

PSYCHOSOCIAL RISKS

Work-related psychosocial risks

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This is a translation of the original French version available at: [Programmes de santé au travail pour les établissements / Commission des normes de l'équité de la santé et de la sécurité du travail - CNESST](#). In the event of any discrepancy or inconsistency between the French and English versions, the French version shall prevail.

1. INTRODUCTION

1.1. Background

Physical and psychological health in the workplace has been a growing concern for some time. The problems associated with it generate significant social, human and financial costs for workers, employers and the community as a whole. In recent years there has been an increase in the number of employment injuries accepted by the CNESST attributable to work-related psychosocial risks, and in the number of psychological harassment claims lodged under the *Act respecting labour standards*.

In this respect, the CNESST has prioritized three psychosocial risks: violence, harassment and exposure to a potentially traumatic event. If psychosocial risks cannot be eliminated at the source, workplaces must plan the corrective and preventive measures to be implemented to reduce workers' exposure to these risks.

For the purposes of this health program, all the risks and risk factors defined below must be identified and analyzed by workplaces.

1.2. Legal obligations

This occupational health program is developed in accordance with section 107 of the *Act respecting occupational health and safety* (AOHS). The employer is required to take it into account in its prevention program (AOHS, s. 59) or in its action plan (AOHS, s. 61.2). This program contains recommendations for the prevention of health problems linked to exposure to psychosocial risks and risk factors. In particular, it sets out the preventive measures to be implemented to protect the health of exposed workers. Thus, the employer must determine which actions of the occupational health program to consider and include in its prevention program or action plan to manage these risks in its establishment.

Section 61 of the AOHS provides that the Commission may order an employer to submit a prevention program. It may also order the employer to amend the content of the program, in particular to bring it into line with the elements of the occupational health programs it develops. Section 127(1) of the AOHS provides that the public health director may assess the components of a health program, prevention program or action plan and make recommendations to the employer, the Commission and, where applicable, the health and safety committee.

The information presented in this health program provides general guidelines. It is strongly recommended to consult the tools presented in the section [For more information](#) for the preventive actions to be implemented in workplaces.

2. RISK PROFILE

The following sections provide definitions and examples of work-related psychosocial risks and risk factors. Note that such risks can be found in any workplace.

These risks and risk factors relate to work situations, not to the personal characteristics of individuals. They can damage the physical and psychological health of workers and compromise the safety and functioning of the organization, which is why they need to be identified and addressed by workplaces.

2.1. Work-related psychosocial risks

Psychosocial risks, like any other work-related risk, involve situations connected to the nature and organization of work.

Violence in the workplace is defined as any action, incident or behaviour that deviates from a reasonable attitude and that provokes a situation in which a person is attacked, threatened, harmed or injured in the course of or as a direct result of their work.

Violence can be physical or psychological, and can be expressed through words, gestures or behaviour. It also includes spousal, family violence or sexual violence. Sexual violence, including gender-based violence, is defined as any form of violence targeting sexuality, as well as any other misconduct with sexual connotations – such as unwanted gestures, practices, comments, behaviours or attitudes – whether occurring once or repeatedly.

Violence can occur between workers (internal), or from someone who has no employment relationship with them (external).

Harassment in the workplace can be psychological, sexual, discriminatory or digital. It refers to vexatious, abusive, humiliating or hurtful behaviour in the form of repeated and hostile, aggressive or unwanted conduct, verbal comments, actions or gestures. These behaviours undermine the dignity or integrity of the person who experiences them, and make the work environment unhealthy. A single act of serious conduct can also be harassment if it leads to lasting negative consequences for the victim. It can occur between peers (e.g. between managers, between colleagues) or between people at different hierarchical levels (e.g. between a manager and a worker). It can also come from people who have no employment relationship with the organization (e.g. customers, suppliers).

Exposure to a potentially traumatic event is defined as being exposed to an event where there is death, serious injury, a threat to life or to the physical or psychological integrity of a person (e.g. threat of death, serious injury, sexual violence) in the course of one's work. The person may be a direct victim or witness (e.g. witnessing the event in person), or an indirect witness (e.g. someone close to them describes the situation). They can also be repeatedly exposed to the traumatic characteristics of this type of event.

For a full description of psychosocial risks, consult the [CNESST website](#) and the references at the end of this document.

Multiple factors can be at the root of work-related psychosocial risks. It is therefore essential to know and understand their influence in order to prevent or limit their harmful effects on health and safety.

2.2. Psychosocial risk factors in the workplace

As defined by the Institut national de santé publique du Québec (INSPQ), work-related psychosocial factors correspond to factors linked to work organization, management practices, employment conditions and social relationships. The main work-related psychosocial factors are workload, decision-making autonomy, social support, recognition and organizational justice.

These factors can have a positive or negative impact, depending on their orientation. They can therefore contribute to maintaining and promoting workers' health or, on the contrary, pose risks to their psychological or physical health. They need to be considered as a whole, as interacting with each other, and not approached in isolation. It is therefore essential to properly identify and analyze them in order to implement the appropriate controls and thus reduce health and safety risks.

Workload refers to the amount and complexity of work to be done over a given period of time, whether that work is intellectual, physical or emotional. Workload can become a risk factor when, for example, the amount of work is excessive.

Signs of a high workload:

- Lack of time or means to accomplish tasks
- Unrealistic or contradictory tasks or objectives
- Frequent interruptions
- Poorly defined roles and responsibilities

Decision-making autonomy refers to the level of control one can exercise over one's work, through the ability to make decisions about one's work, to use one's creativity and skills, and to develop new competencies. Low decision-making autonomy is a risk factor.

Signs of low decision-making autonomy:

- Inability to participate in decisions concerning one's work
- Little leeway in how to do one's work
- Few opportunities to develop skills
- Inability to show initiative
- Monotonous tasks

Social support at work refers to all the supportive social relationships present in the workplace between colleagues and with supervisors and those in leadership roles. Low social support is a risk factor.

Signs of low social support:

- Little support from colleagues
- Lack of mutual support, collaboration and team spirit
- Conflict or incivility (rudeness)
- Lack of regular exchanges
- Little support from people in leadership roles
- Low availability
- Lack of support in a difficult situation
- Inaction in the event of technical or relational difficulties

Workplace recognition refers to the various ways in which workers' efforts, achievements and skills are valued. It can be economic, social or organizational. Low recognition is a risk factor.

Signs of low recognition:

- Lack of respect for the person
- Non-remuneration for hours worked
- Unrecognized skills
- Lack of access to training
- Job security is threatened

Organizational justice concerns the fair, equitable and transparent application of policies, procedures and decisions taken by the organization.

It also encompasses fairness in relationships, procedures and distribution of resources in the workplace. Organizational injustice is a risk factor.

Signs of organizational injustice:

- Lack of communication in organizational procedures
- Lack of politeness in communications
- Dissemination of inaccurate or incomplete information
- Organizational decisions marked by bias or favouritism
- Lack of means to correct potentially unjust or unfair decisions

For a full description of psychosocial risk factors, consult the [CNESST website](#) and the references at the end of this document.

2.3. Health effects

Work-related psychosocial risks and risk factors have an impact on the physical and psychological health of those exposed to them. These effects may vary according to the duration of exposure, the number of risks or risk factors to which the person is exposed, and their severity.

Work-related psychosocial risks and risk factors can have a rapid, negative on impact health including:

- Increased risk of workplace accidents
- Headaches
- Fatigue, sleep disorders
- Irritability
- Psychological distress (set of negative emotions such as depression or despair)
- Forgetfulness, difficulty concentrating
- Greater use of psychoactive substances (e.g. tobacco products, alcohol, medication, drugs)
- Social withdrawal

Work-related psychosocial risks and risk factors can cause other problems that have a greater impact on health, including:

- Musculoskeletal disorders (e.g. back or neck pain)
- Psychological health problems (e.g. burnout, anxiety, depression, post-traumatic stress disorder, addictions)
- Cardiovascular problems (e.g. hypertension, cardiovascular disease, stroke)

Work-related psychosocial risks and risk factors can also have other negative effects on workers, including the following:

- Loss of employment or ability to work
- Social or family difficulties
- Death (e.g. from cardiovascular disease or suicide)

2.4. Legislation and best practices

The *Act respecting occupational health and safety* (AOHS) states that employers must take the necessary measures to protect the health and ensure the safety and physical and mental well-being of their workers. In particular, employers must take measures to ensure the protection of workers exposed to physical or psychological violence, including spousal, family or sexual violence, in the workplace. In a situation of spousal or family violence, employers are required to take these measures if they know or ought reasonably to know that the worker is exposed to such violence.

Also according to the AOHS, employers must use methods and techniques to identify, control and eliminate risks and risk factors to which workers are exposed in the workplace. This obligation means that employers are required to implement all reasonable and necessary means to ensure the health and safety of workers.

Under the *Act respecting labour standards* (ALS), every employee has a right to a work environment free from psychological harassment.

Employers must take reasonable action to prevent psychological harassment and, whenever they become aware of such behaviour, to put a stop to it. At a minimum, they must adopt a policy to prevent and manage situations of psychological harassment, which must include the elements described in section 81.19 of the ALS. In addition, they must make the policy available to workers, inform them of its content and ensure that it is respected.

3. MAIN GROUPS EXPOSED TO PSYCHOSOCIAL RISKS AND RISK FACTORS

Work-related psychosocial risks and risk factors can be present in **all workplaces**. **All workers can therefore be exposed to them, regardless of their industry or field.**

However, employers should pay particular attention to certain groups that may be more at risk, such as:

- Women and people belonging to the LGBTQ+ community, who are more likely to be exposed to violence and harassment.
- Workers in non-specialized occupations, who are more likely to be exposed to several risk factors simultaneously.
- Workers from employment agencies, who may find themselves in precarious situations (e.g. unstable employment, lack of training which increases the risk of injury, unclear responsibilities between the agency and the client company).
- Temporary foreign workers, because of their immigration status, their work permit which generally limits them to a single employer, the language barrier and lack of knowledge of their rights.
- Workers exposed to the consequences of climate change (e.g. worsening droughts, floods and forest fires) and emergencies (e.g. pandemics, large-scale accidents).

4. PREVENTION APPROACH

The approach to managing work-related psychosocial risks and risk factors is identical to that for other workplace risks: identify, correct and control. As with other risks, successful management depends on certain [winning conditions](#):

- Commitment from senior management reflected in concrete actions. For example:
 - mobilize all those concerned
 - make human, financial and material resources available
 - draw up a communication plan
 - implement actions
- Worker participation in identifying workplace risks, analyzing them and suggesting preventive measures.
- Defining the roles and responsibilities of workers and employers in the process.
- Organizing prevention by setting up and implementing a prevention program and action plan.
- Evaluating workplace health and safety performance.

4.1. Identify and analyze risks

4.1.1. Identify risks

All workplaces are required to identify their risks, including psychosocial risks and risk factors. To do this, they can use a variety of techniques, such as the following:

- **Collect** available administrative data (e.g. absenteeism rates, turnover rates, accident and incident records, complaint register).
- **Identify** conflict situations and incivilities (e.g. by asking the OHS committee, human resources, employee representatives).
- **Collect** additional data through interviews or questionnaires. This must be done with a valid, reliable tool that ensures confidentiality (you'll find tools on partner websites in the [For more information](#) section), possibly with the help of an external resource. The choice of data collection tool should be based on the resources, needs and capabilities of the workplace.

It is the responsibility of both workers and employers to remain vigilant in the face of certain situations conducive to the emergence of psychosocial risks and risk factors: periods of change in the organization, restructuring, interpersonal tensions, etc. Changes in the habits or moods of certain people or groups of people (e.g. anger, sadness, aggressiveness, isolation, substance use, absenteeism) can also be good indicators of the presence of risks or risk factors.

4.1.2. Analyze risks

Risk analysis is essential for identifying which risks need to be prioritized. Various criteria can be used at this stage: the number of people affected, the severity, probability and frequency of exposure, the priorities identified by workers, and so on.

Once the priorities have been set, the search for solutions must be done collaboratively with workers. This way, workplaces can ensure that the preventive measures selected are well adapted to the reality of the work environment. If elimination at the source is not possible, preventive measures can be used alone or in combination to ensure effective management. Several simple and affordable measures can often be considered.

Various criteria can be used to select the right measures:

- Possibility of eliminating problems at the source (preferable to mitigating them)
- Extent of long-term effects
- Feasibility, ease of implementing the solution
- Support for the proposed solution
- Any other criterion deemed relevant by the organization

For examples of preventive measures, see [the example in section 4.4](#).

- **Analyze** risks and risk factors using the data collected.
- **Include** risks and risk factors in the [risk identification](#) and in the [prevention program](#).
- **Plan** the actions to be implemented by prioritizing certain risks and risk factors and **disseminate** them in the workplace.

4.2. Correct risks

If an identified risk cannot be eliminated at the source, the employer must implement measures to correct this risk. Preventive measures target several levels:

- Entire organization (e.g. development of policies, programs, procedures, committees, planning of training, definition of roles and responsibilities)
- Managers (e.g. access to training, information on management practices)
- Work teams (e.g. distribution of work, reorganization of positions, valuing collaboration, organizing team meetings)
- Workers (e.g. access to training, application of work methods, promotion of civility)

- **Implement** actions with the help of management and workers.
- Regularly **communicate** the progress of ongoing and completed actions to all workers.

To ensure effective management of psychosocial risks, preventive measures can be targeted at an individual (e.g. employee assistance program), a group (e.g. workload management workshop, training) or the organization (e.g. workload reorganization, conflict and incivility management). To be fully effective, these measures must be used in combination.

It is important to know that preventive measures aimed at the organization, which act upstream on the causes of problems (e.g. task reorganization), are more effective and sustainable than those aimed at individuals. They should always be prioritized whenever possible.

4.3. Control risks

The control step involves ensuring that the corrections made in the previous step continue to be applied, relevant and effective. This step must be planned from the start of any prevention approach. Here are a few examples of efficiency criteria that can be considered:

- Worker satisfaction
- Staff retention
- Improved working atmosphere and quality of life at work
- Decrease in the number of complaints, incidents and accidents
- Reduced work stoppages, etc.

It's important to assess the process and adjust the strategy as required (see the section [For more information](#) for tools and references). Potential control measures include the following:

- Do regular follow-ups at team meetings.
- Distribute a satisfaction questionnaire on the measures implemented.
- Provide information and training sessions, etc.

- **Assess** the prevention and control measures implemented in terms of efficiency and sustainability in collaboration with workers.
- **Re-adjust** the identification, analysis and correction stages as needed throughout the process so that they meet the initial objectives.
- **Review** targets in line with changing needs, if necessary.

In short, to organize prevention, the workplace must implement a structured prevention approach. This means identifying and analyzing risks, correcting, then controlling them. This approach is part of the OHS continuous improvement concept.

4.4. Example of a situation and application of the prevention approach

Here's an example of a fictitious work situation and what's expected of an employer in terms of prevention.

Dominique works in customer service for a small company. She meets a disgruntled customer who has had to wait a very long time to be served. Her colleague Alex is away and he hasn't been replaced, so Dominique's workload has increased considerably. The customer raises his voice and uses increasingly offensive language towards her. He asks to see the manager, Mr. Dumont. Dominique goes to get him, but he's not available. She returns to the disgruntled customer without her manager. The customer takes out his frustration on Dominique and leaves, slamming the door. Following this incident, Dominique cries in private.

Later, she discusses the situation with her manager. He criticizes her and blames her for the customer's aggressive behaviour, suggesting that she should be like Alex, who never complains. She then turns to her office colleagues. At the same time, she learns that Mr. Dumont has invited the whole team, except her, to a happy hour at the end of the day. She would like to attend the event to discuss what happened. When she mentions this to her colleague Claude, Claude rolls her eyes. Dominique doesn't feel welcome and begins to feel many negative emotions and isolation.

In the following days, Dominique shares her experience with the human resources manager, who decides to identify the risks present in the workplace. A participative working committee is set up to conduct interviews with the people involved.

4.4.1. Identify risks

Here's what emerged from the interviews:

- External violence: The customer used offensive language. He raised his voice. His aggressive behaviour was demonstrated in his words, tone and actions (he slammed the door upon leaving).
- Internal violence: The manager blamed Dominique and offered her no support in the face of external violence. He denied her suffering and blamed her for the customer's aggressive behaviour. Dominique was isolated and shunned by her colleagues. She was not invited to an informal gathering organized by her supervisor.
- Workload: Dominique was on her own to serve a number of customers following an unforeseen event (absent colleague). The result was a long wait and growing dissatisfaction among customers who expected to be served quickly.
- Organizational justice: The manager unfairly criticized Dominique's work by comparing her to Alex. He wasn't fair in his dealings with workers.
- Social support from the manager: The manager didn't listen to Dominique and didn't offer her any support or solutions.
- Social support from colleagues: No one intervened when the situation happened or afterwards.

4.4.2. Correct risks

The table below provides examples of preventive measures that can be implemented in Dominique's workplace. Note that this list is not exhaustive, and that other measures could also be implemented. It's important to remember that a management approach should include a prioritization step. This step is not illustrated below.

Examples of preventive measures	Examples of actions to be implemented	Psychosocial risks and factors
Developing procedures for dealing with difficult customers	<ul style="list-style-type: none"> Setting up an intervention plan for emergencies Developing a civility awareness campaign aimed at customers 	External violence
Promoting an inclusive work environment that fosters open communication and ensures the integration of workers	<ul style="list-style-type: none"> Developing an organization-wide code of conduct Planning inclusive social events open to all 	Social support at work and organizational justice
Training for staff in management situations	<ul style="list-style-type: none"> Training on good management practices Training on preventing workplace violence and supporting workers 	Social support at work, internal violence and organizational justice
Training for workers	<ul style="list-style-type: none"> Customer violence management training Workplace violence prevention and civility training 	External and internal violence
Dissemination and application of internal policies and procedures	<ul style="list-style-type: none"> Managing incivility, conflict and harassment Planning the updating and dissemination of internal policies and procedures 	Internal violence, external violence, social support at work and organizational justice
Technical queue management	<ul style="list-style-type: none"> Setting up a system to indicate waiting time 	Workload and external violence
Reorganization of work	<ul style="list-style-type: none"> Assigning a temporary replacement in cases of absence Adding counter staff during peak periods Distributing tasks within the team to balance workload 	Workload, social support at work, external violence and organizational justice
Staff support	<ul style="list-style-type: none"> Offering an employee support program (e.g. employee assistance program) Developing a list of reference organizations to support workers 	Social support at work

4.4.3. Control risks

From the perspective of a continuous improvement approach, about six months after Dominique's team implemented the chosen measures, the workplace reached the control stage. In collaboration with workers, management could do the following:

- follow up with Dominique and other workers on the preventive measures implemented, and make any necessary adjustments
- consult the register of accidents and incidents and register of first aid
- consult human resources indicators (e.g. departures, arrivals, repeated absences, leave, illness)
- check if the emergency plan is working or needs adjustment
- validate the implementation of a code of conduct and review it as necessary
- check that all those involved, including managers, have received the relevant training

It is important to implement control measures (i.e. monitoring, assessment, maintenance and follow-up) to ensure that identified risks are eliminated or controlled.

5. SERVICES OFFERED BY RSPSAT TEAMS

The Réseau de santé publique en santé au travail (RSPSAT), together with its partners and in accordance with its legal mandates under the *Act respecting occupational health and safety* (AOHS), the *Public Health Act* (PHA) and the *Act respecting health services and social services* (AHSSS), works to prevent and protect workers' health by supporting workplaces in meeting their obligations to prevent occupational illnesses. The RSPSAT has multidisciplinary teams (medical, nursing, occupational hygiene, ergonomics, psychosocial risks, etc.) with expertise in occupational health that are entirely funded by the Fonds de la santé et de la sécurité du travail. It has been offering its services free of charge throughout Quebec since the adoption of the AOHS in 1979.

Specifically, regarding psychosocial risks and risk factors, the RSPSAT can:

- Conduct information sessions on the importance of preventing psychosocial risks and risk factors and the means of doing so (e.g. joint exchange meetings or meetings with the employer, information sessions, presentation of a prevention approach).
- Help document the psychosocial risks present in a workplace, either through summary identification or an in-depth assessment.

- Support the workplace in prioritizing the preventive measures to be implemented, considering the other risks present in the workplace (e.g. support in selecting and implementing preventive measures).
- Help assess the effectiveness of preventive measures implemented in a workplace (e.g. support during and after deployment of preventive measures, advice on their long-term maintenance).

To request support or find out more about the services offered by the occupational health teams, consult www.santeau travail.qc.ca.

6. SERVICES OFFERED BY OTHER PARTNERS

The CNESST's other [partners](#) help support workplaces in their OHS management efforts in many ways. The [joint sector-based associations](#) (JSAs) provide their members with services:

- advice and personalized assistance
- training and information
- research and development on the prevention of work-related accidents and illnesses

If you're linked to a JSA, you can find out about the specific services it offers its members.

7. FOR MORE INFORMATION

CNESST web pages

- [Work-related psychosocial risks](#)

Laws and regulations

- [Act respecting occupational health and safety \(AOHS\)](#)
- [Regulation respecting occupational health and safety \(ROHS\)](#)

[Réseau de santé publique en santé au travail \(RSPSAT\)](#)

- [Psychosocial risks](#)

[Institut de recherche Robert-Sauvé en santé et en sécurité du travail \(IRSST\)](#)

[Joint sector-based associations](#)

[Institut national de santé publique](#)

- [Psychosocial risks in the workplace](#)

The CNESST and the MSSS would like to thank the following partners for their participation in the development of occupational health programs:



ASSOCIATIONS
SECTORIELLES
PARITAIRES

Institut national
de santé publique
Québec



Réseau de santé publique
en santé au travail

Québec



Santé Québec

For general information, [contact the CNESST](#).

APPENDIX

Checklist for managing work-related psychosocial risks and risk factors

- ☐ **Collect** available administrative data: e.g. absenteeism rates, turnover rates, accident and incident records, complaint register.
- ☐ **Identify** conflict situations and incivilities e.g. by asking the OHS committee, human resources, employee representatives.
- ☐ **Collect** additional data by conducting interviews or sending out questionnaires, for example. This must be done with a valid, reliable tool that ensures confidentiality (you'll find tools on partner websites in the section [For more information](#)), possibly with the help of an external resource. The choice of data collection tool should be based on the resources, needs and capabilities of the workplace.
- ☐ **Analyze** risks and risk factors using the data collected.
- ☐ **Include** risks and risk factors in risk identification and prevention programs.
- ☐ **Plan** the actions to be implemented by prioritizing certain risks and risk factors and **disseminate** them in the workplace.
- ☐ **Implement** actions with the help of management and workers.
- ☐ Regularly **communicate** the progress of ongoing and completed actions to all workers.
- ☐ **Assess** the prevention and control measures implemented in terms of efficiency and sustainability in collaboration with workers.
- ☐ **Re-adjust** the identification, analysis and correction stages as needed throughout the process so that they meet the initial objectives.
- ☐ **Review** targets in line with changing needs, if necessary.