

DOES THE OHSA COVER PSYCHOSOCIAL HAZARDS? YES!

A SUPPORT DOCUMENT FOR WORKERS AND THEIR ADVOCATES

WHAT ARE PSYCHOSOCIAL HAZARDS?

Workplace factors that have the potential to cause or contribute to psychological or physical harm if not adequately eliminated or controlled, ideally at the source. Examples of workplace factors include work demands, work organization, job characteristics, and offensive behaviours. Psychosocial hazards are identifiable, measurable, controllable and preventable. If not addressed, they can lead to psychological as well as physical harm, such as musculoskeletal injuries and cardiovascular events.

The term “psychosocial” is preferred instead of “psychological” when referencing workplace contexts. “Psychological” restricts the conversation to the individual’s medical status. “Psychosocial” describes the location of the hazards that exist that can impact an individual’s psychological wellness. The hazards are in the interactions of work. While the impact on the worker is psychological in nature, the term psychosocial acknowledges that individuals interact with and are affected by factors in their external environment. Using “psychosocial” makes it clear that we are identifying workplace hazards, not diagnosing an individual.

[See Ontario.ca reference to Mental Injury Tools](#)

WHAT IS THE ROLE OF WORKPLACE PARTIES TO ELIMINATE OR CONTROL PSYCHOSOCIAL HAZARDS?

- 1.** Workplace psychosocial hazards, injuries, and illnesses must be reported by workers and addressed by the Joint Health and Safety Committee (JHSC).
- 2.** Employers and the Ministry of Labour, Training and Skills Development (MLTSD) must identify, assess and control psychosocial hazards at the source.
- 3.** When hazards, injuries and illnesses are not addressed in the workplace, the MLTSD must enforce the Occupational Health and Safety Act (OHSA, or “the Act”) using appropriate and proportional orders, penalties and fines.

WHAT IS THE LAW?

Employers have a legal duty to take “every precaution reasonable” to prevent injury and illness [OHSA s.25(2)(h)]. This responsibility includes addressing the hazards (workplace factors) that lead to psychological injury and illness.

WHAT OTHER EVIDENCE EXISTS?

- the Workplace Safety and Insurance Board (WSIB) compensates for mental injuries that can be linked to a workplace (e.g. chronic mental stress claims).
- WSIB benefit entitlements exist for certain professions where the development of certain types of mental injuries are presumed to have occurred in the workplace.
- the Ontario Prevention System acknowledges the occupational burden of psychosocial hazards in its research priorities.
- other jurisdictions, like the European Union (EU) and Australia, have been formally preventing psychosocial hazards for years.
- employers have duty to address harmful behaviours in the workplace that contribute to the psychosocial burden (e.g. harassment, including sexual and racial harassment)
- case law exists (e.g. Musty v. Meridian Magnesium Products Ltd, 1996) that defines harassment as an assault on an individual's mental psyche

HOW WILL ADDRESSING PSYCHOSOCIAL HAZARDS BENEFIT WORKERS, EMPLOYERS AND SOCIETY?

Psychosocial injuries are a substantial burden to workplaces. For example, a worker who has experienced trauma in the workplace may develop anxiety, depression or Post-Traumatic Stress Disorder (PTSD), to name but a few associated and cumulative conditions. Psychosocial injuries and disorders can place workers on long-lasting leaves and are difficult to treat effectively given a chronic lack of appropriate and accessible mental health care in our healthcare system.

CAN PSYCHOSOCIAL AND PHYSICAL HAZARDS COMBINE TO CAUSE GREATER INJURY?

Yes! It's almost impossible to make an arbitrary distinction between mental and physical health. Most, if not all, injuries and illnesses include physical and psychological symptoms – and they can worsen without intervention. You cannot separate the functioning of the brain, from the functioning of the rest of the body. The two are intertwined and treating one without acknowledging the other tends to lead to worse outcomes.

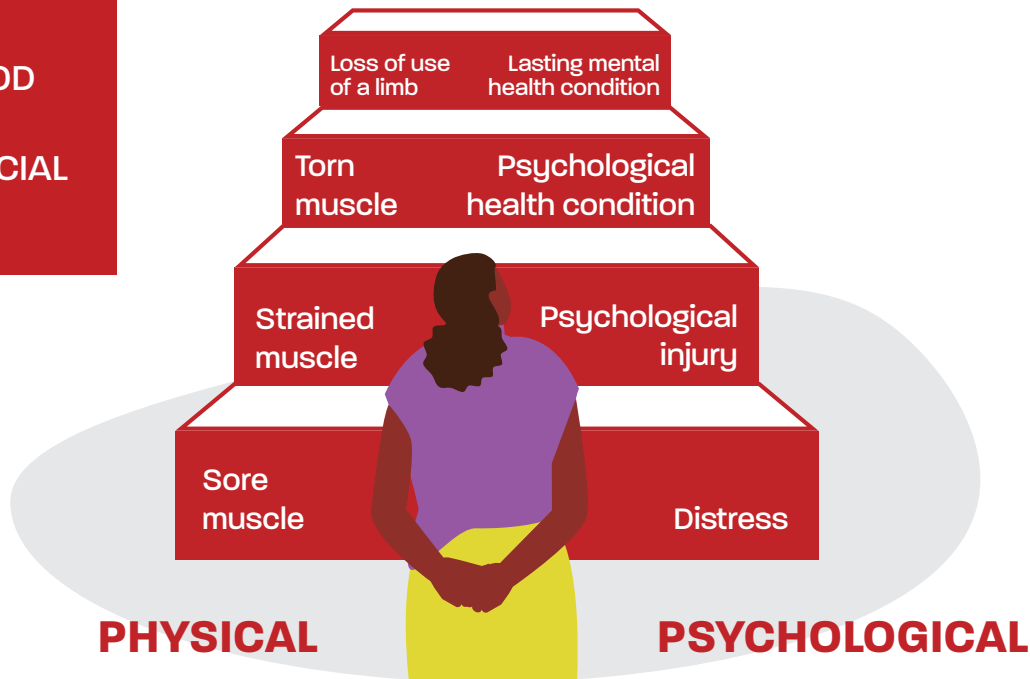
WHY ARE PHYSICAL INJURIES BETTER UNDERSTOOD THAN PSYCHOSOCIAL INJURIES?

Our society's stigma towards mental health prevents effective intervention of psychosocial hazards. Mental illness is stigmatized and misconceived as an individual's burden and vulnerability rather than a factor of their work environment, where we spend the majority of our lives.

If workers are unaware or ashamed of how their symptoms are associated to workplace factors, they're less likely to report them.

Physical symptoms are often considered more “valid”. We have drawn a comparison to show how they relate and can intensify equally if not controlled.

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WHERE CAN WORKPLACE PARTIES LEARN MORE ABOUT PSYCHOSOCIAL HAZARDS?

Read the [Mental Injury Toolkit](#) and the shorter Mini-MIT [here](#) to learn about how to identify, assess, and control psychosocial hazards.

Get training: [The Workers Health and Safety Centre](#) offers a three-hour program on Psychosocial Hazards and Workplace Mental Health for all workplace parties. It includes tools such as the OHCOW [StressAssess](#) tool and app to guide workers, employers and supervisors through the process of identifying, assessing, controlling, but also understanding, psychosocial hazards.

HOW ARE PSYCHOSOCIAL CONCERNS OFTEN INAPPROPRIATELY ADDRESSED?

Our health and safety system often approaches hazards inappropriately by focusing on an individual worker's behaviour, instead of focusing on the work and addressing, and ideally eliminating, the hazard. The approach is called behaviour-based safety and is generally condemned by the labour movement as it puts the onus on the worker when it should be with the employer by law. In the context of psychosocial hazards, behaviour-based safety practices show up in wellness or "resilience" programs, or by diverting occupational concerns and their solutions to individual accommodations. Any program that seeks to shift the responsibility onto the worker themselves is considered part of a behaviour-based safety approach. The correct and effective method is a hazard-based approach where employers, with assistance from the joint committee, identifies the root causes of the hazards, and controls them through isolation, substitution or elimination.

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