

Guidance on work-related stress

Spice of life or kiss of death?

Health and safety at work

Executive summary



Employment & social affairs



European Commission

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Directorate-General for Employment and Social Affairs
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This publication is the executive summary of the European Commission's *Guidance on work-related stress* ⁽¹⁾, aimed at Member States of the EU, workers' and employers' organisations and a broad range of other interested bodies and individuals.

A great deal of additional information on the European Union is available on the Internet.

It can be accessed through the Europa server (<http://europa.eu.int>).

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⁽¹⁾ European Commission, *Guidance on work-related stress*, Luxembourg, 1999.

THE BACKGROUND

- Work-related stress, its causes and consequences are all very common in the 15 European Union Member States.
- More than half of the 147 million workers report working at a very high speed, and to tight deadlines. More than one third have no influence on task order, and more than one fourth cannot influence their work rhythm.
- Some 45 % report having monotonous tasks; 44 % no task rotation; 50 % short repetitive tasks. Such work-related 'stressors' are likely to have contributed to the present spectrum of ill health: 13 % of the workforce complain of headaches, 17 % of muscular pains, 20 % of fatigue, 28 % of 'stress', and 30 % of backache, not to speak of many other potentially more life-threatening diseases.
- Stress consists of a pattern of 'stone-age' reactions preparing the human organism for fight or flight, i.e. for physical activity. Stress was adequate when stone-age man was facing a wolf pack, but not so when today's worker is struggling to adjust to rotating shifts, highly monotonous and fragmented tasks or threatening or overdemanding customers. It is often maladaptive and disease-provoking.
- A conservative estimate of the fiscal costs caused by work-related stress indicates that they amount to some **EUR 20 billion annually**. Even more staggering is the resulting human suffering for many millions of European workers.

THE CHALLENGE

- According to the EU framework directive, employers have a 'duty to ensure the safety and health of workers in every aspect related to the work, on the basis of the following general principles of prevention'. The principles include 'avoiding risks', 'combating the risks at source', and 'adapting the work to the individual'. In addition, the directive states that it is the employers' duty to develop 'a coherent overall prevention policy'. This guide intends to provide a basis for such endeavours.

THE ACTIONS

- Work-related stress may be prevented or counteracted by job redesign (e.g. by empowering the employees, and avoiding both over- and underload), by improving social support, and by promoting reasonable reward for the effort invested. And, of course, by adjusting occupational physical settings to the workers' abilities, needs and reasonable expectations — all in line with the requirements of the EU framework directive and Article 152 of the Treaty of Amsterdam.

Why a guide?

Work-related stress is conditioned by, and contributes to, major environmental, economic and health problems. It affects at least 40 million workers in the 15 EU Member States and costs at least EUR 20 billion annually. It contributes to a host of human suffering, disease and death. It also causes very considerable disturbances in terms of productivity and competitiveness. Much of all this is highly likely to be preventable.

This is why the European Commission's tripartite Advisory Committee for Safety, Hygiene and Health Protection at Work recommended that the Commission should prepare the publication *Guidance on work-related stress*. The present document is an executive summary of the guide prepared in response to this recommendation.

Is there a problem?

Two EU-wide surveys have shown that a substantial proportion of the 147 million workers in the EU labour market are exposed to a variety of work-related demands or exposures (stressors), known, or highly suspected, to be stress- and disease-inducing.

Stress is caused by a bad fit between us and our work, by conflicts between our roles at work and outside it, and by not having a reasonable degree of control over our own work and our own life. Stress at work can be caused by a multitude of stressors. Some common ones include:

- over- and underload;
- inadequate time to complete our job to our own and others' satisfaction;
- lack of a clear job description, or chain of command;
- no recognition, or reward, for good job performance;
- no opportunity to voice complaints;
- many responsibilities, but little authority or decision-making capacity;
- uncooperative or unsupportive superiors, co-workers, or subordinates;
- no control, or pride, over the finished product of your work;
- job insecurity, no permanence of position;
- exposure to prejudice regarding age, gender, race, ethnicity, or religion;
- exposure to violence, threats, or bullying;
- unpleasant or hazardous physical work conditions;
- no opportunity to utilise personal talents or abilities effectively;

- chances of a small error or momentary lapse of attention having serious or even disastrous consequences;
- any combination of the above.

Some examples of work-related stress

Fred works at an assembly line. He is paid by the piece. He can neither influence the pace of his line nor the monotonous and highly repetitive tasks he has to perform, being a small cogwheel in the dynamics of a large and complex mass-production industrial enterprise.

Mary is employed in an office. Her task is to prepare form letters on a word processor. Being a divorced mother of two small children, she needs to leave her job not later than 5 p.m. to be able to pick them up at a day care nursery before it closes. But her workload is steadily increasing, and her supervisor considers it important that all letters are mailed before she leaves her job and insists on her completing the task.

John works as a system designer for a multinational information technology company. He is well-paid, his tasks are stimulating and he has great freedom to plan his work the way he likes. But his company's sales department has signed an agreement on the timely delivery of a new, complex, software system — yet to be designed by him and his understaffed project group.

Peter has been laid off by his employer, a big car manufacturer, because of the robotisation of a series of tasks formerly performed manually. Being 57 years old and with only a primary school education, he is facing long-term unemployment, probably until retirement.

These four situations are very different in many respects. Still, they have something in common, namely that they can act as powerful and chronic stressors, and activate, in exposed workers, a stone-age reaction pattern referred to as 'stress' (see below).

As will be shown below, something else they have in common is their accessibility to preventive action. Such action is now increasingly seen as a priority for all stakeholders on the labour market.

What is stress?

Stress is a pattern of ‘stone-age’ reactions that occurs in response to stressor exposures such as those mentioned above, and prepares the human organism for fight or flight, i.e. for physical activity. It is a kind of ‘revving up’, or ‘stepping on the gas’. This was adequate when stone-age man was facing a pack of wolves, but not so today when workers are struggling to adjust to rotating shifts, highly monotonous and fragmented tasks, or threatening or overdemanding customers.

Work-related stress can be **defined** as a pattern of emotional, cognitive, behavioural and physiological reactions to adverse and noxious aspects of work content, work organisation and work environment. It is a state characterised by high levels of arousal and distress and often by feelings of not coping.

Is stress dangerous?

The answer is — yes, and no.

Stress is potentially disease-provoking when occupational demands are high **and** the worker’s influence over his or her conditions of work is low, when there is insufficient social support from management or fellow workers, when the reward offered to the worker in terms of remuneration, esteem or status control does not match the effort he or she has invested and generally when such conditions are intensive, chronic and/or often repeated. Common end results include a wide range of physical and mental morbidity and even death (see below).

The answer is more likely to be no if the worker — within reasonable limits — is allowed, or encouraged, to take control over his or her conditions of work, if he or she is offered adequate social support and if reasonable rewards are offered for efforts invested.

When we feel in control, stress becomes ‘the spice of life’, a challenge instead of a threat. When we **lack** this crucial sense of control, stress can spell crisis — bad news for us, our health and our enterprise. If we feel this to be part of our everyday work, it affects the rate at which processes of wear and tear in our body take place. The more ‘gas’ given, the higher the ‘revolutions per minute’ (RPMs) at which our body’s engine is driven, the more rapidly our ‘engine’ wears out — ‘the kiss of death’.

Can work-related stress influence health?

Health and well-being can be influenced by work, both positively and negatively. Work can provide a goal and meaning in life. It can give structure and content to our day, week, year, and life. It may offer us identity, self-respect, social support, and material rewards. This is likely to happen when work demands are optimal (and not maximal), when workers are allowed to exercise a reasonable degree of autonomy, and when the 'climate' of the work organisation is friendly and supportive. If this is so, work can be one of the most important health-promoting (salutogenic) factors in life (see above).

If, however, work conditions are characterised by the opposite attributes, they are — at least in the long run — likely to cause ill health, accelerate its course or trigger its symptoms.

When we are exposed to these or related stressors, most of us experience **emotional** reactions such as anxiety, depression, uneasiness, restlessness, or fatigue.

Stress at work can also influence our **behaviours**, making some of us start smoking more, or overeating, seeking comfort in alcohol or taking unnecessary risks at work or in traffic. Many of these behaviours can lead to disease and premature death. Suicide is one of many examples.

We also react **physiologically**, with our internal organs. When we feel unjustly criticised by our supervisor, our blood pressure may increase; we may experience increased or irregular heart rate, or muscular tension with subsequent pain in the neck, head, and shoulders, or dryness of our throat and mouth, or heartburn because of overproduction of acid gastric juice.

All of these stress reactions can make us suffer, become ill, and even die — through diseases of the heart and blood vessels, or cancer (from smoking too much, or eating too much fat food and too little nutritional fibre).

In this way, virtually every aspect of work-related health and disease can be influenced. This can also be mediated through emotional, and/or cognitive **misinterpretation** of conditions of work as threatening, even when they are not, and/or trivial symptoms and signs occurring in one's own body as manifestations of serious disease.

All this can lead to a wide variety of disorders, diseases, loss of well-being, and loss of productivity. Examples discussed in detail in the guide include ischaemic heart disease, stroke, cancer, musculoskeletal and gastrointestinal diseases, anxiety and depressive disorders, accidents, and suicides.

Who is at risk?

In fact, every one of us. Every person has his or her breaking point. In addition, the nature and conditions of work are changing at whirlwind speed. This adds to the risk we run, or may run, but to a varying degree. Some groups are more at risk than others. Some determinants of this increased risk are 'Type A' (hostile) behaviour; an inadequate coping repertoire; living and working under underprivileged socioeconomic conditions, and lacking social support. Other determinants are age (adolescent and elderly workers), gender combined with overload (e.g. single parents), and being disabled. Often, those who are particularly at risk are also more exposed to noxious conditions of life and work. High vulnerability and high exposure thus tend to coincide.

Can work-related stress be prevented?

Work-related stress can be approached on four levels — those of the individual worker, the work organisation, the nation, and the European Union. Whatever the target(s), conditions are man-made and open to interventions by all relevant stakeholders.

In all cases, there is a need to identify work-related stressors, stress reactions, and stress-related ill health. As already emphasised, there are several reasons for doing this: stress is a problem both for the worker and his or her work organisation, and for society; work-related stress problems are on the increase; it is a legal obligation under the EU framework directive on health and safety; and many of the stressors and consequences are avoidable and can be adjusted by all three parties in the labour market if they act together in their own and mutual interests.

Thus, work-related stress may be prevented or counteracted by job redesign (e.g. by empowering the employees and avoiding both over- and underload), by improving social support, by promoting reasonable reward for the effort invested and of course by adjusting occupational physical settings to the workers' abilities, needs and reasonable expectations.

Approaches to be considered include participative management, flexible work schedules, and career development — all in line with the requirements of the EU framework directive and of Article 152 of the Treaty of Amsterdam.

Tools to prevent stress?

To identify work-related stress, its causes and consequences, we need to monitor our **job content, working conditions, terms of employment, social relations at work, health, well-being and productivity**. This guide provides many references to simple checklists and questionnaires to enable all stakeholders to do this.

Once the parties in the labour market know ‘where the shoe pinches’, action can be taken to ‘adjust the shoe’ to fit the ‘foot’, i.e. to improve stress-inducing conditions in the workplaces. Much of this can be accomplished through rather simple organisational changes by:

- allowing adequate time for the worker to perform his or her work satisfactorily;
- providing the worker with a clear job description;
- rewarding the worker for good job performance;
- providing ways for the worker to voice complaints and have them considered seriously and swiftly;
- harmonising the worker’s responsibility and authority;
- clarifying the work organisation’s goals and values and adapting them to the worker’s own goals and values, whenever possible;
- promoting the worker’s control, and pride, over the end product of his or her work;
- promoting tolerance, security and justice at the workplace;
- eliminating harmful physical exposures;
- identifying failures, successes, and their causes and consequences in previous and future health action at the workplace; learning how to avoid the failures and how to promote the successes, for a step-by-step improvement of occupational environment and health (Internal control, see below).

At company or national level, all three parties in the labour market may wish to **consider** organisational improvements to prevent work-related stress and ill health, with regard to the following.

- **Work schedule.** Design work schedules to avoid conflict with demands and responsibilities unrelated to the job. Schedules for rotating shifts should be stable and predictable, with rotation in a forward (morning–afternoon–night) direction.
- **Participation/control.** Allow workers to take part in decisions or actions affecting their jobs.
- **Workload.** Ensure assignments are compatible with the capabilities and resources of the worker, and allow for recovery from especially demanding physical or mental tasks.
- **Content.** Design tasks to provide meaning, stimulation, a sense of completeness and an opportunity to use skills.
- **Roles.** Define work roles and responsibilities clearly.
- **Social environment.** Provide opportunities for social interaction, including emotional and social support and help between fellow workers.
- **Future.** Avoid ambiguity in matters of job security and career development; promote life-long learning and employability.

Person-oriented measures

By following the principles mentioned above, workers and employers can adjust the ‘shoe’ to fit the ‘foot’. However, this may take time or even turn out not to be feasible in the short-term. Here, the social partners may need to resort to the complementary strategy of adjusting the ‘foot’ to fit the ‘shoe’, by offering physical exercise and/or relaxation techniques, medication, counselling, and stress management.

Internal control

Actions to reduce noxious work-related stress need not be complicated, time consuming, or prohibitively expensive. One of the most common-sense, down-to-earth and low-cost approaches is known as **internal control**.

It is a self-regulatory process, carried out in close collaboration between stakeholders. It can be coordinated by, for example, an in-house occupational health service or a labour inspector, or by an occupational or public health nurse, a social worker, a physiotherapist, or a personnel administrator.

Its first step is to **identify** the incidence, prevalence, severity and trends of work-related stressor exposures and their causes and health consequences, e.g. by making use of some of the many survey instruments listed in this guide.

In a second step, the characteristics of such exposures as reflected in the content, organisation and conditions of work are analysed in relation to the outcomes found. Are they likely to be **necessary**, or **sufficient**, or **contributory** in causing work-stress, and ill health related to it? Are they accessible to change? Are such changes acceptable to relevant stakeholders?

In a third step, the stakeholders design an integrated **package of interventions**, and implement it in order to prevent work-related stress and to promote both well-being and productivity, preferably by combining top-down and bottom-up approaches.

The short- and long-term **outcomes** of such interventions need then to be **evaluated**, in terms of (a) stressor exposures, (b) stress reactions, (c) incidence and prevalence of ill health, (d) indicators of well-being, and (e) productivity with regard to the quality and quantity of goods or services. Also to be considered are (f) the costs and benefits in economic terms.

If the interventions show no effects, or negative ones, in one or more respects, stakeholders may wish to reconsider what should be done, how, when, by whom and for whom. If, on the other hand, outcomes are generally positive, they may wish to continue or expand their endeavours along similar lines. It simply means systematic **learning from experience**. If they do so over a longer perspective, the workplace becomes an example of **organisational learning**.

Experiences with such interventions are generally very positive, not only for the employees and in terms of stress, health and well-being, but also for the function and success of work organisations, and for the community. If conducted as proposed, it is likely to create a **win-win-win** situation for all concerned.

There is an urgent need for increased cooperation between all relevant stakeholders at all societal levels (EU, nation, workplace) with regard to the following.

- **Implementation** of the very considerable body of current information on prevention measures to reduce stress-related illness and injury in the workplace and promote the health and well-being of workers, and **research** to address gaps in such knowledge.

- **Surveillance** at individual workplaces and **monitoring** at national and regional levels, in order to identify the extent of work-related stress and health problems and to provide baselines against which to evaluate efforts at amelioration.
- **Education and training** of occupational health and other key professional groups to facilitate their participation in researching and developing programmes to reduce the impact of work-related stress and to evaluate the outcome of such approaches.
- **Methodological developments** for the continued production and improvement of valid and reliable methodology kits for intersectoral and interdisciplinary monitoring, analysis and action by all concerned.
- Creation of a **clearing house** for all relevant information using state-of-the-art technology, video, curricula, leaflets, hotline, etc. This would include use of the Internet to collect, review, integrate and disseminate information concerning such data and activities.
- Address the stress-related consequences of both over- and unemployment on the individuals concerned and their families and the communities in which they live. This will mean minimising unemployment and underemployment, minimising overemployment, promoting 'the healthy job' concept, and humanising organisational restructuring.

Start now

Does all this sound complicated or even utopian? It is not. It has been done in many enterprises, and with considerable success. The principles mentioned above are incorporated in the EU framework directive and in the work environment acts of a number of European countries. True, it may take time and effort, but it can be done and it is likely to be highly cost-effective.

Your first step? Read the accompanying guide, and take concrete steps to apply what you have read in your own country, or at your own workplace. The 'right time' is now. It can mean improving both working conditions and health, as well as your own, your company's and your country's output and productivity.

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