EN Brussels / June 19 2026

TRADE UNION DEMANDS TO TACKLE MENTAL HEALTH AND PSYCHOSOCIAL RISKS AT WORK IN EUROPE

DISCUSSION PAPER

BACKGROUND

The European Parliament's draft INL report (2026/2023) on psychosocial risks, stress and mental health at work of March 25 2026[1] seeks to create a binding EU directive to protect mental health at work. It would impose obligations on employers such as risk assessment and action plans, which have sparked a debate among EU-level social partners over regulatory burdens. Its main points include:

- Preventive frameworks: requiring employers to legally assess, prevent, and manage workplace stress, burnout, and harassment.
- Worker protections: establishing clear procedures for addressing organisational stressors and reversing the burden of proof in related legal disputes.
- Shared responsibility**:** outlining duties for both employers and employees in maintaining psychological safety.

The draft report has received mixed feedback. Many labour and health advocates view it as a crucial step, citing data that psychological hazards drive up to 60% of lost working days and lead to severe physical and mental health outcomes.[2] Employer coalitions have called for rejection of the legislative annex, arguing it is overly prescriptive and creates disproportionate administrative burdens, particularly for SMEs. [3]

LEGAL AND POLICY FRAMEWORK

Psychosocial risks at work are derived from international labour standards on violence and harassment at the workplace, laid down in the ILO Violence and Harassment Convention No. 190[4] and Recommendation No. 206[5] of 2019. In EU practice, they sit at the intersection of three distinct but interacting legal frameworks. Importantly, each treats the burden of proof, a key current policy issue concerning psychosocial disorders, differently:

- Anti-discrimination law – Harassment is treated as a form of discrimination when linked to a protected ground (sex, race, ethnic origin, religion or belief, disability, age, sexual orientation). The shift of the burden of proof is already codified under EU law (Racial Equality Directive 2000/43/EC; Employment Equality Directive 2000/78/EC; Gender Equality Recast Directive 2006/54/EC; Burden of Proof Directive 97/80/EC).

[1] https://www.europarl.europa.eu/doceo/document/EMPL-PR-784330_EN.pdf
[2] https://www.ilo.org/publications/psychosocial-working-environment-global-developments-and-pathways-action; https://www.etui.org/news/progress-towards-eu-directive-psychosocial-risks-work
[3] https://www.eurocommerce.eu/2026/06/joint-statement-on-psychosocial-risks-in-the-workplace/; https://www.businesseurope.eu/wp-content/uploads/2025/02/2024-11-14_mental_health_at_work_-_policy_orientation_note-9ff-1.pdf.
[4] https://normlex.ilo.org/dyn/nrmlx_en/f?p=NORMLEXPUB:12100:0::NO::P12100_ILO_CODE:C190
[5] https://normlex.ilo.org/dyn/nrmlx_en/f?p=NORMLEXPUB:12100:0::NO:12100:P12100_INSTRUMENT_ID:4000085:NO

- Occupational safety and health (OSH) law – Psychological harassment and psychosocial risks (stress, burnout, anxiety, depression) are treated as occupational hazards that employers must assess and prevent, independent of any discriminatory ground, under the OSH Framework Directive 89/391/EEC. Employer obligations are governed by general liability and risk-assessment obligations rather than a shift of the burden of proof.
- Gender-based violence and criminal law – The most recent EU instrument (Directive (EU) 2024/1385) addresses sexual harassment at work primarily through victim support, prevention and (where relevant) criminal law, without itself introducing a general civil burden-of-proof reversal for workplace harassment as such.

The 'reversal of the burden of proof' in the strict legal sense refers to a procedural rule whereby, once the person alleging harassment or discrimination establishes facts from which discrimination or a breach 'may be presumed' – a prima facie case – It falls to the respondent (the employer or alleged harasser) to prove that no breach occurred.

Arguments for and against the Proposed Directive

✓ Arguments in Favour	✗ Arguments Against
• Fills a regulatory gap: no binding EU instrument currently addresses psychosocial risks comprehensively. • Mental health costs are enormous: 60% of lost working days are linked to psychosocial hazards, with high economic and social costs. • Prevention-first approach: shifts focus from individual redress to systemic employer obligations, consistent with OSH logic. • Levels the playing field: harmonised standards across Member States prevent social dumping and regulatory fragmentation. • Aligned with ILO standards: mirrors Convention No. 190 and Recommendation No. 206 obligations already ratified by several Member States.	• Administrative burden: risk assessment and action plan obligations may be disproportionate for SMEs without dedicated HR capacity. • Definitional vagueness: concepts such as “burnout” and “stress” lack legal precision, creating uncertainty for employers and courts. • Burden of proof concerns: reversing the burden in psychosocial disputes is contested; unlike dis-crimination law, causation is harder to establish. • Subsidiarity objections: some Member States and employer groups argue existing national frameworks and Framework Directive 89/391/EEC are sufficient. • Enforcement gaps: without strengthened labour inspection capacity, binding obligations risk remaining paper commitments.

CESI DEMANDS FOR A STRONGER EUROPEAN FRAMEWORK ON MENTAL HEALTH AND PSYCHOSOCIAL RISKS AT WORK

CESI's view is that the EU's existing occupational safety and health framework should be amended, where necessary, to address psychosocial risks at work. Moreover, a primary challenge lies in ensuring that the implementation and enforcement of existing rules keep pace with the scale and evolving nature of psychosocial risks in today's world of work.

CESI calls on the European Commission and Member States to strengthen EU action on psychosocial risks and mental health at work through a comprehensive and preventive approach, based on:

1. a better recognition of psychosocial risks as a core occupational safety and health issue.
2. strengthened prevention through better working conditions.
3. carefully regulated digitalisation, telework and artificial intelligence (AI) to avoid adverse impacts on mental health.
4. improved social dialogue to tackle psychosocial risks through collective agreements.
5. the dismantling of stigma surrounding mental health problems and improved access to support.
6. special measures targeted at vulnerable groups that require special attention.

1. A better recognition of psychosocial risks as a core occupational safety and health issue

Mental health protection must increasingly become an integral pillar of occupational safety and health policy at European and national level. CESI calls for:

- mandatory psychosocial risk assessments in all workplaces at least every two years, and whenever material changes occur, using scientifically validated, participatory methodologies specific to psychosocial risks rather than generic or merely formal questionnaires. Assessments should cover work organisation, employment conditions, labour relations, harassment and aggression, and the emotional and cognitive demands of professional performance, and be integrated into the general preventive management system.
- to inform the above, European protocols for the early detection of burnout, mental fatigue and other work-related disorders, as well as European reintegration protocols following temporary incapacity due to mental health problems or addictions, including gradual job adaptation, assessment and correction of the psychosocial factors that contributed to the harm, preventive follow-up and participation of workers' representatives.
- recognition that inadequate work organisation and staffing levels and excessive performance pressures can lead to cumulative fatigue and are key determinants of workers' mental health.
- recognition of psychosocial disorders and burnout as occupational diseases where work-related causation is established.

- in view of the above, an update to the Commission Recommendation 2022/2337/EU for Member States on their policies on occupational diseases and more specifically on the recognition of occupational diseases, to expressly cover, where work-related causation is established, burnout, depressive and anxiety disorders, post-traumatic stress disorder, and harm caused by external violence and harassment.[6]
- improved research and stronger monitoring and collection of European data on work-related mental health problems, burnout and suicides linked to work, to identify preventive factors and guide public policy.

2. Strengthened prevention through better working conditions

The most effective way to protect workers' mental health is to improve working conditions and prevent psychosocial harm before it occurs. Primary prevention must take precedence: employers should address organisational causes – including work organisation, staffing and workload, time pressure, leadership, resources and autonomy – rather than relying mainly on stress-management measures or expecting workers to adapt to unsuitable working conditions. Particular attention must be given to sectors with high psychosocial burdens, including health care, education, emergency services, social care, transport, retail, telecommunications and customer service activities. CESI calls for:

- investments in adequate staffing levels in both public and private sectors.
- measures to reduce excessive workloads and chronic overtime.
- stronger protections against precarious employment and insecure work.
- work organisation models that promote worker autonomy, participation and work-life balance.
- realistic performance targets and productivity expectations.
- preventive measures against emotional exhaustion and ethical stress.
- strengthened protection against workplace violence, harassment and discrimination, including gender-based and third-party violence and online harassment. This should include comprehensive harassment, violence and conflict protocols that protect and support the affected worker, address the conduct and the organisational or behavioural factors that enabled it once responsibility has been determined, and provide collective support to teams and witnesses exposed to psychosocial harm.
- the promotion, particularly in public administrations and larger organisations, of permanent emotional wellbeing units which can enhance wellbeing, identify overload, burnout, violence, harassment and conflict early, offer free and confidential initial psychological guidance, coordinate referrals, analyse organisational causes and evaluate the psychosocial climate. They must complement – not replace – the employer's preventive obligations and must not medicalise problems caused by poor work organisation.
- the inclusion of work-related suicide prevention in European occupational safety and health strategies, including protocols for early intervention, crisis management, action in situations of particular psychological vulnerability and investigation of suicides potentially related to work.

[6] https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=uriserv:OJ.L_.2022.309.01.0012.01.ENG

3. **Carefully regulated digitalisation, telework and artificial intelligence (AI) to avoid adverse impacts on mental health**

Digital transformation is profoundly reshaping workplaces and employment relations across Europe. While digital technologies and artificial intelligence can create opportunities for flexibility and innovation, they also generate new psychosocial risks.

CESI is particularly concerned about constant connectivity and the erosion of rest periods, digital surveillance and intrusive monitoring technologies, algorithmic management practices that intensify workloads and reduce worker autonomy, AI-driven performance measurement systems, social isolation linked to remote work, and increased stress caused by technological change and employment insecurity.

Psychosocial risk assessments must specifically examine algorithmic management, automated performance evaluation and task allocation, productivity scoring, biometric surveillance, generative AI used for monitoring and emotion-recognition technologies.

Technological innovation must improve workers' quality of life and working conditions instead of intensifying work pressures and insecurity. CESI supports:

- a legally enforceable general right to disconnect for workers.
- clear limits on digital surveillance and unjustified monitoring practices.
- transparency and human oversight regarding AI-based decision-making affecting workers.
- specific preventive rules treating AI and advanced digital systems as work equipment where appropriate, with collective and individual protective measures proportionate to the risks.
- training rights for workers and their representatives on workplace rights and prevention in the context of digitalisation, telework and AI.
- mandatory consultation of workers and trade unions before introducing AI systems affecting work organisation.
- equal treatment of remote and on-site workers.
- employer responsibility for ergonomic conditions and psychosocial protection in telework arrangements that are introduced at the initiative of employers.
- support measures addressing isolation, stress and burnout linked to remote and hybrid work.

4. **Improved coordination between health services and authorities, and improved social dialogue to tackle psychosocial risks through collective agreements**

Mental health at work cannot be addressed through individual resilience strategies alone. Structural workplace issues require collective and organisational solutions developed through social dialogue. Trade unions and workers' representatives play a fundamental role in identifying psychosocial risks, supporting workers and negotiating preventive solutions. CESI calls for:

- reinforced labour inspectorates with sufficient resources and expertise to monitor psychosocial risks.
- improved coordination between occupational health services, public health systems and labour authorities, with full respect for confidentiality, privacy and other fundamental rights.
- genuine involvement of trade unions and health and safety representatives in the design, implementation and monitoring of psychosocial risk prevention measures.
- systematic collective bargaining coverage regarding workload management, telework, digitalisation and mental health.
- stronger protection for workers who report psychosocial risks or mental health concerns.
- training rights for workers, managers and workers' representatives on psychosocial risks and mental health.
- specific training for managers, middle managers, prevention delegates and occupational safety and health professionals to recognise warning signs of serious psychological distress and suicidal behaviour, make appropriate referrals to specialised resources and act from a preventive perspective.

5. Dismantling the stigma surrounding mental health problems and improving access to support

Stigma surrounding mental health remains a major obstacle preventing workers from seeking support. Fear of discrimination, professional repercussions or social exclusion often discourages workers from speaking openly about mental health problems.

CESI believes that addressing mental health must become part of normal workplace and societal discussions. Workers experiencing mental distress must be supported, not marginalised. CESI therefore calls for:

- anti-stigma campaigns addressing mental health at work.
- guarantees against discrimination linked to past or present mental health conditions.
- confidential and accessible support services for workers.
- early intervention mechanisms and workplace prevention programmes.
- affordable and timely access to high-quality mental health care services, in particular in rural and underserved areas.
- increased public investment in mental health services and prevention to support the measures listed above.

6. Special measures targeted at vulnerable groups that require special attention

Certain groups are disproportionately exposed to psychosocial risks and poor mental health outcomes. Eurofound identifies women, young people, low-income workers, unemployed persons, migrants, refugees, people with disabilities and single parents among the groups most at risk. CESI therefore calls for:

- targeted mental health measures for women, young people, low-income workers, unemployed persons, migrants, refugees, people with disabilities and single parents.
- inclusive workplace policies protecting vulnerable and marginalised workers.
- stronger labour market integration policies and quality employment opportunities for those groups of workers.
- better support for workers combining employment and caregiving responsibilities.