OUTCOME OF PROCEEDINGS

From: General Secretariat of the Council
To: Delegations
No. prev. doc.: 13171/23
Subject: Council Conclusions on mental health and precarious work

Delegations will find attached the Council Conclusions on the above subject approved by the EPSCO Council at its meeting held on 9 October 2023.
Mental health and precarious work

Council conclusions

ACKNOWLEDGING THAT:

1. The Treaty on the Functioning of the European Union affirms the essential objective of constant improvements of living and working conditions.

2. Articles 3 and 31 of the Charter of Fundamental Rights of the European Union stipulate, respectively, the right to both the physical and mental integrity of the person, and the right to working conditions which respect workers’ health, safety and dignity. Principle 5 of the European Pillar of Social Rights states that employment relationships that lead to precarious working conditions are to be prevented. Principle 6 establishes that workers have the right to fair wages that provide for a decent standard of living and Principle 10 recognises that workers have the right to a high level of protection of their health and safety at work.

3. The European Union and the Member States are committed to the Sustainable Development Goals (SDGs) of the United Nations 2030 Agenda, including SDG 8 on Decent Work and Economic Growth, which sets as one of its targets to ‘protect labour rights and promote safe and secure working environments for all workers, including migrant workers, in particular women migrants, and those in precarious employment’.

4. The European Union and its Member States share the values, principles and goals of the International Labour Organization (ILO) to shape a fair, inclusive and secure future of work with full, productive and freely chosen employment and decent work for all. The EU promotes the principles of its conventions and declarations, such as the Occupational Safety and Health Convention, 1981 (No 155) and Promotional Framework for Occupational Safety and Health Convention, 2006 (No 187) which enshrine the fundamental principle and right to a safe and healthy working environment, as well as the Centenary Declaration for the Future of Work.
5. Council Directive 89/391/EEC, known as the ‘Framework Directive on occupational safety and health’, provides that the employer must ensure the safety and health of workers in every aspect related to the work, which implicitly includes psychosocial risks. The European Union has also adopted several legal instruments aiming to protect workers from specific health and safety risks.

6. The EU Strategic Framework on Health and Safety at Work 2021-2027 calls for a focus on psychosocial risks at work and on mental health.

7. The Occupational Safety and Health Stocktaking Summit, which was held in Stockholm on 15 and 16 May 2023, concluded that psychosocial risks and mental health at work need intensified further consideration.

8. Following its announcement in the President’s State of the Union address on 14 September 2022, the Commission adopted the ‘Communication on a comprehensive approach to mental health’ on 7 June 2023. The Communication has a chapter dedicated to psychosocial risks at work which announces several important initiatives to address psychosocial risks at work.

9. The European Economic and Social Committee adopted an opinion on ‘Precarious work and mental health’ on 27 April 2023 in which it proposes series of measures on preventing psychosocial risks at EU level including adopting specific legislation.

CONSIDERING THAT:

10. Mental health is a state of well-being in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. Quality working conditions have a positive impact on the mental health of workers.

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1 In this context, the Commission has announced a flagship initiative consisting of a ‘peer review on legislative and enforcement approaches to address psychosocial risks at work in the Member States with a view, and subject to its outcomes and the input of social partners, to present an EU-level initiative on the psychosocial risks in the medium term.’
11. Mental health is a vital component of people's well-being, and poor mental health also has economic costs and impacts on the labour market. The Health at a Glance Europe 2018 report highlighted that mental health problems affect approximately 84 million people across the EU, and the total costs of mental health problems are estimated at more than 4% of GDP (EUR 600 billion) in EU countries.

12. Mental health is connected in many ways to different variables, parameters, dimensions and conditions of life, including work. Mental health and work are closely interconnected: psychosocial risks at work manifesting themselves e.g. in distress, can negatively impact mental health and, inversely, mental health is an important issue for work ability, competitiveness and productivity. Unemployment can also be a risk to mental health. Action can be taken by the different stakeholders in their respective roles to improve mental health at work.

13. The OSH Pulse: The occupational safety and health in post-pandemic workplaces Flash Eurobarometer shows that as a result of the COVID-19 pandemic, exposure to certain risk factors related to stress and mental disorders has increased.

14. The world of work is changing rapidly. Digitalisation, robotisation, and the use of new technologies such as artificial intelligence can prove beneficial in terms of access to the labour market, better working conditions and increased productivity. However, they pose challenges in terms of reshaping labour markets and skills demands and creating risks of digital exclusion. It is also important to be aware of their potential negative impact on working conditions e.g. technostress and to be ready to address this issue appropriately.

According to EU-OSHA data, 27 % of the European Union workforce claims that stress, depression and anxiety are problems caused or aggravated by work, and more than 4 out of 10 workers throughout the EU state that their work-related stress has increased as a result of the COVID-19 pandemic. In this context, 27 % of the EU workforce surveyed claims to have suffered from stress, depression and/or anxiety between April 2021 and April 2022. Source: https://osha.europa.eu/sites/default/files/Eurobarometer-OSH-in-post-pandemic-workplaces-summary_en.pdf
15. Precarious employment is employment that is ‘poorly paid, insecure, unprotected and that cannot support a household’. Precarious work relates to labour rights, work content, work organisation, working conditions, occupational safety and health (including psychosocial factors), and work relations.

16. Scientific evidence shows that precarious working conditions generate negative stress responses that can lead to disorders such as anxiety and depression.

17. The prevalence of precarious work varies and has a different impact depending on variables of personal or social vulnerability. In addition, determinants of mental health interact with existing inequalities in society, putting some people at a higher risk of poor mental health than others. When discrimination based on gender, racial or ethnic origin, religion or belief, disability, age or sexual orientation, violence and hate act as cause for poor mental health, promoting equality in our societies is an important tool for prevention.

18. According to EU-OSHA data, a higher percentage of women than men report having mental health problems caused or worsened by work. This can be explained by factors such as the preponderance of women in precarious jobs, the existence of risks that affect women more often than men such as harassment and sexual violence, or that the burden and impact of caregiving responsibilities is often higher for women.

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4. For example, 30% of the women surveyed claim to have suffered from work-related stress, depression or anxiety between April 2021 and April 2022, compared to 25% of men. Moreover, the pandemic increased caregiving responsibilities in combination with employment, thus generating twice the work (Source: https://osha.europa.eu/sites/default/files/Eurobarometer-OSH-in-post-pandemic-workplaces-summary_en.pdf). This had a disproportionate effect on women, with a negative impact on their mental health as people with caregiving responsibilities.
19. Existing studies and resources have not focused sufficiently on monitoring information on the quality of employment and its impact on health and quality of life. More statistics on the prevalence of mental health problems at work and regular monitoring of psychosocial work conditions are needed as well as studies on organisational factors and characteristics of working environments that promote wellbeing.

20. The effective application and enforcement of existing EU and national legislation is essential to tackle psychosocial risks at work. A systematic approach to risk management by the employer contributes to the prevention of psychosocial risks at work which could also focus, in particular, on precarious work.

21. More efforts should be made to ensure access to affordable mental healthcare, by means of a sufficient number of professionals working in the mental healthcare sector and the use of telemedicine or other tools and resources.

22. This set of Conclusions builds on previous work and political commitments of the European Council, the Council, the European Parliament and the Commission and on work by other relevant stakeholders, including the documents listed in the Annex.

**THE COUNCIL INVITES THE MEMBER STATES, TAKING INTO ACCOUNT NATIONAL CIRCUMSTANCES AND RESPECTING THE ROLE AND AUTONOMY OF SOCIAL PARTNERS, TO:**

23. **ANALYSE** in greater detail the legal and practical implications of new forms of work and work organisation, in particular in those situations where the employer and employer’s responsibilities may be blurred, such as enterprise groups and multi-party employment relationships such as temporary agency work, gig work or subcontracting.
24. PROMOTE quality employment policies to combat precariousness at all kinds of workplaces and address issues such as job insecurity, which are related, inter alia to certain types of employment contracts (such as involuntary fixed-term or involuntary part-time contracts), as well as inadequate wages or the difficulty of exercising labour rights and other organisational factors at work that may contribute to precariousness.

25. FOSTER policies that make available for workers and their representatives tools such as training and education campaigns, legal support or platforms for dialogue, in order to strengthen their role and favour social dialogue as a resource against precariousness.

25a. PROMOTE, in line with national practice, an enabling environment for bipartite and tripartite social dialogue, including collective bargaining, in addressing mental health and precarious work, in line with the Council Recommendation on strengthening social dialogue in the European Union.

26. ENSURE the effective application and enforcement of existing EU and national legislation, to guarantee decent work, safeguard safety and health at work and promote equal treatment and non-discrimination for all workers.

27. STRENGTHEN public systems aimed at safeguarding mental health at work e.g. by providing them with further resources, including human resources with higher qualifications, in particular through reskilling and upskilling. Encourage, where appropriate, synergies between occupational safety and health and public health.

28. SUPPORT research on mental health at work with a preventive approach, i.e. focusing on the impact, positive or negative, of working conditions on the mental health and well-being of workers.
29. ENSURE, in accordance with national practice, that workers receive health surveillance, including as regards mental health, appropriate to the health and safety risk they incur at work, and promote coordination with public health services, paying particular attention to sectors associated with precarious working conditions and sectors providing essential services, including health professionals, teachers and farmers\(^5\).

30. STEP UP EFFORTS aimed at supporting the recruitment of workers with a mental illness or mental disorder and at promoting voluntary programmes for early intervention, work adaptation, and support for workers when they take leave for mental health issues and when they return to work, enabling the flexible and gradual reincorporation of these workers into the workforce, in line with their capacity to work, and helping to prevent and shorten mental health-based sick leaves. In this context, it is important to address the stigma of mental health problems.

31. ENSURE that employers properly and effectively include the management of psychosocial risks in the occupational health and safety risks assessments and resulting actions.

32. SUPPORT, according to national practices, self-employed persons and micro, small and medium-sized enterprises in addressing the challenges related to managing the prevention of psychosocial risks at work.

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\(^5\) An analysis of European Working Conditions Survey (EWCS) which covers the period between 1995 and 2015 suggests that there has been a general increase in workplace stressors (e.g., low level of control and rewards at work), with a particularly steep increase for people in lower-skilled occupations. Workers in precarious employment conditions, encompassing low quality employment, job insecurity, income inadequacy and in general a lack of appropriate protection in terms of safety and health at work are generally at a disproportionate risk of poor health outcomes. (Source: RIGÓ, M, et al. Work stress on rise? Comparative analysis of trends in work stressors using the European working conditions survey)
33. PROMOTE training and awareness-raising initiatives and campaigns on mental health in the workplace and on the impact of precarious working conditions on mental health. Promote the inclusion of content related to mental health and psychosocial risks at work in training programmes for human resources professionals, managers, and staff.

33a. PROMOTE policies to support the mental health of young workers in their integration into the labour market, in line with national practices.

34. STRENGTHEN the oversight of and guidance on the management of psychosocial risks at work through the action of the labour inspectorates or other competent bodies in the Member States, pursuant to their national practices. In this context, promote appropriate training for labour inspectors.

35. PROMOTE the effective enforcement of workers’ rights, notably national regulations in force in the area of working time, and encourage policies to reconcile professional, personal and family life, in order to foster better protection of mental health.

THE COUNCIL INVITES THE EUROPEAN COMMISSION TO:

36. ENSURE that aspects of working time that can have an impact on mental health are taken into account in the monitoring of the implementation of Directive 2003/88/EC of the European Parliament and of the Council of 4 November 2003.

37. REFLECT on an adequate policy for addressing psychosocial risks at work based on the legal obligations laid down in the Framework Directive 89/391/EEC, adapted to the new realities affecting the world of work and paying particular attention to their impact on workers’ mental health and progress on the actions included in the Communication from the Commission on a comprehensive approach to mental health.
38. CONSIDER the diversity of the European population when designing labour policy initiatives, so as to promote the proper protection of those persons in vulnerable situation whose mental health is potentially at risk.

39. CONSIDER the right to disconnect as a measure that contributes to the prevention of psychosocial risks at work, taking into account the ongoing negotiations by EU cross-industry social partners on telework and the right to disconnect.

40. FOSTER the coordination of the Member States’ efforts in implementing national initiatives on the management of psychosocial risks at work, development of tools and guidance, and improve the exchange of good practices with the support of the European Agency for Safety and Health at Work and its expert networks.

41. IDENTIFY, ANALYSE AND ASSESS the most prevailing forms of precarious employment through the systematic monitoring of precarious employment, and assess the effectiveness and fairness of the policies and interventions implemented based on statistics and data from Eurostat, EU-OSHA and Eurofound.

42. IMPROVE information on the prevalence of mental health problems in the workplace, compiling up-to-date information on labour conditions that have a negative impact on mental health, and their specific effects, broken down by sex and other pertinent factors, so as to enable monitoring of the implementation of policies that improve mental health.

THE COUNCIL INVITES THE SOCIAL PARTNERS, AT EU AND MEMBER STATE LEVELS, IN ACCORDANCE WITH NATIONAL PRACTICES, WHILE FULLY RESPECTING THEIR MANDATES AND AUTONOMY, TO:

43. CONTINUE TO PARTICIPATE in social dialogue, at all levels, to address the improvement of working conditions that negatively impact mental health, in particular those that are characteristic of precarious jobs.
44. **CONTINUE TO RAISE employers' AWARENESS** of issues such as the importance of managing psychosocial risks at work in order to prevent the potential negative impact on mental health, the importance of recognising early signs of psychological distress so that employers can take appropriate preventive measures accordingly, and the benefits of promoting mental health and well-being in the workplace.

45. **REMIND** employers to incorporate psychosocial risk at work factors effectively into their risk assessment and to include mental health in the workers’ health surveillance in order to identify and improve working conditions that are potentially damaging to health.

46. **CONTINUE TO PROMOTE** interventions in workplaces to promote psychosocial well-being and good mental health at work, in particular organisational changes affecting working conditions, such as interventions on the organisation of working time, rather than interventions focused on specific individuals. These interventions should focus on creating supportive environments and practices that protect workers' mental health.

47. **CONTINUE TO FOSTER** proactive approaches to digitalisation and the use of ICT that has a positive impact on working conditions and minimise their negative impact, by means of preventive management of psychosocial risks at work. This may include implementing measures that promote work-life balance, reduce workload pressure, minimise social isolation and provide the necessary support to workers in navigating the challenges posed by technology and remote work.

48. **STRENGTHEN** the role of social dialogue and collective bargaining in improving the identification, prevention, and management of psychosocial risks at work and in combating discrimination, psychological violence, harassment and sexual harassment.

49. **SUPPORT** the inclusion of the gender perspective with respect to working conditions in all sectors and kinds of workplaces, assessing the unequal impacts on mental health in men and women.
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