

A high-angle, blurred photograph of a busy city street with many pedestrians crossing a zebra crossing. The motion blur gives a sense of a fast-paced, crowded environment.

# QUALITY OF LIFE: MENTAL HEALTH AND WELL BEING, RISK FACTORS, RISK GROUPS AND RISK MANAGEMENT AT WORK

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# MENTAL HEALTH AND WELL BEING

***Mental health is a positive state of psychological well-being (WHO):***

mental health as a state of well-being in which every individual


- realizes his or her own potential,
- can cope with the normal stresses of life,
- can work productively and fruitfully, and is able to make a contribution to her or his community.

The definition of mental health as the absence of mental health disorders is a more conservative one.

# THE OUTLINE OF THE PRESENTATION

- › The prevalence and impact of mental ill health
- › The changing world of work
- › EU trends and quality of work in Hungary –versus- Europe
- › Prevention and psychosocial risk management
- › Overall evaluation and issues for discussion

# THE PREVALENCE OF MENTAL ILL HEALTH

- › 38.2% of the EU population suffers from a mental disorder each year
- › Most frequent disorders:
  - › Anxiety (14%)
  - › Insomnia (7%)
  - › Major depression (6,9%)  the most debilitating condition
- › People with severe mental disorders are far away from the labour market
- › Majority of people with common mental disorders are employed; but at risk of job loss and (permanent) labour market exclusion
- › Mental health problems are still relatively unrecognized, underdiagnosed and untreated.

# THE IMPACT OF MENTAL ILL HEALTH

- › Costs of mental (ill) health are work-related and large (3-4,5 %GDP); Matrix 2013: €620 billion/year in EU
- › Major impact on employers (44% of the costs) due to absenteeism & presenteeism
- › Depression is the major mental health diagnosis for disability
- › positive mental health fundamental to business performance and population health
- › know-how is available but not used and or understood (implementation gap)
- › limited dissemination of good practice (SMEs, precarious work)

(Matrix, 2013; OECD 2012, 2015)

# THE CHANGING WORLD OF WORK: PSYCHOSOCIAL ISSUES ARE EMERGING

- Globalization
  - More temporary contracts
  - More work in the service economy
  - More precarious groups (women, migrants etc)
- New developments in information and communication technology
  - Working independent from time and place/telework
  - Bounderyless work/ Work-family conflict
  - Innovation → increase in productivity
- Demographic change:
  - More women/feminisation
  - the labour market is greying
  - More migration → more precarious workers

# PSYCHOSOCIAL RISKS AND MENTAL HEALTH AT WORK

Psychosocial risks (PSR) and mental health (MH) risks are an important part of Work and Health policy in many EU countries (Framework on OSH)

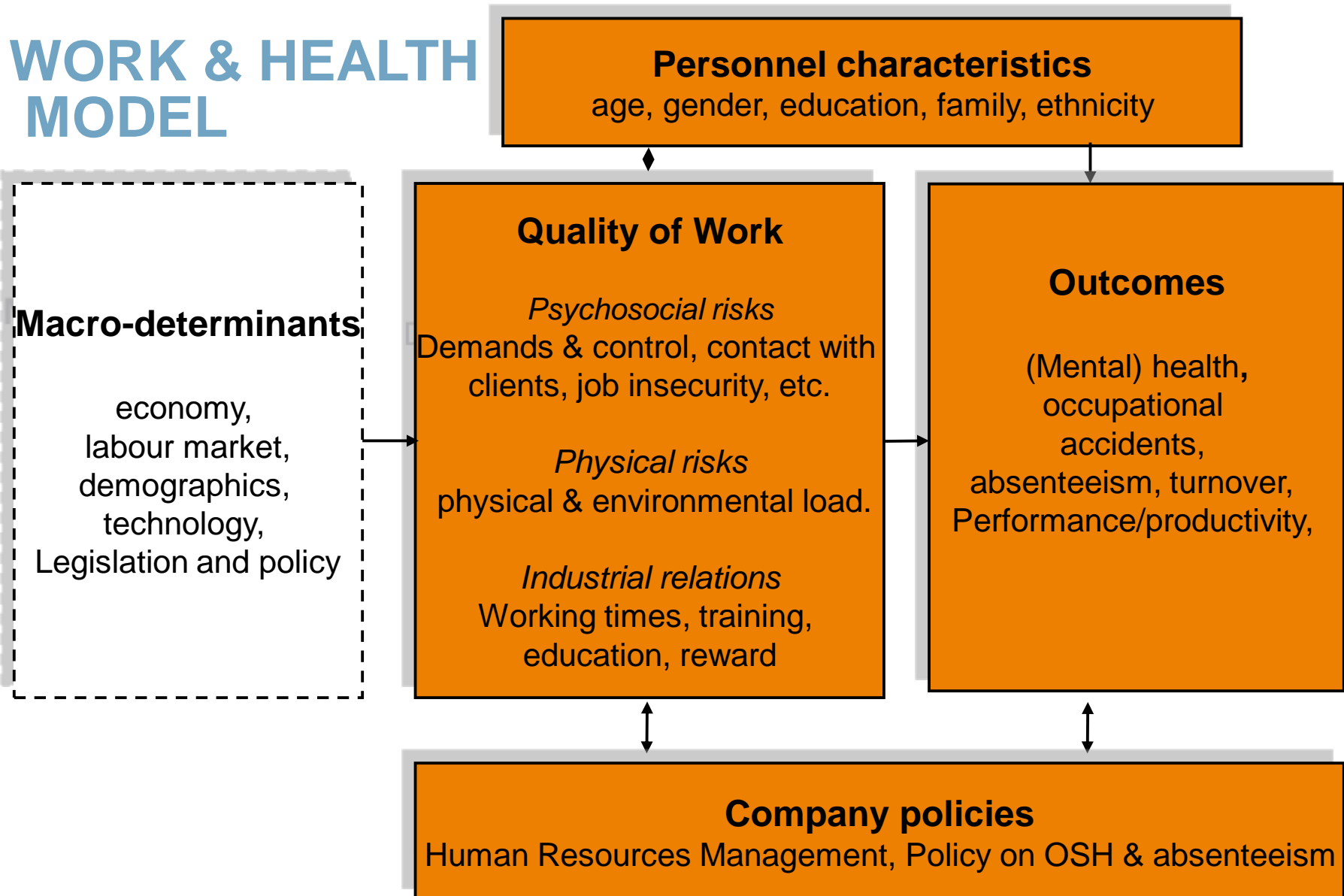


To date psychosocial risks and mental health at work are conceptually linked to the broader (policy) issue of ‘Sustainable Employability’ and ‘Sustainable Work’



Broader vision: productive and healthy workforce and prolonging working life in good health which benefits workers, companies and society as a whole

# WORK & HEALTH MODEL

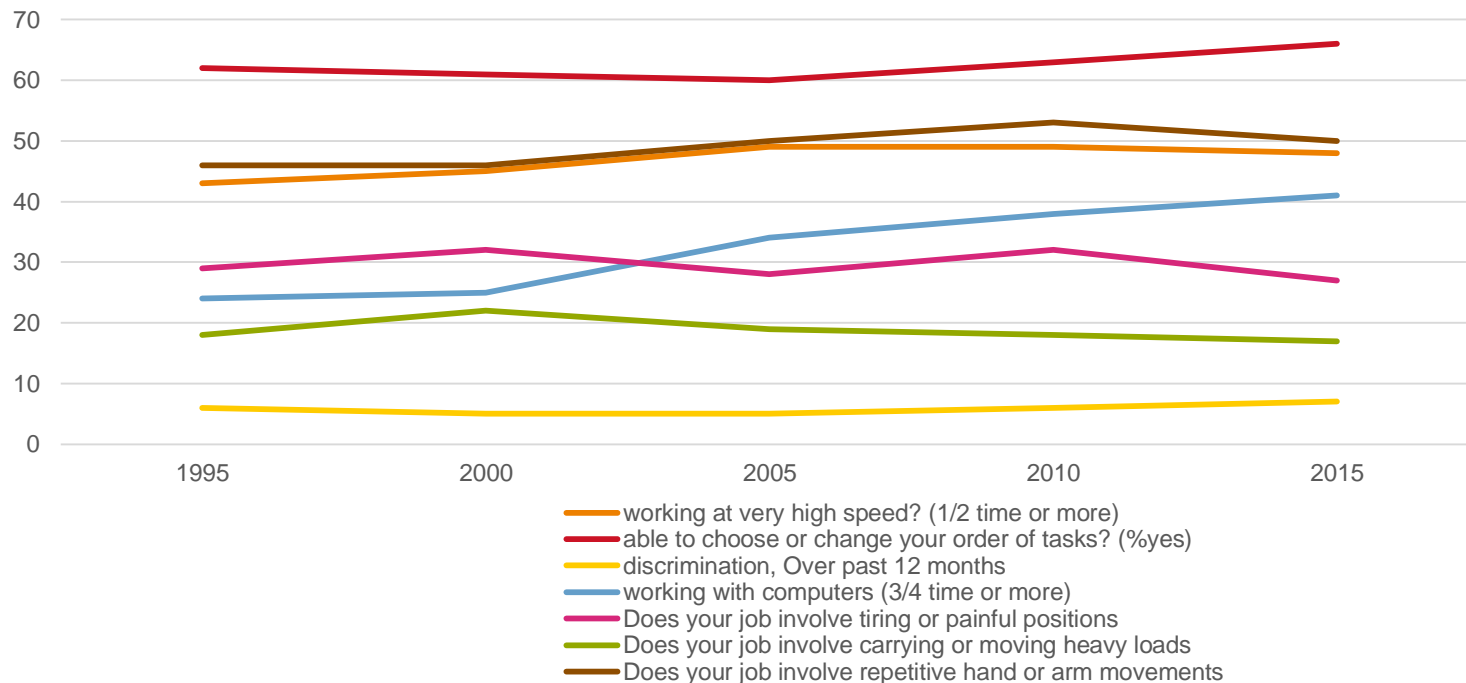




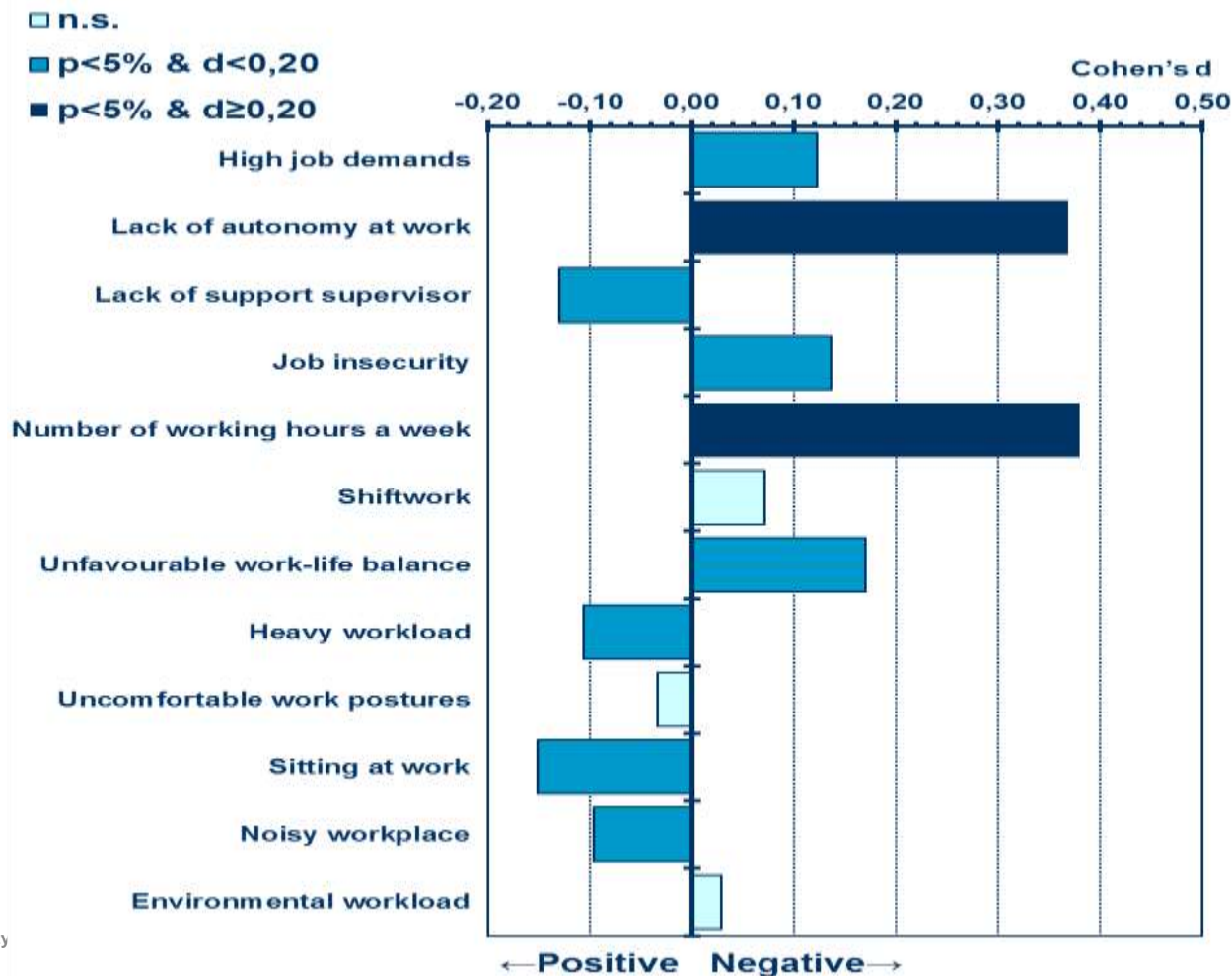
# TRENDS IN QUALITY OF WORK IN THE EU

- › Majority of the working conditions are stable
- › Working with computers (▲)

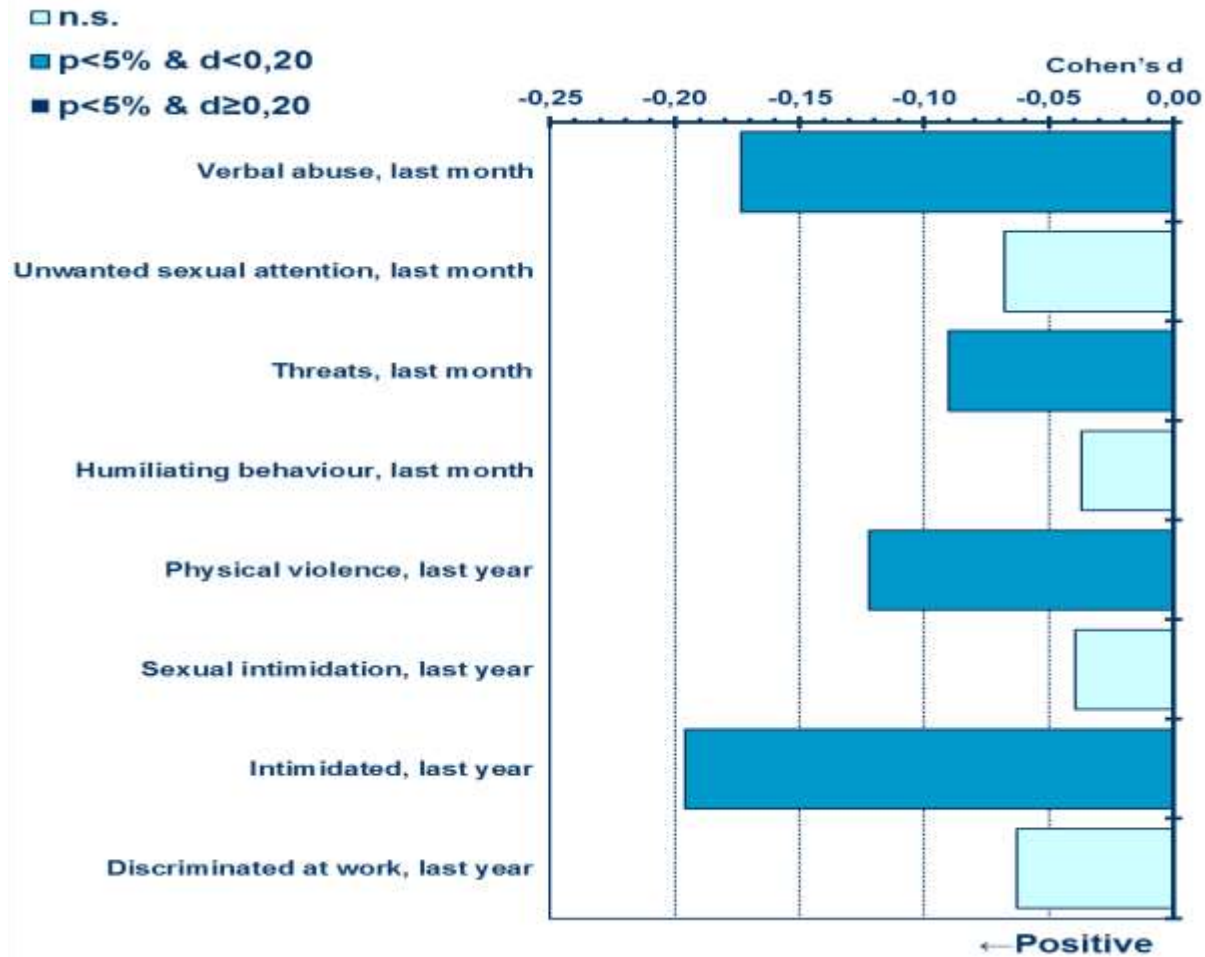
Trends in working conditions in EU-15



# LARGE DIFFERENCES WITHIN THE EU: HUNGARIAN -VS- EU WORKER



# LARGE DIFFERENCES WITHIN THE EU – 2: HUNGARIAN –VS- EU WORKER



EWCS 2015

# INTERVENTIONS ARE IMPORTANT

When possible tackle the problem at its source in organisations:

- Do's and Don't s of many tailor made interventions on psychosocial risks at the organisational level are:
  - Assure management commitment
  - Make sure employees participate at different levels
  - Make sure everyone is informed
  - Psychosocial risk management is specific: it is about psychosocial risks!
- Tool to alert and guide organisations :

<http://www.stresspreventionatwork.nl/over-spw/rekentool>

# THERE IS A NEED TO INTERVENE: MODEL

	Primary prevention	Secondary prevention	Tertiary prevention
Individual	<ul style="list-style-type: none"> <li>• Training of (e.g.) sustainable employability (work-related skills)</li> <li>• Life style</li> </ul>	<ul style="list-style-type: none"> <li>• Adjustment of the workplace</li> <li>• Reduction of (mental?) health complaints</li> </ul>	<ul style="list-style-type: none"> <li>• Adjustment of the individual workplace for 'return to work'</li> <li>• Training of 'self efficacy'</li> </ul>
Organization	<ul style="list-style-type: none"> <li>• Training supervisors/ leadership</li> <li>• Optimalisation of the workplace/ organization</li> <li>• Collaborating with other partners for exchange of workers</li> </ul>	<ul style="list-style-type: none"> <li>• Policy on adjusting workplaces in case of (individual) health problems;</li> <li>• Implementation of this policy</li> </ul>	<ul style="list-style-type: none"> <li>• Realisation of 'sheltered' work (places)</li> <li>• Return to work policy</li> </ul>

# DEVELOPMENT AND VALIDATION OF INTERVENTIONS – EXAMPLE 1

## Strategy StressPrevention@work

1. Digital portal
2. Stepwise approach
3. Learning network



# DEVELOPMENT AND VALIDATION OF INTERVENTIONS – EXAMPLE 2

## › Engagement Game

- › *Effectiveness of work-related stress interventions strongly depends on the participation of managers and the awareness of their own role in the process.*

## › New innovative approach: Serious Gaming

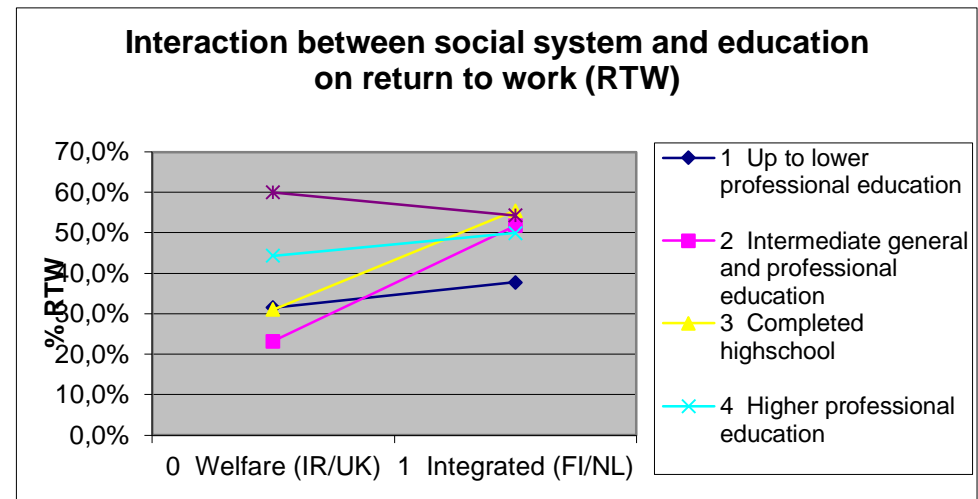
- › A positive, fun way of working on a 'sensitive' topic
- › Increasing awareness by experiencing factors that affect work-related stress and engagement
- › Creating a sense of urgency
- › Possibility of training skills
- › Promoting long-term thinking
- › Provides immediate feedback on actions
- › Creating more cooperation between managers
- › Discussion of problems and solution strategies



# RETURN TO WORK (RTW) AFTER ABSENCE DUE TO MENTAL HEALTH PROBLEMS

Factors of influence RTW in case of mental health problems:

- Duration longer in case of mental health problems
- Active support supervisor/employer is important, as well as
- Early, graded RTW
- Activating therapy, directed at providing success experiences since self efficacy is an important issue to tackle (e.g. CBT)




Source:

[http://oshwiki.eu/wiki/Return\\_to\\_Work\\_after\\_sick\\_leave\\_due\\_to\\_mental\\_health\\_problem](http://oshwiki.eu/wiki/Return_to_Work_after_sick_leave_due_to_mental_health_problem)



# IN CONCLUSION

- › Mental ill health and psychosocial risks are serious matters
- › At national, sectoral and enterprise level
- › Psychosocial risk management is important, but it is specific!
- › The positive approach may be more attractive for enterprises (engagement is more positive than burnout)
- › Whatever the approach: Do's and don'ts:
  - › management commitment,
  - › employee participation and
  - › transparent communication about psychosocial risks are key for healthy, engaging and productive workplaces!



**THANK YOU FOR YOUR ATTENTION**

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