those that include actions aimed at rapid improvement, but also propose future-oriented actions aligned with a longer-term perspective. Secondly, psychosocial risks need to be **tackled in a holistic and integrated way**. To be effective, the approach must target the organisation and not just individuals. It also needs to be tailored to the **specific** characteristics of each company and sector. For example, violence by third parties is a critical issue in the healthcare sector, while the construction sector is confronted with major difficulties stemming from lack of knowledge of the national language on site. In short, there is no one-size-fits-all solution.

Additionally, creating a healthy workplace is a **shared responsibility**. This means, for instance, that there must be internal support at the company level. One of the recommendations of the Belgian National Labour Council is that managers must be educated on the concept of psychosocial risks and their impact on workers. It is also recommended that experts from different disciplines and scientists be involved in the development of evidenced-based projects. It was also stressed that a **bottom-up**, participatory approach at company level is an important factor for success. Finally, the speakers highlighted the need for communication on and the sharing of good practices. Wherever measures are taken, wherever agreements are reached, these can inspire other initiatives and promote a virtuous circle.

"If social dialogue is a key to shaping healthy workplaces together, there is also a need to cherish the social dialogue and really create an environment that helps them to continue to work on consensus building".

Politicians at the bedside of citizens' mental health

Belgian Deputy Prime Minister and Minister of the Public Service Petra De Sutter stressed the importance of having European legislation in this area in order to provide the same level of protection to all workers throughout Europe. She also highlighted **Belgium's holistic approach**, describing how four ministers had joined forces in a programme for the mental wellbeing at work of workers, civil servants and the self-employed. This plan has enabled the recruitment of more inspectors, investment in scientific research, and the provision of free-of-charge risk analysis tools. Moreover, the public sector has introduced the right to disconnect, which quickly inspired the private sector. Additionally, a first-line support service has been set up for the self-employed. Lastly, a federal network for mental health at work was established, bringing together the various government departments responsible for this area.

Lilian Tschan, Permanent State Secretary in the German Federal Ministry of Labour and Social Affairs, then took the floor to say that - while the COVID-19 pandemic had affected everyone - it had particularly impacted those who were already under pressure before the crisis, notably due to a lack of skilled workers. She emphasised that many lessons could be learned from this period, and that the knowledge accumulated in recent years was key in preparing for the future and anticipating future crises. With this in mind, Germany has launched a programme to create "crisis-proof" workplaces designed to prepare businesses for the consequences of climate change.

"If we are aware that we can manage to navigate the storm, we have a good chance of raising our shared experience potential." Lilian Tschan

For **Javier Padilla, Spain's Secretary of State for Health**, strong social dialogue is fundamental for the improvement of working conditions. A study on the situation in Spain has shown that around 200,000 episodes of depression could be avoided each year if precarious workers had stable jobs. In Spain, following the example of the World Health Organisation, all policies (environment, education, etc.) must be assessed regarding their potential impact on the health of the population before they are adopted.

"We should go in the way of democratising the workplaces, democratising all the places where workers are participating, knowing that they are having less participation now than they had a couple of decades before." Javier Padilla

The Commission opens a door that has long remained closed

European Commissioner for Jobs and Social Rights Nicolas Schmit began his speech by saying that although mental health has long been neglected, it is now at the heart of the Commission's priorities. He singled out three developments in the world of work which, in his view, are likely to aggravate the existing link between the experience of work and mental health problems: the increasing use of new technologies, which are putting excessive pressure on workers; performance evaluation procedures based on artificial intelligence, which are increasing control and surveillance; and finally, the lack of a framework for teleworking, which is making it difficult to disconnect. There are various reasons why the Commission intends to take up this issue. Social, firstly, because mental health problems are a source of suffering for the workers affected. Economic, because the cost to the economy, social security institutions and businesses is anything but negligible. Demographic, finally, because in a context of labour shortage, it will become imperative to better respect and protect workers by improving their working conditions. Commissioner Schmit then mentioned the **initiative for peer review of European legislation on the prevention of psychosocial risks** that the Commission is preparing to launch in the first half of 2024. To conclude his statement, Commissioner Schmit opened the door to a legislative initiative by declaring:

"Do we need a European instrument or a Directive [...] to improve the mental wellbeing of workers? [...] I think that would probably be useful."

Realistic optimism to help improve our social model

Belgian Deputy Prime Minister and Minister of the Economy and Employment Pierre-Yves Dermagne concluded the first day of the conference. Drawing on the figures presented by Professor Sultan-Taïeb and the EU-OSHA agency, as well as on national figures on the alarming rise in work incapacity caused by depression or burnout, the Minister stressed the importance of the link between mental health and work. He emphasised that - in addition to individual suffering, which must remain the main driving force behind action - the social and economic cost to society is also steadily increasing to such an extent that it should now be able to convince even the most sceptical or utilitarian. To buck these worrying trends - which have been partly exacerbated by the recent crises - he stressed **the decisive role of one of the pillars of the European social model: social dialogue**. When the social partners negotiate on the basis of solid on-the-ground experience and manage to agree on the measures that need to be implemented to prevent risks, they co-construct solutions that favour quality jobs and have a protective effect on the mental health of the workers who benefit from them. However, while Minister Dermagne was optimistic about the good practices presented by the social partners during the conference, he insisted on the need to be realistic. The determination of the social partners and the growing awareness of the problem are not enough to reverse the recorded trend. Accordingly, he said:

"I think we can conclude that specific European legislation on the prevention of psychosocial risks in the workplace is now a necessity".

With this in mind, the Minister welcomed the European Commission's initiative to organise a peer review of the existing national legislations in this area, which should support the process of drawing up a European legislative framework in this field.

Start-Stay-Return to work: an inclusive labour market and the continuum of preventions

“We need to understand that national frameworks do not exist in a vacuum and that the complexity of the issues to be tackled requires well-coordinated efforts from all those with a responsibility to prevent harm from exposure to psychosocial risks, to protect those already affected by any mental health condition and to enable return to work of those already suffering from a mental health condition.”

– Joaquim Pintado Nunes, ILO

During the second day of the conference on mental health and work, there was a strong emphasis on the importance of adopting a holistic, flexible, and inclusive approach to mental health. This approach should integrate prevention at all levels - primary, secondary, tertiary - resulting in the creation of an inclusive labour market that considers the diverse needs and occupational statuses of individuals facing mental health problems. It was acknowledged that these problems can stem from work-related concerns but can also be intertwined with broader transnational challenges such as the Covid19 pandemic, the war in Ukraine, climate change, the digital and green transition, the aging of society, and more.

The significance of addressing mental health concerns, particularly its link to work, was underscored as a strategic necessity. Mentally healthy people are more productive, creative and resilient. Furthermore, there was a plea for enhanced investments in mental health, highlighting the social and economic return on investment that comes with it.

Europe's role in this context is two-fold. On one hand, the Union functions as an arena to learn from each other. On the other hand, it upholds the European Pillar of Social Rights, which includes access to care and healthcare as one of its 20 principles. Another of the core principles within the European Pillar of Social Rights is the promotion of equal opportunities and access to the labour market, encompassing active support to employment. A third significant principle relates to social protection and inclusion, particularly focusing on the integration of individuals with disabilities. The second day of the conference aligns within this intersection.

The Belgian Ministers expressed their commitment to reaffirm the European Pillar of Social Rights for the next 5 years to come, aspiring towards a Europe that cares, prepares and protects, attributing active roles to the social partners and civil society.

START to work: an inclusive labour market for people suffering from mental health conditions

Access to employment for individuals with mental health conditions is an increasingly pressing issue that will emerge as a flagship concern in our rapidly evolving societies, marked by successive crises. Indeed, mental health can no longer be addressed in isolation; all clinical approaches will ultimately fall short without facilitating the employment of patients in the long term. The facilitation of access to the labour market is part of the goals set out by the European Pillar of Social rights, as well as social protection and inclusion in general.

However, for individuals experiencing mental distress, employment cannot be solely viewed as occupational. Access to qualitative work, alongside long-term prospects, are two essential conditions for ensuring inclusivity in the labour market.

"Start-to-work" is closely linked to all levels of prevention. Some individuals have never truly had access to the labour market, while others, who have been incapacitated for a long time, will struggle to integrate into a return-to-work programme. Furthermore, we recognise that an integrated approach can no longer overlook the life and health impact assessment, on one hand, and the importance of consideration regarding the impact of other policies on citizens' mental health at all significant stages of their lives (childhood, adolescence, education, career, retirement, illness, etc.), on the other.

With these findings in mind, the following points were debated during the session.

Panel experts argued that there is still a significant stigma surrounding mental health issues in the workplace - hindering the inclusion of affected individuals - and have emphasised the importance of awareness raising and the combat against stereotypes to create a more inclusive work environment. To fight the stigma, it is important that employers are educated on mental health, how to deal with it in the workplace, and how inclusion can result in better outcomes and returns on investment for the company.

As a starting point, wellbeing needs to be considered across all policies. There should be more specific legislation addressing mental health conditions in the workplace, particularly on support and recovery. Occupational service systems need to be reformed, with a focus on the public health vision rather than full privatisation. Moreover, a cross-policies public approach should be adopted, particularly towards education. Policies should build on a life-cycle approach, considering their impact across different stages of life. Social protection policies should aim to combat stigma and discrimination, incorporating life impact assessments. Prevention and inclusion in all policies, or including mental health aspects across all policies, would prevent the rise of mental health issues from early age to elderly age. We could also switch from a "one size fits all" approach to a person-centred approach where jobs fit people.

Without co-creation - involving collaboration with stakeholders such as experiential expert or patients - it would be difficult to create successful and sustainable initiatives. Considering subsidies and support to SMEs and self-employers would help to balance the risk of hiring employees that do not fit the job without accommodation, the latter would then also be considered as "safer" hiring, meaning that there is more assistance perceived. Data shows that several initiatives focussed on the inclusion of people suffering from mental health conditions have had good results, both on the employee and employer side.

It is imperative that the generation of data on the inclusivity of - and access to - the labour market for individuals facing mental health challenges is continued through multidisciplinary studies and documented field experiments, as support programmes need a scientific basis. For example, field experiments measuring discriminations in regard to qualified jobs could lead to adjustments in policies and job support.

Additionally, there is a need for the quantifying of the return on investment for employers as well as the return on investment of initiatives in this field. This would also be relevant for Member States that - by incorporating mental health into their policies and providing subsidies to support access to quality, skill-matched, and sustainable employment for individuals with mental health issues - will see their return on investment not only in terms of the decrease of costs relating to social protection systems but also in terms of societal costs in a broader sense. Setting goals and quota - for example, regarding the employment rate of people suffering from mental health issues - would help Europe form a combative culture against stigma and exclusion.

It is urgent to aim for long-term employment solutions instead of patchwork of short-term jobs, fostered not only through wage subsidies but also through modified workplaces as well as tailored and supported employment. The latter is crucial when addressing additional reasons of exclusion such as digitalisation, gender gap, and other vulnerable groups. This cannot happen if social dialogue and social bargaining is not fostered.

STAY at work: secondary prevention from an EU-perspective

Mental health and work: benefits of early detection, referral and care

Considering the negative correlation between long absences and return to work, early detection, referral, and care of workers facing symptoms of mental distress are of tremendous importance to prevent the aggravation of symptoms that may potentially lead to more serious conditions or comorbidities. To do so, organisational and individual factors that may have led to the development of mental health problems need to be considered in order to act accordingly. Based on Belgian, Finnish, and French experiences, the workshop "STAY at work: Secondary prevention from an EU perspective" discussed the question of early identification and the management of first signs of mental health problems at work. On the basis of the presentations given by Caroline Dendoncker (Belgium), Professors Salla Topinnen-Tanner (Finland) and Olivier Torres (France) and the ensuing discussions, the following points were highlighted.

The expertise needed for combined action

Secondary prevention focuses primarily on early detection, referral, and care of psychological distress at work. Such actions are known to improve chances for positive health outcomes as well as having a positive effect on the retention and return to work of individuals experiencing work-related psychological distress.

The workshop highlighted the importance of identifying the appropriate resources for mental health and prevention in the workplace. While everyone can be called upon to

identify signs of psychological distress in others, not everyone is in a position to assess, refer and/or provide the most appropriate help for the difficulties encountered. That is why it is vital that the early detection, referral, and care of psychological distress be entrusted to professionals with the necessary expertise in mental health and the world of work. The quality and type of interventions implemented will depend on the quality of the assessment carried out. We therefore need to be able to build and strengthen a network of competent professionals trained in the detection, monitoring and support of psychological distress in the workplace.

Early detection of work-related psychological distress enables the difficulties encountered at the organisational and individual level to be identified quickly. To carry out this task successfully, those involved in workplace prevention and healthcare are key players. Their joint mobilisation facilitates the combined implementation of actions in the workplace at both individual and more collective levels. It also facilitates rapid referral to specialised, personalised and appropriate support. In so doing, it helps to prevent the aggravation of the suffering detected, the onset of co-morbidities or long-term illnesses with serious consequences for workers, employers, and society as a whole.

The development of an integrated, multidisciplinary and interdisciplinary approach should be encouraged. Communication, collaboration, and coordination between players at all levels of prevention (primary, secondary, tertiary; occupational health and/or safety professionals, healthcare professionals, HR, social partners, etc.) should enable actions to be promoted and implemented at a more structural level through primary prevention.

[The importance of access to inclusive prevention at work](#)

The stigma attached to both mental health and the use of professional care is an obstacle to effective prevention. Education, information and awareness-raising about mental health and the interactions between mental health and work are an essential first step in combating this stigma.

The experts placed emphasis on the need for prevention to be accessible to all. Everyone must be able to access occupational health prevention services and receive the help they need. No category of workers should be overlooked, and consideration should be given to the specific characteristics and challenges faced by different groups of workers (e.g., the worker, the employee, the employer, the entrepreneur, the small business owner, the self-employed, etc.). Preventive measures, such as monitoring mental health at work, screening, guidance, and support, need to be tailored to the reality of each individual.

For instance, the number of self-employed workers, small business owners and entrepreneurs is increasing rapidly in Europe. However, there is still little research on the mental health of these types of workers and their particular characteristics. The same event with no major consequences for a large company can have significant consequences for a small business, especially in terms of health. There is a lack of knowledge on how best to support these categories of workers, who are often left to their own devices and face numerous challenges related to their professional situation.

We were also reminded of the importance of thinking about prevention not only in terms of work incapacity, but also in terms of work capacity as individual, dynamic and variable, changing over the course of a lifetime. Therefore, in order to build and maintain an

inclusive labour market, personal factors that can influence work capacity (such as age, for example) must be taken into account when assessing psychosocial risks.

Developing research, using validated tools and implementing evidence-based programmes

To help prevention and health actors in their missions, scientific studies - such as epidemiological studies - to support and refine knowledge on the links between mental health and work in different occupational categories are warranted and would enable the development of specific and adapted initiatives.

It is also imperative to design and use practical, scientifically-validated tools to detect and take action at the earliest signs of psychological distress. Some secondary prevention tools and programmes already exist in various countries (e.g., Belgium, Finland, France). The next challenge will be to encourage wider use of such evidence-based tools, programmes and models throughout the European Union, at all levels of prevention.

RETURN to work: good practices with a focus on IPS from an EU-perspective

Based on international experiences, this session highlighted the importance of support for individuals with mental health problems returning to work. The focus was on the evidence-based supported employment programme "Individual Placement and Support" (IPS). Afterwards, a concrete shift was made to the implementation of return-to-work programmes and what the EU can do in this respect. The workshop started with an overarching presentation by Dr Jaap Van Weeghel, followed by a roundtable discussion led by Dr Saskia Decuman, Lars De Winter, Angelo Fioritti and Hlynor Jónasson.

The support of individuals with mental health problems: the importance of return-to-work

Individuals with mental health problems require action at both the individual and the collective level, encompassing factors such as organisational culture - taking into account the mental health of their employees - and return to work policies that are flexible. Tertiary prevention should be closely connected to primary and secondary prevention efforts. It is therefore crucial to have enabling work contexts - i.e., healthier work environments and healthy labour policies - that foster a work environment that sustains motivation and, ultimately, mitigates the risk of work incapacity. In addition, we would like to point out the relevance of an active labour policy that adopts a positive approach towards individuals with a mental health problem, thus focusing on work ability. It is necessary to integrate a global approach of the different levels of prevention to prevent work incapacity, together with a tailored approach that considers the distinct needs of each individual.

We need to support workers with mental health conditions to participate fully and equitably in the labour market through reasonable accommodations, return to work programmes and supported employment initiatives. The majority of individuals with mental health problems would like to have a paid job. However, a proportion of them are

unemployed. Aiding individuals with mental health problems in a supported return to work is imperative. Therefore, various supported employment programmes should be recognised and made accessible for individuals with mental health issues. The return to work is an important component of both recovery and the overall mental health of an individual. It can be viewed as 'recovery in action'.

“Recovery is a choice and Individual Placement and Support (IPS) programme is one of these choices.” - Catherine Brogan, President of Mental Health Europe

IPS as example of an evidence-based practice

IPS-methodology is an evidence-based “place-then-train” model characterised by the intensive support of a job coach to attain sustainable and inclusive employment. The IPS methodology has proven its effectiveness abroad in regard to the reintegration of people with moderate to severe mental health problems. One of the principles of the model is to accompany these people with the job search as early as possible and to continue to offer them individualised and sustained support after they have found a job. The IPS methodology is already used in 18 EU Member States. Further research is required to assess the cost-effectiveness of IPS, as well as other supported employment programmes.

The target group of IPS covers individuals with moderate to severe psychological problems. It is noteworthy that the determination of moderate to severe is not solely tied to the severity of the pathology and is also determined by the fact that the individual is motivated to go back to work, needs intensive support and will not resume spontaneously.

The inclusion of individuals with disabilities holds significant importance in this context. IPS is one of the evidence-based methodologies that contribute to the fostering of an inclusive labour market. The characteristics of IPS that play an important part in this are its holistic and intensive approach. It is important that IPS is made accessible to everyone, with the primary condition being the required motivation to work, as per the zero-exclusion criterion. The most important aspect lies in the individual's commitment and motivation to engage in employment.

Breaking silos by implementing IPS

IPS is characterised by an intensive approach, coupled with an integrated vision addressing the challenges and potentials of the individual. It also considers environmental factors and conditions, making it particularly suitable for the target group. Furthermore, it embodies an integrated approach which creates a bridge between the sector care and the sector work with a maximum attention to critical preconditions, including environmental and social factors (e.g., housing). The job coach operates within the society itself, possessing an extensive knowledge of the social landscape and the capacity to refer to other services when needed.

In general, it is imperative to align healthcare and employment sectors, particularly in the context of supported employment programmes. It should be defined as a learning collaboration where every stakeholder in a specific sector can learn from one another and where there is respect for each other's expertise and experience. The implementation of

supported employment programmes like IPS encourages us to break free from our isolated approaches or "silos."

It is essential to enhance the cooperation among policy, employment, and mental health levels through the whole-system approach. Each stakeholder must actively take their responsibility and engage in efforts at every level. Besides evidence-based supported employment programmes such as IPS, we also need accessible, recovery-oriented mental health care, decent work and mental health awareness in the workplace, and lastly social policies aimed at an adequate standard living for all citizens.

IPS is a sustainable model susceptible to a rapid implementation. It requires minimal initial capital and training, and can be implemented in diverse settings. A significant barrier to the implementation of IPS lies in cultural and value-related factors. This poses a challenge for both the mental health sector and the employment sector when considering programmes like IPS. Therefore, there is a crucial need for a cultural shift to fully recognise and address this issue. It all starts with the motivation, needs and choice of the individual itself. In most European countries it is still an underdeveloped reasoning that work can function as a psychosocial intervention, and it is only beginning to make inroads into European mental health policies.

The importance of monitoring and collaboration

In the implementation of return-to-work programmes, we would like to emphasise the importance of research and (data) monitoring. Research plays an important role in the nourishing of quality assurance through a cycle of continuous quality improvement. Research also helps with gaining new insights and innovation. Sharing these results and insights across Europe is an important avenue to pursue. In the context of IPS, quality assurance can be achieved through fidelity reviews, which are a crucial key factor in the implementation process.

The European Union has the possibility to not only support evidence-based supported employment programmes through financial means, but also to strengthen the collaboration among different Member States in the context of good practices such as IPS. Facilitating structural exchange between Member States at the EU level is essential, aiming to tackle common challenges and overcome obstacles while also disseminating good practices. Moreover, such an exchange and collaboration should be done in a coordinated manner, giving maximal attention to common factors at the EU policy level and ensuring equal access for all Member States. The objective is to streamline the exchange of expertise related to the dissemination, implementation, and evaluation of good practices such as IPS throughout Europe.

Continuum of preventions: conclusion

In the wake of numerous crises, it has become evident that a multidisciplinary and comprehensive approach to mental health is imperative. Isolated actions are no longer sufficient to address the complex challenges we face. Mental health should begin to be considered at the earliest stages of life, from nursery to school and beyond. There should be no shame in seeking help and support - never mind the stage - as it is a vital step towards wellbeing.

Mental health aspects are so crucial that they could be integrated into ESGs (Environmental, Social, and Governance). We know also that Human resources are a consequent part of the value chain of organisations/companies.

Patients' experience holds invaluable insights that can significantly influence the way we design responses to mental health challenges. It is crucial to recognise that 20% of individuals are confronted with mental health challenges daily, and this statistic has the potential to change lives.

Adopting policies based on the premise "it could be me" has the power to transform our approach to mental health care. Collaboration across departments - from cradle to grave - is essential for comprehensive support. Despite having strategies in place, there is often a failure to integrate them effectively. Building bridges between different initiatives is essential to having a positive impact on people's lives.

The growing trend of mental health issues among younger populations highlights the urgency of addressing these challenges. While legislation plays a role, true progress requires awareness-raising and taking concrete actions. Although there are many promising practices and experiments, integrating them into a cohesive system remains challenging due to the existing silos and the lack of collaboration among stakeholders.

Personalised itineraries and social funds can play an important role in the support of individuals throughout their mental health journeys. Legislation must be adaptable and open to feedback from social partners to ensure effective implementation in the real world. Communications from the European Commission and the Council reflect a growing awareness of mental health issues.

Investing in training for employers and managers is essential in the creation inclusive workplaces that prioritise mental health solidarity. Addressing inequalities in mental health care outcomes requires tailored support as well as a commitment to diversity and inclusion at all stages of life and work. Employers have a responsibility to support employees' mental health, even if they are not experts in the field.

Inclusive practices must extend to all stages of employment - from recruitment to promotion - with policies that are co-created and flexible. Research into various aspects of life and their impact on mental health is essential, warranting specific focus in initiatives of funding programmes for research and innovation. Developing the European Social Pillars is crucial for improving conditions across all stages of life and work.

Encouraging employers to hire individuals with disabilities, including mental health issues, with subsidies can promote inclusivity and diversity in the workforce. Creating an inclusive labour market for individuals with mental health conditions at every career stage is essential. Peer review and legislative action are key milestones to ensure ongoing progress in mental health support.

In conclusion, addressing mental health challenges requires a concerted effort from all stakeholders, with a focus on integration, inclusivity, and continuous improvement. By working together, we can create a society where mental health support is accessible to all, regardless of background or circumstance.