

Psychosocial risk prevention – strategies and legislation | Estonia

National report

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1 Introduction

This report examines national approaches to work-related psychosocial risks (PSRs) in **Estonia**, with a focus on legislative and non-legislative measures as well as success factors and challenges concerning the national and sectoral approaches taken to enhance PSR prevention. It is part of a larger study on strategies and legislation on the prevention of PSRs at work in a selection of EU Member States, namely Belgium, Denmark, Estonia, Spain, Croatia and Austria.

Methodologically, this study relies on data gathered through desk research and semi-structured interviews. These national interviews were conducted with representatives from government, the social partners, and organisations and institutes involved in occupational safety and health (OSH). In total, seven interviews were carried out during the months of September and October 2024. The interviewees included representatives from government, such as the Ministry of Social Affairs, the Ministry of Economic Affairs and Communications, representatives from the Labour Inspectorate, the Estonian Trade Union Confederation and the Estonian Employers' Confederation. An academic expert and a representative of an external occupational health prevention organisation were also interviewed. To ensure confidentiality, the names of individuals are not included, and the names of organisations are only mentioned where explicit consent was given.¹

2 Country context

2.1 PSR trends at national level

The current section presents a brief overview of the main trends in the development of PSRs at work and their consequences in Estonia.

Although Estonia does not have its own nationwide survey on working conditions to assess the development of PSRs at work over the years and their impact on workers' health, a comprehensive analysis of the current situation in the field of mental health and PSRs at work, conducted by the Ministry of Social Affairs, has highlighted the relevance of this issue in the country (Ministry of Social Affairs, 2019). According to this report, mental health disorders are the second leading cause of reduced work capacity. Moreover, it estimates that the direct and indirect costs of mental health issues, including not only work-related factors but also personal and societal impacts, amount to 2.8% of Estonia's GDP (€572 million). In addition, according to Eurostat (2021) survey data, 41% of Estonian women and 34% of Estonian men consider that their working environment is harmful for their mental health, and 48% of respondents reported that work-related health problems affected their daily activities. High workload and time pressure, as well as dealing with difficult colleagues and customers, were the main causes of stress mentioned by respondents.

According to data from the Labour Inspectorate, the high prevalence of workplace bullying, tension and work-related stress highlight the increasing importance of dealing with PSRs and mental health in the workplace (Estonian Labour Inspectorate, 2023). The same report shows that the number of people with mental health problems is increasing in Estonia and stood at 118,087 in 2023. According to data from the Health Insurance Fund,² the number of individuals experiencing mental health problems in 2024 reached 122,788. The Health Insurance Fund has paid a total of €1.6 million for filled prescriptions. The social setbacks caused by the COVID-19 pandemic, the war in Ukraine and the economic situation have certainly left their mark, impacting individuals and, in turn, affecting the working environment. In addition, the study reports that workplace bullying is becoming more and more common. A representative from the Labour Inspectorate stated that by the end of November 2024, employee complaints related to PSRs accounted for 16% (120 cases) of the total 767 complaints reported to the Labour Inspectorate.

Looking in more detail at PSR data, there is clearly a lack of data with a specific focus on gender aspects and self-employed workers. The only comprehensive study available consists of a survey-based report

¹ Interviewees in this report have requested anonymity. Accordingly, we use the pronoun they/their when referring to them, so as not to compromise them by revealing their gender. See APA guidelines on singular 'they' (<https://apastyle.apa.org/style-grammar-guidelines/grammar/singular-they>).

² Webpage of the Health Insurance Fund: <https://www.tervisekassa.ee/vaimne-tervis-retseptide-ja-arvete-andmed>

published by Centar in 2010 (Centar, 2010). Regarding gender-related data, according to the survey's findings Estonian men reported slightly lower levels of stress, burn-out and sleep disorders, but interestingly were more likely than women to experience work–family conflict issues. Additionally, men tend to assess their health more positively. Job satisfaction levels were similar between the two genders. The report also concluded that indicators of stress, burn-out and sleep disorders were significantly worse in Estonia than the average for EU Member States.

When looking at the prevalence of specific PSRs across sectors in Estonia, concerns are the highest in the healthcare, social work, education, commerce and office work sectors (Praxis, 2015). The main PSRs across all sectors are time pressure, long or irregular working shifts, and fear of losing one's job. In Estonia, the number of establishments that have action plans in place to manage work-related stress is generally low (13.5% of all establishment according to ESENER, 2019) due to a lack of funds available for research and intervention and a lack of knowledge among employers (Ministry of Social Affairs, 2019).

The Estonian Human Development Report (Estonian Cooperation Assembly, 2023) 'Mental Health and Well-being' further confirmed that the management of mental health in Estonian companies is still in its initial stages. According to the latest report, although individual measures such as psychological counselling or resilience training may be offered or facilitated in some establishment, there are very few long-term systemic preventive solutions that include developing leadership competencies in supporting mental health in the workplace, reducing workload, reorganising work and offering flexible working conditions. In addition, employee involvement in the management of PSRs seems to be fairly limited.

Small and medium-sized enterprises (SMEs) often face greater challenges than larger companies in managing mental health in the workplace, mainly because of their limited resources and expertise in addressing PSRs effectively. According to research from 2019 (Trummal & Luuk, 2019) 88% of establishment with 50 or more employees provided individual support measures such as mental health-related training or other services. However, among establishment with fewer than 50 employees, only 57% offered such support.

The onset of the COVID-19 pandemic brought unforeseen global transformations and heightened the focus on PSRs in the workplace. According to the Living, Working, and COVID-19 e-survey (COVID e-survey, Eurofound, 2020) conducted following the pandemic's onset in Estonia, the number of working hours increased significantly in 2020 and continued in 2022 at levels surpassing the conventional norm for full-time employment (typically defined as 40 hours per week, although research suggests an average of 42 worked hours per week) (Eurofound, 2022). Another PSR heightened by the COVID-19 pandemic was job insecurity, although data from the COVID e-survey indicate a significant decrease in fears of job loss in Estonia by 2022 (Eurofound, 2022).

In addition, work–life balance challenges were particularly prominent during the initial stages of the COVID-19 crisis. However, subsequent surveys conducted in 2022 indicate a modest improvement in these issues (Eurofound, 2022). Despite the easing of COVID-19 pandemic restrictions across EU Member States by the spring of 2022, mental wellbeing indicators have failed to return to pre-pandemic levels. A significant number of employees report engaging in work-related activities during their leisure time and experiencing concerns about work matters even when off duty, with 22% of employees expressing constant or frequent work-related worries and 34% doing so occasionally. Furthermore, disruptions to family time have been reported, with a significant 79% of Estonian employees indicating that their work commitments have to some extent intruded on their family life (Eurofound, 2022).

The COVID-19 pandemic drove an increase in digitalisation in the workplace. According to the European Working Conditions Telephone Survey (EWCTS) conducted in 2021, 22% of employees in Estonia were engaged in teleworking (including both hybrid work and full-time telework). Additionally, 20% of employees had teleworking possibilities. In line with these findings, according to 2021 Estonian workplace survey data, teleworking was practiced by employees in 42% of establishment, representing a substantial increase versus the pre-COVID-19 period.

In the period before the COVID-19 pandemic, when digitalisation was gaining ground in workplaces, though not as rapidly as in the post-pandemic era, the 2019 European Survey of Enterprises on New and Emerging Risks (ESENER) indicated that not enough consideration was being given to the potential impacts of digital technologies in the workplace. Specifically, in Estonia, only 17% of establishments

reported discussing the implications of the use of digital technology on the safety and health of employees. Moreover, ESENER findings highlighted that PSRs were among the least prioritised concerns regarding the impact of digital technologies.

In the post-COVID-19 era, according to the EWCTS (2021) workplaces are seeing an increased prevalence of high work intensity and unsocial working hours, including employees working in their free time.

According to the EWCTS (2021) report, 41% of employees in Estonia are required to work at a very high speed, either 'always' or 'often'. Furthermore, the findings of the COVID e-survey 2022 reveal that 40% of Estonian employees have to work in their free time every week to meet work demands, either 'daily', 'every other day', or 'once or twice a week'. The same survey identified strong work–life balance concerns, with 51% of employees in Estonia reporting that their job had an impact on the time they devoted to their family (ranging from 'sometimes' to 'always').

Moreover, the ESENER report highlighted that discussions on the impacts of digitalisation predominantly took place in larger enterprises rather than in SMEs (EU-OSHA, 2022a, 2022b). Notably, SMEs form the cornerstone of Estonia's economy. However, these enterprises face challenges in conducting comprehensive risk assessments, encompassing not only PSR factors but also broader risk assessment difficulties. Case studies conducted within Estonia reveal that PSRs are often given lower priority within these companies (EU-OSHA, 2022a).

In 2022, the results of the first Estonian National Mental Health Study (ENMHS) were published. The ENMHS, carried out from 2020 to 2022, consisted of an extensive survey of mental health in Estonia. The study's aim was to support the policy goals of various Estonian ministries by assessing the prevalence of mental health problems among the general population and providing a comprehensive overview of the mental health situation in the population, together with recommendations on how to regularly monitor the situation.

Combining surveys, analyses of registry data and qualitative research, the study pinpointed high levels of mental health issues, with one in four adults at risk of depression and one in five at risk of a generalised anxiety disorder. Not surprisingly, various mental health issues were linked to the onset of the COVID-19 pandemic, and stress levels, particularly among younger people, had increased by the second quarter of 2021.

According to the study, during the pandemic over two-thirds of respondents preferred to manage their mental health on their own rather than seeking help, which points to a high level of stigma being attached to mental health issues in Estonia.

2.2 Main national stakeholders involved in OSH governance and specifically in PSR prevention

Various stakeholders play important roles in OSH governance.

The **Ministry of Social Affairs**³ (Sotsiaalministeerium) is tasked with formulating policies and regulations concerning people's welfare, which directly impact mental health, including in the workplace.

Similarly, the **Ministry of Economic Affairs and Communication**⁴ (Majandus- ja kommunikatsiooni ministeerium) is responsible for developing policies related to labour welfare, also influencing mental wellbeing at work.

Social dialogue at national level is organised through the **Working Environment Council (WEC)**, which operated until the end of 2023 under the auspices of the Ministry of Social Affairs, and since then under the auspices of the Ministry of Economic Affairs and Communication. According to the Occupational Safety and Health Act,⁵ the WEC serves as an advisory body on workplace safety and health issues. It comprises experts from government agencies, as well as representatives from employers' and trade unions. Its primary objective is to develop recommendations and offer insights for creating and

³ Webpage of the Ministry of Social Affairs: <https://www.sm.ee/en>

⁴ Webpage of the Ministry of Economic Affairs and Communication: <https://www.mkm.ee/en>

⁵ Töötervishoiu ja tööhutuse seadus (The Occupational Safety and Health Act) (in Estonian): <https://www.riigiteataja.ee/akt/130062023087> (accessed 18 June 2024).

implementing policies related to the working environment, including addressing PSRs. The social partners are engaged in discussions on various aspects of the working environment and industrial relations as necessary.

The **Labour Inspectorate**⁶ (Tööinspektsioon) ensures compliance with labour laws and regulations, including those linked to workplace safety and health. Its main activities consist of informing employees and employers, investigating serious occupational accidents and analysing their causes, and exercising powers of enforcement, as well as conducting prevention campaigns aimed at specific sectors to improve respective OSH outcomes. At a strategic level, the body's focus has shifted in recent years from prosecution and punishment to awareness-raising activities, including the organisation of communication and information campaigns, information days, and counselling on the working environment and labour relations.

The **Health Board**⁷ (Terviseamet) is a government organisation operating under the auspices of the Ministry of Social Affairs. It contributes to healthcare and ensures health protection, environmental health, chemical safety and the safety of medical devices in Estonia through both proactive and complaint-based supervision in these areas. In addition, it participates in the preparation of occupational health programmes and organises their implementation, it analyses information concerning occupational diseases and work-related diseases, and it registers occupational health physicians and occupational health nurses. The Health Board provides guidance and oversight on public health matters, encompassing occupational health services that can significantly impact the prevention of PSRs and the promotion of mental health in the workplace.

The **Estonian Employers' Confederation**⁸ (Eesti Tööandjate Keskliit) represents the largest number of employers within local employers' establishments and encompasses all economic sectors in Estonia. In line with the European social model, the confederation defends the collective interests of all economic sectors at both national and international levels. It also collaborates with state authorities and trade unions.

Trade unions in Estonia are represented by the **Estonian Trade Union Confederation**⁹ (Eesti Ametiühingute Keskliit, EAKL). This is the largest trade union organisation in Estonia and comprises 15 branch trade unions, representing employees across a very broad range of sectors. The organisation defends employee interests and has the potential to promote OSH policies and practices. However, its current level of activity in this area is limited. It is important to note that the presence of trade unions and collective bargaining in Estonia are very limited. One of the challenges is the relatively low trade union membership rates (only 7%), which may limit their influence and bargaining power. The second largest trade union organisation is the Estonian Employees' Unions' Confederation (TALO), which represents cultural workers and public sector employees.

The **Estonian Association of Occupational and Organisational Psychologists**¹⁰ focuses on advancing professional development, advocacy, standards, education and research in the field of occupational and organisational psychology within Estonia.

3 Legislative and non-legislative measures

3.1 National legislative and strategic approaches to PSRs

3.1.1 National PSR legislation

This section describes the OSH legal framework in Estonia, highlighting the main legislative changes and defining how PSRs are addressed in the legislation.

⁶ Webpage of the Labour Inspectorate: <https://www.ti.ee/en>

⁷ Webpage of the Health Board: <https://www.terviseamet.ee/en> (accessed 11 June 2024).

⁸ Webpage of the Estonian Employers Confederation: <https://employers.ee/en/> (accessed 11 June 2024).

⁹ Webpage of the Estonian Trade Union Confederation: <https://www.eakl.ee/home> (accessed 11 June 2024).

¹⁰ Webpage of the Estonian Association of Occupational and Organizational Psychologists (only in Estonian): <https://www.etop.ee/> (accessed 11 June 2024).

The primary document underlying OSH in Estonia is the Occupational Safety and Health Act, which has been in force since 1999 and follows the European Framework Directive in having a very broad scope. As such, it serves as the foundation for various regulations developed and enacted by the government.

According to legislation, employers are required to establish and ensure a safe working environment and are responsible for organising OSH at company level. This includes conducting risk assessments and carrying out internal controls of the working environment, as well as drawing up action plans with measures to be taken to ensure a healthy and safe working environment. Risk assessments are intended to assess all occupational risks, including PSRs, leading to the implementation of an action plan to eliminate or mitigate occupational risks. To mitigate health risks associated with PSRs, employers are mandated to implement measures outlined in the Act. These measures include adapting the work organisation and the workplace to the needs of employees, optimising workloads, incorporating breaks into work schedules and improving the psychosocial working environment within the enterprise.

Psychological risks were first included in the Act in 1999, defined as ‘monotonous work or work that is not suited to the worker’s abilities, poor work organisation, prolonged periods of lone working, as well as other similar factors that may lead to changes in the worker’s mental state over time’. The Act has undergone significant legislative revisions over the last 10 years, placing more emphasis not only on occupational safety but also on occupational health and its promotion in the workplace, including PSR factors. In 2019, these provisions were expanded, and PSRs were further developed in the Act. The current Act defines PSRs as: ‘work involving a risk of an accident or violence, unequal treatment, bullying and harassment at work, work not corresponding to the abilities of an employee, working alone for an extended period of time and monotonous work and other factors related to management, organisation of work and working environment that may affect the mental or physical health of an employee and that may cause stress’. In all conducted interviews, the changes to the Act in 2019, particularly the addition of a PSR definition, were highlighted. The representative from the Labour Inspectorate and the academic expert interviewed for this study indicated that the definition of PSRs is clear and sufficient for the initial mapping of PSRs for employers. Additionally, it is preferable for the list of PSRs to remain open-ended in the legislation. At the same time, the representative from the Estonian Employers’ Confederation emphasised during the interview that, although the employer’s obligation is understandable from a legislative perspective, the legislation should be more concrete to avoid different interpretations, particularly concerning the open-ended list of PSRs. Employers cannot be sure that all PSRs are identified and managed, and they may not have done enough to protect the mental health of their employees. According to the employers’ representative, this situation underscores the need for a comprehensive understanding of PSRs.

As mentioned above, this Act is very broad in scope as it applies to enterprises of all sizes. Specifically, it concerns all workers who have an employment contract. Since 2023, this Act applies to the service conditions of members of the Defence Forces and those performing a substitute service, as well as to the employment of employees of the Police and Border Guard Board, security agencies and rescue services, insofar as not otherwise provided for by special law.

In November 2022, regulations regarding remote working were added, expanding the scope of the Act. These amendments address work tasks performed remotely, requiring employers to ensure compliance with OSH requirements as far as possible, considering the specific nature of remote working. Employers have several obligations in this regard. They must assess potential risks related to the nature of the work in their workplace risk assessment and implement measures to mitigate health risks specific to remote working. In addition, employers are required to provide appropriate guidance to employees before remote working begins and as needed thereafter. In addition, employers must supply suitable work equipment, arrange employee health examinations, investigate occupational accidents and illnesses, and pay sickness benefits as required by law. The set-up of the remote workplace must be mutually agreed upon by the employer and the employee.

In addition, the employer is required under the Act to ensure the provision of occupational health services to employees. OSH services constitute an important infrastructure that provides expert advice to employers and employees, provides safety and health training and counselling, and initiates preventive and safeguarding actions in the field of OSH. In Estonia, these services are provided by occupational health physicians, occupational health nurses, hygienists, occupational psychologists and ergonomists. Services cannot be provided by someone from within the company, even if that person

has the relevant training. According to the Estonian OSH Act, legal entities or self-employed entrepreneurs may provide OSH services. According to law, the statutory requirements are met if the employer acquires the services from any of the individual specialists, which means that there is no requirement for the multidisciplinary provision of OSH services (Martimo, 2005). The tasks of occupational health professionals are outlined in the Act and elaborated for occupational health physicians in legislation, namely 'The Procedure for Providing Occupational Health Services'.¹¹ According to the Act, occupational health professionals, including occupational psychologists, may provide OSH services as follows: carrying out a risk assessment of the working environment, including the measurement of risk parameters; advising the employer on adapting the work to the worker's abilities and state of health; advising the employer on the choice and use of work equipment and personal protective equipment and on improving working conditions; organising rehabilitation treatment for workers; and providing psychological counselling for both the employer and the worker.

3.1.2 Occupational diseases related to PSR exposure and mental health aspects

The Estonian regulatory framework^{12, 13} makes a distinction between occupational accidents, occupational diseases, work-induced diseases and work-related diseases.

In Estonia, work-related diseases are divided into two categories: occupational diseases and work-induced diseases. Occupational diseases and/or their causes are listed and approved by the Ministry of Social Affairs,¹⁴ and are defined as diseases caused by an occupational risk factor or the nature of the work. Work-induced diseases, on the other hand, are illnesses that are not listed and approved by the Ministry of Social Affairs and/or where there is insufficient evidence to establish that the predominant cause of a given illness is the working environment. As a result, these illnesses cannot be officially diagnosed as occupational diseases.

The aforementioned list covers six different groups of occupational risk factors that can cause different illnesses, including: 1) respiratory occupational diseases and tumours; 2) occupational communicable diseases and parasitic occupational diseases; 3) occupational diseases caused by physical and physiological risks at work; 4) occupational skin diseases and tumours; 5) occupational diseases caused by chemical agents in the working environment; and 6) diseases caused by PSRs in the working environment.

The sixth category relating to PSRs was added to that list in 2022. According to the updated version, occupational diseases caused by PSRs in the working environment are:

1. post-traumatic stress disorder, and
2. other illnesses caused by PSRs in the working environment.

In Estonia, work-related diseases are diagnosed by occupational health physicians. Occupational diseases are primarily diagnosed at the Occupational Health Centre of the North-Estonian Regional Hospital. According to legislation,¹⁵ an occupational health physician who diagnoses an occupational disease in a worker must inform the employer and the Labour Inspectorate no later than five days after the diagnosis.

Based on data from the Labour Inspectorate, one occupational disease directly caused by PSRs, classified as 'other general work-related physical or mental stress', was diagnosed in 2023. Additionally, 10 work-related diseases were diagnosed in 2023 and seven in 2024. These low numbers highlight the ongoing challenges in addressing the consequences of PSR factors at work.

¹¹ Law N° 87, 'Töötervishoiuteenuse osutamise kord' (The procedure for providing occupational health services) (in Estonian), adopted in 2022: <https://www.riigiteataja.ee/akt/117122022026>

¹² The Occupational Safety and Health Act (in Estonian): <https://www.riigiteataja.ee/akt/130062023087> (accessed 9 October 2024).

¹³ Law N° 87, 'Töötervishoiuteenuse osutamise kord' (The procedure for providing occupational health services) (in Estonian), adopted in 2022: <https://www.riigiteataja.ee/akt/117122022026>

¹⁴ Regulation 'List of occupational diseases', RTL 2005, 51, 722; 31.12.2022, Minister of Social Affairs: <https://www.riigiteataja.ee/akt/897867> (accessed 11 April 2024).

¹⁵ Law N° 87, 'Töötervishoiuteenuse osutamise kord' (The procedure for providing occupational health services) (in Estonian), adopted in 2022: <https://www.riigiteataja.ee/akt/117122022026>

Several interviewed stakeholders, including representatives from the government (Labour Inspectorate and the Ministry of Social Affairs), an academic expert and an external OSH expert, agreed that there are significant challenges in diagnosing occupational diseases caused by PSRs. These challenges include a shortage of occupational psychologists and a lack of sufficient psychiatric expertise available to occupational health doctors, which hinders their ability to accurately diagnose such conditions. Furthermore, the quality of risk assessments addressing PSRs is often inadequate, making it difficult for occupational health doctors to identify and diagnose work-related diseases effectively.

There is no information available in Estonia on cases of occupational diseases diagnosed due to long-term exposure to PSRs or resulting from occupational accidents. According to the OSH Act, an occupational accident refers to harm to an employee's health or an employee's death that occurred in the performance of a task as instructed by the employer or some other work operation with the employer's permission, during a break or any other time when acting on behalf of the employer. Harm to health or death that occurs in the listed cases but is not causally related to the employee's work or the working environment is not considered to be an occupational accident. For instance, an accident that happens on the way to or from work is not considered as an occupational accident.

Compensation for occupational accidents and occupational diseases is integrated into the health insurance (temporary loss of work ability) and pension insurance (permanent loss of work ability) schemes. The system of occupational disability and occupational accidents insurance is voluntary for employers in Estonia. This means that there is no compulsory system of insurance for occupational diseases and accidents for an employer. That leads to the situation where people injured at work have to seek compensation through the courts.

3.1.3 National strategic approaches to PSR prevention at work

Over the last decade, recognition of the importance of PSRs in the working environment and the general mental health of the population has increased in Estonia. This evolution of priorities is reflected in a variety of non-legislative national policies and initiatives aimed at addressing PSRs, enhancing a positive social climate at work and promoting wellbeing.

Specific strategic policies to prevent PSRs at work in Estonia include the implementation of the Population Health Development Plan 2020-2030, the 'Mental Health and Well-being' policy, and the Green Paper on Mental Health.

One of the most important strategic documents at state level is the **Population Health Development Plan 2020-2030**,¹⁶ drawn up by the Ministry of Social Affairs and approved by the Estonian government. The plan includes a range of measures to prevent mental health problems in the workplace. It briefly highlights the importance of the mental health of the entire population and sets three main goals: 1) to increase the number of years of healthy life; 2) to achieve a faster increase in the number of years of healthy life in relation to the increase in the life expectancy; and 3) to reduce health inequalities (between genders, regions and education levels).

The related programme of health-supporting choices describes mental health development actions and highlights among other topics the 'focus on maintaining and promoting mental health in the workplace'. Additionally, it states: 'Healthcare management, working conditions and the psychosocial working environment must support the preservation of employee health and workability'.

Another state-level policy document, the **Green Paper on Mental Health** (*Vaimse tervise roheline raamat*) (Ministry of Social Affairs, 2020), drawn up in 2020, outlines a clear objective for the Ministry of Social Affairs. This objective is to assist and support employers and occupational health service providers in identifying, evaluating and implementing additional measures for preventing PSRs at work. These measures aim to enhance the psychosocial working environment by implementing various

¹⁶ National Health Plan 2020–2030: <https://www.sm.ee/sites/default/files/documents/2023-03/National%20Health%20Plan%202020-2030.pdf> (accessed 6 June 2024).

strategies. Additionally, the paper emphasises the importance of enhancing supervision and counselling related to PSR factors to ensure comprehensive support for individuals in the workplace.

In 2021, a year after Estonia adopted a national mental health strategy in the form of a green paper, a mental health department was set up at the Ministry of Social Affairs. In 2022, work started on the mental health action plan for 2023–2026, whose key themes include innovation, promotion, prevention and self-care, community care, mental health services and crisis preparedness (Estonian Cooperation Assembly, 2023). This document sets out concrete actions by the Estonian Ministry of Social Affairs to collaborate with relevant ministries, departments and partners in developing mental health policies and allocating resources accordingly. The latter focuses on three priorities: 1) development of a mental health monitoring system; 2) increased attention to the promotion, prevention and support of mental health; and 3) expanding access to mental health care and improving its quality.

3.2 Measures supporting the implementation of PSR legislation

The current section presents measures supporting the implementation of PSR legislation and measures designed to strengthen compliance with PSR regulations.

In Estonia, various initiatives, documents and tools have been developed at national level with support from or based on initiatives of different ministries, departments and boards to support the implementation and adoption of legislation on PSR prevention in the workplace and the mental health of individuals. An overview of such initiatives is presented below.

A well-known initiative by Peaasjad NGO, a non-governmental organisation, focuses on mental health awareness and support. Set up in 2009 with aid from the Ministry of Social Affairs, the Ministry of Education and the Health Insurance Fund, its mission is to reduce stigma around mental health issues and promote mental wellbeing. Furthermore, since 2021, its mission also includes supporting employers in the prevention of PSRs. Peaasjad NGO is accessible via www.peaasi.ee which serves as a platform established by the Estonian Mental Health Association. It offers a wealth of knowledge, resources and support on mental health topics, including articles, guides, tools and professional contacts. According to the interview with the Labour Inspectorate representative, these practical tools are also recommended by the Labour Inspectorate and are used by both employers and employees. However, representatives from social dialogue organisations indicated that no assessments or follow-up evaluations have been conducted regarding the usability and effectiveness of these tools.

One of the practical tools produced by Peaasjad NGO, namely 'Mental Health Good Practice and Action Plan in the Workplace'¹⁷ (available in Estonian, English and Russian), is designed to promote awareness, prevention, counselling and support for mental health issues. The goal is to improve productivity, reduce absenteeism and foster a supportive working environment. The current guidance document aims to provide employers and employees with the necessary tools and resources to effectively address mental health issues. Through such measures, the plan aims to promote an organisational culture that prioritises mental wellbeing and overall health. Among the support services provided, establishments mainly use training and counselling services.

Peaasjad NGO also awards Mental Health Labels to establishments that prioritise mental health in the workplace. There are four categories of labels: gold, silver, bronze, and asterisk. Mental health-friendly organisation labels were awarded for the first time in 2023, with 126 employers receiving recognition.¹⁸ The label has been awarded to 100 employers in 2024.¹⁹

The National Institute for Health Development (NIHD), a governmental authority, has published a handbook titled 'Mental health in the workplace. A handbook for employers and employees' (National Institute for Health Development, 2015), available in Estonian. The handbook outlines organisational good practices from Estonian establishments for creating a mentally healthy working environment and recommends actions that both employees and employers can take to prevent PSRs.

¹⁷ Ministry of Social Affairs and Ministry of Education and Science: 'Mental Health Good Practice and Action Plan in the workplace': <https://peaasi.ee/vaimse-tervise-tegevuskava-tookohal/> (accessed 6 June 2024).

¹⁸ See: <https://peaasi.ee/vaimse-tervise-margis-2023/> (accessed 21 October 2024).

¹⁹ See: <https://peaasi.ee/vaimse-tervise-margis-2024/> (accessed 21 October 2024).

Similarly, guidance published by the Social Insurance Board in 2020 titled 'Psychosocial crisis support' (Social Insurance Board, 2020) provides information and psychosocial crisis support services (online and phone) for both employers and employees on dealing with crisis situations. Through a traffic light support package, individuals can learn effective self-care techniques, methods for supporting others in need, and strategies for assisting colleagues and the organisation during challenging times.

Moreover, the NIHD has developed the 'Workplace health promotion self-assessment tool'²⁰ that assists employers in gaining an understanding of general health promotion in their organisation.

The Labour Inspectorate has developed and published several brochures on PSRs and mental health, covering various aspects relevant to wellbeing at work. These guides cover a wide range of topics, from understanding the harmful effects of work-related PSRs and their consequences, such as stress and burn-out, to providing people with practical tools to maintain optimal mental health. In addition, from 2010 to 2020, a webpage dedicated to work-related stress was provided by the Labour Inspectorate that included a self-analysis tool (the HSE Management Standards Indicator Tool, based on the United Kingdom model) for companies to measure work-related stress. However, the website was closed at the end of 2020 for technical reasons. Furthermore, the Labour Inspectorate has also developed a practical tool for the risk assessment of psychological distress and a questionnaire for PSR assessment to help establishments identify and address PSRs. These offline tools facilitate the promotion of mental health among employees and support the creation of a healthier working environment:

- 'Tool for risk assessment of psychological distress from the perspective of psychological stress' (Estonian Labour Inspectorate, 2021a).
- 'Questionnaire for risk assessment of psychological risks' (Estonian Labour Inspectorate (2021b).

A targeted inspection campaign focusing on PSRs was conducted in the spring of 2018, specifically addressing drivers in the transport sector. The most recent targeted PSR inspection, which began at the end of September 2019, focused on healthcare facilities and nursing homes. According to a representative from the Labour Inspectorate, the 2019 inspection was quite successful. However, no further targeted inspections have been conducted since then, and there are no current plans for such inspections.

However, at the same time numerous initiatives demonstrate the growing recognition of the importance of addressing PSRs and fostering mental wellbeing in the workplace. More recently, the awards for good practices and actions regarding the working environment in establishments, which are detailed annually by the Labour Inspectorate, have focused on preventing PSRs and promoting mental health.

To enhance the role of the Labour Inspectorate in providing advice, a consultancy service funded by the European Social Fund — 'Consultancy service in OSH – face-to-face consultancy' (EU-OSHA, 2018) — was launched in 2015, in cooperation with the local authorities, and it continues to operate.

In terms of awareness-raising activities, campaigns promoting good practices and healthy workplaces have been implemented, through among other things workshops and seminars, factsheets and guidelines on managing stress and PSRs at work, available on the Work Life Portal 'Tööelu'. In recent years, the Labour Inspectorate has collected data on good practices from companies in dealing with work-related stress and implemented related awareness-raising activities through campaigns in 2010, 2012 and 2014-2015, focusing on the health, services and transport sectors.

Finally, in 2023 a mental health consultant was recruited by the institution. This consultant is actively involved in providing guidance to employers and employees on PSRs and conducting training sessions. These services are highly sought after by establishments. Additionally, the consultant frequently visits establishments, often alongside labour inspectors, to control compliance with legislation on PSRs. Based on insights provided by the mental health consultant, the most essential and relevant topics in Estonian establishments include workplace bullying, remote working (working alone for extended periods), and work-related accidents and violence, particularly in schools and in public safety authorities. The interview results show that, generally, employers know how to assess PSRs, but that there are

²⁰ The National Institute for Health Development: 'Workplace health promotion self-assessment tool': https://www.terviseinfo.ee/images/T%C3%B6koha_tervisedenduse_enesehindamisvahend.xlsx (accessed 6 June 2024).

often no preventive measures and follow-up actions. In addition, the mental health consultant emphasised the absence of rehabilitation and back-to-work programmes regarding PSRs. This shortcoming highlights the need for establishments not only to identify risks but also to implement comprehensive strategies that support employee wellbeing and facilitate a smooth back-to-work transition after an absence because of mental health problems.

Lastly, the most recent conference organised by the Labour Inspectorate in 2023 — the Spring Conference²¹ — focused on mental health at work and provided insights into work-related psychosocial problems.

The Estonian Mental Health and Well-being Coalition²² (Eesti Vaimse Tervise ja Heaolu Koalitsioon, VATEK), an independent public interest foundation that brings together mental health organisations from across Estonia, is an example of an advisory partner that has implemented relevant activities, with a focus on OSH-related issues in the workplace. VATEK has developed a mental health strategy for the period 2016-2025 that addresses mental health in the workplace, including work-related stress and the need for employee-friendly working environments.

In collaboration with the Ministry of Social Affairs, the Labour Inspectorate, the National Institute for Health Development and the Health Board, VATEK has also developed a website (www.vatek.ee) dedicated to promoting a good work–life balance. The website offers articles, information and references to relevant materials. VATEK's initiatives include efforts targeting workplace environments. In addition, the 'Vaimse Tervise Kuu' (Mental Health Month) campaign,²³ organised annually in cooperation with VATEK and Ministry of Social Affairs, focuses on promoting mental wellbeing and reducing stigma around mental health issues.

For several years, the NIHD has published a health calendar²⁴ with the aim of assisting employers in organising activities that support the health and wellbeing of their employees. Over the course of 12 months, the health calendar highlights health topics worthy of attention in the workplace and provides advice on what employers can do or what each worker can do for their health. Entities are then encouraged to adopt their own health calendar or align activities with the themes proposed by the NIHD. In the last two years, various psychosocial aspects have been included in this calendar, such as 'Mental Health: Recognising and Appreciating Employees', 'Mental Health: Relaxation Breaks and Good Sleep', and 'Parenting: Vacation and Working with the Whole Family'. In 2024, the health calendar was suspended owing to the changeover of responsibility of the Labour Inspectorate. However, the latter has not yet found the necessary resources to continue with the health calendar.

To sum up, different governmental and non-governmental bodies have developed a series of informational and practical tools that together contribute to the implementation of existing legislation on PSRs. However, several stakeholders emphasised during the interviews that there is still a bigger focus on individual mental health promotion rather than on systematic PSR prevention at work. The efforts largely concentrate on promoting individual wellbeing, with the aim of enhancing personal resilience, stress management and coping mechanisms. The overarching approach appears to be rooted in the belief that by empowering individuals to take charge of their mental health, overall wellbeing can be significantly improved. Four out of seven interviewees agreed that while personal mental health promotion is valuable, it seems that the initiatives lack a strong and systematic emphasis on preventing PSRs within the workplace. Instead, the approach leans heavily towards supporting individuals in managing their mental health rather than tackling the systemic and environmental factors that contribute to PSRs at work. This gap could lead to a situation where individuals are equipped to handle mental health issues, but the root causes — factors related to organisational culture, job demands, or an imbalance between work and personal life, as well as stigma — continue to go unaddressed.

²¹ More info: <https://www.ti.ee/uudised/tooinspektsiooni-kevadine-konverents-keskendus-vaimsele-tervisele-tool> (accessed 11 June 2024).

²² Webpage of the Estonian Mental Health and Well-being Coalition (only in Estonian): <https://www.vatek.ee/> (accessed 18 June 2024).

²³ Vaimse tervise kuu (in Estonian): <https://www.vaimsetervisekuu.ee/> (accessed 18 June 2024).

²⁴ Tervisekalender (in Estonian): <https://www.terviseinfo.ee/et/tervise-edendamise/tookohal/tervisekalender-2022> (accessed 18 June 2024).

3.3 Impact of the COVID-19 pandemic and digitalisation on approaches to PSRs

The COVID-19 pandemic and digitalisation have increased the focus on PSRs. The COVID-19 pandemic has increased the attention paid to mental health issues and further emphasised the importance of collaboration between governments, local authorities and stakeholders to ensure mental wellbeing during different crises. Over the past five years, several initiatives have been launched in Estonia, many of which are explicitly linked to the COVID-19 pandemic or the impacts of digitalisation. The COVID-19 pandemic significantly impacted mental health in Estonia. For example, the first ENMHS in 2022 revealed that one in four adults faced a risk of depression following the pandemic. It also highlighted a stark contrast in depression risks between income groups: 45.5% in the lowest income quartile versus 19.6% in the highest. Recognising these issues, policymakers began prioritising mental health in their political agendas during the latter stages of the COVID-19 pandemic. Accordingly, the Ministry of Social Affairs established the Mental Health Task Force (Bakhtina, 2022) in 2021, collaborating with stakeholders from various sectors, including health, education, social affairs, criminal justice, scientists, NGOs and start-ups. They coordinated activities with the COVID-19 Scientific Advisory Board and established an advisory panel of experts. The supplementary budget allocated €2.85 million for mental health services and an additional €15 million for local government support services. This collaboration also resulted in the Green Paper on Mental Health mentioned in section 3.1.3. This was Estonia's first comprehensive policy document on this topic. Subsequently, in early 2022, the Ministry of Social Affairs established a Mental Health Department within its Health Sector and later in the year drafted the Mental Health Action Plan for 2023–2026, also mentioned in section 3.1.3.

In the context of teleworking, which also increased significantly in Estonia as a result of the COVID-19 crisis in 2020–2021, the Ministry of Social Affairs implemented revisions to the Occupational Health and Safety Act in November 2022. This action was precipitated by the absence of specific regulatory provisions addressing telework health and safety practices. Consequently, teleworking requirements were established, imposing obligations on both employers and employees, including in particular the employer's responsibility to conduct risk assessments for teleworking arrangements, which encompasses the evaluation of PSR factors. Additionally, employers are mandated to provide comprehensive guidance to employees regarding telework-related risks and strategies for their avoidance.

Overall, in the post-COVID-19 period, there has been an increase in discussions surrounding psychosocial factors and mental health in Estonia, aimed at enhancing awareness among both employers and employees. Initiatives such as '*Vaimse tervise vitamiinid*' (Mental Health Vitamins) and campaigns such as '*Peaasi*' (Mind First) focus primarily on raising awareness of mental health issues and organising training for employers and employees. Additionally, broader programmes such as the '*Töövõime reform*' (Work Ability Reform) have been implemented to support those with reduced work capacity. These efforts are part of a broader strategy to address mental health challenges and the effects of digitalisation on wellbeing in the post-pandemic era.

Concerning working hours, engaging in work during personal time and work–life balance, data show that the gradual incorporation of new technologies such as artificial intelligence (AI) and the general increase of digitalisation in labour²⁵ are pressurising employees into developing new skill sets, which in turn gives rise to PSRs. Due to the rapid technological development, there is a lack of comprehensive data on the impacts of these developments on mental health. In addition, the surveys on digitalisation conducted after the pandemic have primarily emphasised teleworking, rather than encompassing broader discussions on technological development and AI (Piirsalu-Kivihall et al., 2023; Sinitsyna et al., 2022).

²⁵ Statistics Estonia. (2023, 15 September). *Enterprises' use of AI technologies is on the rise*. <https://stat.ee/en/news/enterprises-use-ai-technologies-rise>

The Labour Inspectorate provides informational resources regarding working time regulations and the rights and obligations of both employers and employees and offers advisory services that enable employers and employees to seek guidance on matters related to work organisation. Nonetheless, as confirmed by the interviews with representatives from the Ministry of Social Affairs and the Labour Inspectorate, research (Freimann & Merisalu, 2015; Sepp et al., 2019; Teichmann, 2020) indicates that employees may be reluctant to report PSRs, such as excessive workload, because of fears of potential job loss. Additionally, the stigma surrounding mental health issues remains very high in Estonia. While mental health risks are increasing owing to digitalisation and technological advances, there is however a lack of studies on their potential impact on the wellbeing of employees and there are still perceived obstacles to the use of available informational and advisory services.

3.4 PSR prevention activities implemented by the social partners

No very specific PSRs topics have been put on the table during tripartite negotiations. The focus has been more on issues related to legislative changes and employment relations. Occasionally, however, so-called lower-level meetings (individual meetings either with the trade unions or the Employers' Confederation) are organised to address more specific concerns. The existence of a social dialogue is acknowledged. There are active trade unions and they are working to represent labour interests, but the strength and influence of these trade unions are relatively limited compared with neighbouring countries such as Finland and Sweden, where the trade unions have historically played a powerful role in shaping labour markets and policies.

The Estonian Employers' Association has developed a Mental Health First Aid Kit, which compiles best practices and advice to support both establishments and their employees. This electronic resource²⁶ is available on the Work Life Portal (www.tooelu.ee). Alongside the launch of the kit, the Employers' Association also organised several awareness days in 2021, funded by the 'Töövõime reform' (Work Ability Reform). These events included seminars such as 'How to maintain your own and your team's mental health' and 'Mental health and work – how they are connected and how to help?' and so on.²⁷

4 Success factors and challenges addressing PSRs

Although Estonia amended its national legislation in 2019 to more specifically address PSRs, significant challenges remain in effectively preventing and managing these risks in workplaces. Despite the legal framework being in place, many employers and establishments struggle to implement practical measures to protect workers from PSRs and their consequences.

Feedback from interviews with key stakeholders highlights that there has been an increased emphasis on preventing PSRs and supporting the mental health of employees, especially since the 2019 amendment to the OSH Act. However, the employers' representative and the external academic expert agreed that while awareness of PSRs has increased, translating this into effective workplace practices remains an ongoing challenge in Estonia. For example, an employers' representative stated that there are not many tools or relevant materials available for employers regarding PSRs, apart from the Work Life Portal (Tööelu) website as a source of reliable information. In addition, the employers' representative noted that the comprehensive guidance²⁸ developed is intended more for occupational health doctors than for employers.

Although a representative of the Ministry of Economic Affairs and Communications emphasised during the interview that the issue of PSRs has gained significant attention since the 2019 changes to the Act,²⁹ an employers' representative stated that awareness of the issue among employers has improved over time but largely depends on available resources. There is a lack of knowledge and experience regarding PSRs, in particular in the case of micro and small enterprises, as well as enterprises in rural areas.

²⁶ Vaimse tervise esmaabikapp (in Estonian): <https://www.tooelu.ee/et/307/vaimse-tervise-esmaabikapp#sinu-esmaabikapp> (accessed 18 June 2024).

²⁷ Tööandjate Keskliit (in Estonian): <https://employers.ee/toovomereform/> (accessed 18 June 2024).

²⁸ Law N° 87, 'Töötervishoiuteenuse osutamise kord' (The procedure for providing occupational health services) (in Estonian), adopted in 2022: <https://www.riigiteataja.ee/akt/117122022026>

²⁹ The Occupational Safety and health Act (in Estonian): <https://www.riigiteataja.ee/akt/130062023087> (accessed 9 October 2024).

Although the Labour Inspectorate and the ministry organise events on the theme of PSRs, participation and awareness largely depend on whether employers are aware of and able to attend these events.

4.1 Assessment of the impact of PSR measures on PSRs

According to the results of the interviews with stakeholders, numerous PSR-related activities and measures have been developed and introduced in recent years. However, there is insufficient data on the effectiveness of these measures, specifically on how well they have reached workplaces and triggered changes. Representatives from the Ministry of Economic Affairs and Communications and the Labour Inspectorate stated that the effectiveness of both legislative and non-legislative measures implemented has not been systematically monitored or evaluated.

However, representatives from the Labour Inspectorate and the Ministry of Economic Affairs and Communications stated that the services provided by the Labour Inspectorate, including the free consultation service offered by the mental health consultant to employers and employees, have been systematically evaluated and that feedback received has been positive. According to the interviews, the mental health consultant's expertise is highly valued by companies and also among colleagues at the Labour Inspectorate. Labour inspectors often prefer to control compliance with regulations regarding PSRs in collaboration with the mental health consultant. Moreover, employers frequently request consultations and training sessions on PSRs, bringing a third party into the workplace to provide new ideas and solutions. These actions reflect a growing awareness in this area among employers but seem to be mainly limited to larger establishments with more resources.

At the same time, representatives from the Labour Inspectorate and the Ministry of Economic Affairs and Communication emphasised that workplaces often lack a systematic approach to addressing PSRs. In particular issues such as workplace bullying, harassment, psychological violence and other conflicts are not systematically addressed. The Labour Inspectorate also noted that even when PSRs are identified, there is often insufficient knowledge on how to address and manage them effectively, especially in SMEs. This problem was confirmed by the academic expert, who attributed this to a lack of open communication and cooperation in companies on this topic. The considerable stigma attached to mental health issues in Estonia presents a challenge when it comes to putting this topic higher on the agenda of companies.

Several other general challenges exist, such as a shortage of occupational psychologists and a lack of sufficient psychosocial expertise available to occupational health doctors, which impedes their ability to accurately diagnose psychological conditions and their relation to work, a relatively weak social dialogue, a lack of relevant statistical data and research activities in the field of OSH, and sometimes the poor quality of PSR assessments (Labour Inspectorate, 2019; Ministry of Social Affairs, 2019).

Overall, while legislative progress has been made in Estonia, there is a need for the development of more practical tools, guidance and support to help workplaces implement PSR prevention measures more effectively. Existing activities and measures are not yet systematically evaluated, and their impact on PSR prevention not systematically assessed.

While Estonia has established enforcement mechanisms to ensure compliance with PSR legislation, several interviewees also mentioned that challenges remain in terms of monitoring and enforcement capacity. Limited resources for inspections — according to the Labour Inspectorate's 2022 statistics, there is only one labour inspector for every 1,191 companies and 12,518 employees — hinder the ability to effectively monitor workplaces. Furthermore, identifying and addressing PSRs during routine inspections presents additional challenges.

Furthermore, the analyses of supportive non-legislative measures addressing PSRs, complemented by the interviews with stakeholders, reveal that the focus is more on the mental health of employees rather than on systematic PSR prevention. The emphasis on mental health is evident through various supportive measures focusing on stress management programmes, consultations with psychologists, resilience training and mental health awareness campaigns. These initiatives encourage individuals to take proactive steps in managing their mental health, promoting self-care and personal responsibility. However, this emphasis on the individual's mental health and responsibility might inadvertently neglect the larger systemic and organisational elements that are covered by the legislative approach.

Representatives from the Labour Inspectorate and Ministry of Economic Affairs and Communications indeed emphasised that employers often fail to comprehensively identify and evaluate PSRs in their risk assessments. Moreover, the representative from the Ministry of Social Affairs and the academic expert mentioned that some employers rely on a single preventive measure, namely one-to-one psychological consultations provided to employees. While such consultations can be helpful, they criticised this approach as insufficient, emphasising that it should not be the first or only preventive measure implemented to address PSRs at the workplace. Effective prevention requires a more comprehensive strategy tailored to the specific workplace.

Representatives from employers, the Ministry of Social Affairs and an academic expert highlighted that the open-ended nature of the PSRs list could cause confusion among employers, leading to doubts about whether all relevant PSRs are being identified and addressed effectively.

On the other hand, Estonian employers see the importance of both physical and psychosocial health in ensuring a healthy and productive workforce. They therefore emphasised the responsibilities of workers and employers and said that they would like the Labour Inspectorate to take this more into account.

5 Conclusions

This report provides an overview of how PSRs at work are approached in legislation and implementation measures in Estonia. It outlines the policy context and legal framework governing OSH, with a specific focus on the prevention of PSRs. Through a combination of desk research, analysis of existing legislative and non-legislative measures, and insights gathered from seven stakeholder interviews, the report offers an overview of the landscape surrounding PSR prevention at work in Estonia.

The interviews further showed that specifically the implementation and support measures in Estonia focus more on mental health rather than on systematic PSR prevention measures. In this regard, the feedback from some stakeholders also emphasised the importance of enhancing the legislative framework to ensure that it includes clearer PSR prevention concepts and establishes the background for providing more specific guidelines for employers regarding implementation. Generally, there seems to be a need to raise awareness and understanding about PSR prevention, as well as a need to provide more practical tools and relevant materials for employers and OSH experts to effectively prevent PSRs and address their impact on the health of workers. Moving forward, it will be essential to focus on providing micro and small enterprises in particular with the support they need to comply with PSR legislation and increase their competencies regarding the prevention of PSRs.

One strand of action in this direction should address the stigma related to mental health issues, which still seems to be an important hindrance for open communication and proactive preventive measures in companies in Estonia.

All interviewed stakeholders highlighted the importance of the recent inclusion of PSRs as a possible cause of occupational diseases. This development reflects a growing recognition of the significance of PSRs in the workplace, their impact on mental health, and the need to adopt comprehensive approaches to identify, prevent and manage work-related health risks.

Collaboration between stakeholders is vital for the successful implementation of PSR prevention strategies. Estonia continues to face challenges related to the social dialogue with a rather low unionisation rate.

Other aspects mentioned that would help to better tackle the current situation are more precise statistical data and better research in relation to the current situation of PSRs and their prevention at work.

In summary, a range of factors has been identified to improve systematic PSR prevention in companies in Estonia, building on enhancing the capacity for inspections and enforcement, fostering stronger collaboration among all relevant parties and especially the social partners, combating the stigma attached to mental health issues, and providing more practical approaches and support for companies, especially micro and small enterprises.

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