WHITE PAPER

PROMOTING WORKPLACE WELL-BEING ACROSS EUROPE

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White Paper: Promoting Workplace Well-being Across Europe. Insights from Occupational Psychology Practitioners

Executive Summary

This white paper presents the findings of a multi-country qualitative project led by the Work and Organisation Standing Committee of the European Federation of Psychologists' Associations (EFPA). Drawing on interviews with occupational psychology (OP) practitioners in Portugal, the UK, Romania, Italy, Hungary, Germany, Croatia, and Spain, this research explores:

- What constitutes good practice in promoting workplace well-being?
- The key challenges occupational psychologists face in implementing well-being strategies.
- The role of organisational and national policies in shaping these efforts.
- How equality, diversity, and inclusion (EDI) initiatives interact with well-being strategies?

Key Findings:

- **Leadership, literacy, and dialogue are critical enablers**: Effective well-being initiatives depend heavily on engaged leadership, mental health literacy, and open communication. As one participant from Portugal emphasized, “It is important to talk with every level of the organisation in order to reduce the stigma and increase the literacy in mental health.” Similarly, a psychologist from the UK noted: “I've just been asked to write a chapter looking at how risk assessments and risk management work in policing as a way of informing and educating senior management in what is required.” Another participant from Romania stressed the importance of evidence- based webinars for raising awareness on key well-being issues.

  Leaders play a particularly pivotal role. As another Portuguese participant explained, “A lot of work has been done with leaders, as they are the factor with the greatest impact—and the possible obstacle—to the well-being of employees. The role of the leader itself is a risk factor for the mental health of leaders, reiterating the importance of being responsible and promoting mental health in organisations.”

- **Occupational psychologists are valued, but underutilised**: While often trusted advisors, OPs face professional boundaries, a lack of visibility, and limited integration in organisational systems. One German consultant shared, “You as a psychologist are our trusted advisor,” highlighting the value placed on their role. However, a UK participant observed, "Occupational psychology is less established… people would look to HR… but not know the difference between occupational and clinical and counselling psychology.” Similarly, one German consultant highlighted, “Hardly any permanently employed occupational psychologists in companies. E.g, much better solution in Austria (occupational psychologists have a similar standing to occupational physicians). If this is bought in as an external service provider”.

- **Policy gaps and inconsistent implementation persist**: Many policies exist in name but are inconsistently enacted, especially in smaller organisations and public sector institutions. A Romanian practitioner commented, "The absence of legislation regulating mandatory well-being policies at the organisational level represents a significant barrier." A Spanish participant similarly noted, "Legislation only focuses on the prevention of illnesses and not on the promotion of well-being."

- **EDI and well-being integration is emerging but uneven**: While some organisations link EDI and well-being successfully, others treat them as siloed issues. In Hungary, one participant stated, "Another problem is that the inclusion of people with disabilities is still not sufficiently implemented." From Croatia, one person highlighted “the principles of equality should be incorporated into all human resources procedures (e.g., Equal Pay Champion – equality in reward system as a criterion for company excellence)”**.** From the UK, a view emphasized the complexity of EDI, noting, "People that are passionate about EDI or specific issues are not necessarily wanting to be seen as mental health or well-being advocates either."

Recommendations include enhancing interdisciplinary collaboration, updating legislative frameworks, investing in mental health infrastructure, improving policy enforcement, and raising the professional standing of occupational psychologists.

Introduction

Workplace well-being has become a cornerstone of organizational and national agendas across Europe, driven by heightened awareness of mental health challenges, evolving models of work, and the long-term societal effects of the COVID-19 pandemic. As workplaces transition to hybrid or remote modalities, the psychosocial demands on employees have increased, amplifying stress, burnout, and isolation (EU-OSHA, 2021).

Occupational psychologists are at the forefront of this transformation, bringing empirically grounded interventions to address stress, leadership behaviour, and systemic dysfunctions.

An occupational psychologist could play a crucial role in identifying, assessing, and managing psychosocial risks in the workplace, which are aspects of work design, organisation, and management that can potentially cause psychological or social harm to workers. These risks can negatively impact mental health, well-being, and overall job satisfaction, potentially leading to stress, burnout, or other health problems (Leka & Jain, 2025). Examples of psychosocial risks include: work-related stress and high job demands; lack of control or autonomy over work tasks; poor support from colleagues or supervisors; conflict and poor relationships at work; bullying, harassment, or discrimination; job insecurity and uncertainty. Key research has emphasized the importance of psychosocial risk management, noting that organizational factors such as workload, autonomy, and social support are primary predictors of mental health outcomes at work (Houdmont & Leka, 2010; Sparks et al., 2001). Moreover, Karasek's Job Demand-Control-Support model (Johnson & Hall, 1988) and the Effort–Reward Imbalance model (Siegrist, 2016) provide foundational insights into how organizational structures can foster or hinder well-being. Expanding on this, the Job Demands–Resources (JD-R) theory developed by Bakker and collaborators (Bakker & Demerouti, 2007, 2017) provides a flexible framework for analyzing employee well-being across occupational sectors. The theory categorizes working conditions into two broad dimensions: job demands (e.g., high workload, emotional strain), which are primarily associated with exhaustion, and job resources (e.g., autonomy, feedback, support), whose absence contributes to disengagement. This dual-path model has proven valuable in explaining both burnout and work engagement and offers practical avenues for targeted organizational interventions.

Additionally, the HERO model (Healthy and Resilient Organization), developed by Salanova and colleagues (2012), offers a comprehensive framework for promoting well-being at the organizational level. It integrates Healthy Organizational Resources and Practices (HORP), the development of healthy and engaged employees and teams, and the achievement of positive organizational outcomes, such as improved performance and customer satisfaction. Central to the model is the emphasis on psychological capital, job resources, and positive organizational practices as key drivers of resilience and sustainability—particularly during periods of crisis or change.

Taken together, the JD-R and HERO models highlight the importance of systemic approaches to occupational health, urging a shift beyond individual-level interventions to address the structural, relational, and cultural dimensions of the workplace.

The European Union and the Council of Europe have introduced a suite of policy instruments underscoring the importance of workplace mental health. The European Pillar of Social Rights includes principles explicitly supporting secure and adaptable employment and the right to a healthy, safe, and well-adapted work environment. Furthermore, EU Strategic Framework on Health and Safety at Work (2021–2027) (EUROPEAN COMMISSION, 2021) explicitly outlines psychosocial risks, digital transitions, and occupational mental health as areas for action.

Complementing these is the International Labour Organization's (ILO) Convention No. 190 on Violence and Harassment (ILO, 2019)—ratified by many EU states—which directly addresses violence, aggression, and psychological harm in the workplace. This convention establishes that every worker has the right to a world of work free from violence and harassment, including gender-based and psychological aggression. Occupational psychologists, often tasked with workplace risk assessments and culture evaluations, play a central role in translating these conventions into practice through interventions, training, and systems redesign.

EDI efforts are becoming increasingly entwined with workplace well-being initiatives. Research from Dhanani et al. (2018) and Nishii (2013) demonstrates how inclusive environments and psychological safety are linked to employee engagement, lower turnover, and improved mental health outcomes. Psychosocial stressors, such as microaggressions, identity invisibility, and discrimination, disproportionately affect marginalized employees. European guidelines, such as the EU Anti-racism Action Plan (2020–2025), encourage organizations to create inclusive cultures that enhance mental health outcomes for all. Moreover, Eurofound's report Keeping older workers in the labour force (2025) shows that, despite rising employment among those aged 55+, significant inequalities remain. Older women face poorer job conditions and higher part-time rates (33% vs. 8.5% in men), and long-term unemployment is 13.5 percentage points higher than for mid-career workers. These findings highlight the need for EDI and well-being policies that address age, gender, and socioeconomic inequality.

Occupational psychologists are uniquely positioned to ensure that well-being interventions are equitable. Through inclusive assessment practices and culturally competent interventions, practitioners can help dismantle structural inequities and advocate for fair policies. Thus, occupational psychologists act as a bridge between organizational needs and individual well-being, proactively managing psychosocial risks to promote a safe, healthy, and productive work environment. This white paper aims to consolidate European insights into how occupational psychologists are contributing to well-being promotion, the systemic and cultural barriers they face, and the role of EDI in shaping these outcomes.

Methodology

The research is based on 23 in-depth, semi-structured interviews conducted with experienced occupational psychology practitioners across eight European countries.

Participants were selected for their seniority and strategic involvement in workplace well- being programs. The interviews explored national- and organisational-level practices, barriers, and emerging trends. A thematic analysis was conducted to identify commonalities and divergences across countries and contexts.

Results Good Practices in Promoting Well-being

Key themes identified include:

Raising Mental Health Literacy:

Awareness campaigns, educational webinars, and the integration of well-being into leadership training were widely cited as effective strategies for improving mental health literacy. However, several participants raised concerns about the superficiality and limited impact of one-off interventions, stressing the need for sustained and systemic efforts. A practitioner in Portugal emphasized, “It is important to talk with every level of the organisation in order to reduce the stigma and increase the literacy in mental health.” Similarly, a Romanian respondent described the value of “evidence-based webinars for raising awareness on key well-being issues.” An Italian interviewee reinforced this point, stating that “training has been a fundamental element that has brought awareness,” and revealing that “much suffering in companies, due to the lack of awareness, was also kept silent.”

Another Italian contributor stressed the need for a structured approach: “It is fundamental to start from an organizational perspective, then empower groups, and only at the end work with individuals. Mental health literacy must follow this systemic logic, not the other way around.” In line with this broader view, a psychologist from the UK shared: “I've just been asked to write a chapter looking at how risk assessments and risk management work in policing as a way of informing and educating senior management in what is required.” *Psychosocial Risk Assessments*

Psychosocial risk assessments and structured monitoring mechanisms are widely viewed as foundational tools for promoting workplace well-being, although legal obligations and implementation vary significantly across countries. A Croatian interviewee described the proactive role of Employee Representatives who “continuously monitor the (dis)satisfaction of employees, report it directly to the company's management, and launch new initiatives to increase the well-being of employees.” Similarly, a Portuguese participant stressed that “any strategy aimed at well-being has to start with measurement (...). In other words, for example, a psychosocial risk assessment, in which we involve as many employees as possible.”

An Italian professional echoed this emphasis on measurement, highlighting the value of “systematic and periodic monitoring,” which extends beyond traditional welfare programs to include “the needs of workers.” In Germany, such assessments are legally mandated, whereas in the UK, a respondent observed a gap in awareness: “There’s a lack of awareness of the psychological elements… the need to do a psychosocial risk assessment.”

Several Italian participants also reflected on their national context. As one noted, “In Italy, the normative DLgs 81/08 requires risk assessments, but few organizations are aware of the strategic value of this legal obligation. When done properly, it can guide business strategies to support well-being and performance.” Another contribution added, “Some organizations use legal compliance as an

opportunity to base well-being promotion interventions on concrete data, through systematic surveys and focus groups." *Leadership Engagement*

Leaders were consistently identified as both critical enablers and potential barriers to workplace well-being, depending on their level of awareness, commitment, and engagement. An interviewee from Hungary remarked, "It is important for managers to be aware of the needs of their team and to support employees' personal and professional development through training, stress management programmes, and career development opportunities." Similarly, a participant from Spain advocated for embedding well-being into strategy, stating: "Implementing in the organizational strategies care leadership in order to impact in the departments and offices." From Portugal, another participant emphasized the dual role of leadership: "A lot of work has been done with leaders, as they are the factor with the greatest impact—and possible obstacle—to the well-being of employees. The role of leader itself is a risk factor for the mental health of leaders, reiterating the importance of being responsible and promoting mental health in organisations."

Interviews conducted in Italy further deepened this perspective. One expert observed, "Leadership awareness is crucial: often we are called from the bottom, but only when management understands that people's discomfort rebounds on profit, real change begins." Another Italian interviewee outlined a structured, systemic model: "It is important to start with organizational interventions, then with the empowerment of groups, and only at the end to intervene with individuals," clarifying that this is "a logical, not chronological model." This approach aligned with a case study where "the project aimed to build a culture of well- being... with focus groups involving top management to explain the concept of well-being and identify their needs across company divisions."

Trusted Advisor Role of Psychologists

Practitioners were seen as most effective when positioned as strategic partners rather than reactive crisis responders. A German consultant captured this sentiment, stating, "You as a psychologist are our trusted advisor," while a Hungarian practitioner added, "It is essential to have a psychologist available to whom employees can turn with confidence." However, in some contexts, the role of occupational psychologists remains poorly understood or undervalued. A UK participant observed, "Occupational psychology is less established… people would look to HR… but not know the difference between occupational, clinical, and counselling psychology." Similarly, another German consultant noted, "Hardly any permanently employed occupational psychologists in companies. E.g., a much better solution in Austria (occupational psychologists have a similar standing to occupational physicians). If this is bought in as an external service provider…"

In contrast, interviews in Italy highlighted the strategic positioning of workplace psychology professionals. One expert remarked, "One of the distinctive strengths of occupational psychologists is the ability to engage top management with both strategic insight and scientific tools. This enables them to become recognized consultants rather than emergency responders." Another professional emphasized their ability to "interact with the top management of organizations (HR, management directors, etc.)" in order to "develop intervention plans." This aligns with a broader view that "the role of WOP psychologists is to support different types of organizations in designing methodologically sound interventions, monitoring their progress..."

Holistic Programs

Successful well-being interventions were characterized by structured support systems, access to psychological counselling, flexible working policies, and recognition schemes.

These elements were widely seen as essential for promoting sustained employee well-being.

For example, a Croatian interviewee described an extensive Employee Assistance Program: “Free service for all the employees and members of their family... including clinical counselling, legal, financial, and health advice.” Another Croatian participant emphasized the impact of a multi-year, organization-wide Health and Wellbeing Program, noting its special focus on mental health as a key to its effectiveness.

In the UK, a participant highlighted the role of tailored support in leadership and inclusion: “We do a lot of training and development coaching. Supporting leaders to implement change and then also around return to work… and neurodivergent needs.” Italian interviews revealed further examples of impactful practices. One practitioner described a 12- month research-intervention project in a public organization to support post-pandemic transformation. The initiative involved “personalized coaching, group sessions, and systemic analysis—demonstrating how tailored, ongoing programs yield lasting well-being benefits.” Another echoed this approach, noting, “We created a research-intervention project... with actions tailored to individual needs, subgroups, and also offering personalized support options.” A complementary Italian perspective framed mental health and inclusion as inherently intertwined: “Ideally, it is about promoting mental health and inclusion as two sides of the same coin,” emphasizing the importance of “accepting that in the workplace there can be difficulties related to mental health and needs related to the diversity of people.” **Challenges in Provision**

Key challenges include:

Persistent Stigma and Low Literacy

Despite growing awareness and institutional efforts, stigma remains a significant barrier—particularly when it comes to seeking psychological support. A UK practitioner remarked, “There’s still that resistance… people will be frightened not to come to work because of the absence policy,” highlighting how structural factors can reinforce fear and discourage help-seeking. Similarly, a Portuguese interviewee observed, “I think there's still that resistance to seeing a psychologist; there's still that way of thinking about our profession,” pointing to lingering societal biases. Interviews in Italy revealed deeper cultural challenges around workplace well-being. One participant noted, “People still struggle to see psychological well-being as something that concerns them directly: there is often a lack of a prevention-oriented culture and limited awareness about mental health, even though the pandemic has raised sensitivity to psychological distress.” Another emphasized the transformative power of awareness-raising: “Training has been a fundamental element that has brought awareness,” explaining that “much suffering in companies, due to the lack of awareness, was also kept silent.” These insights reflect a broader cultural critique: “There is still a cultural issue— as a country, we are good at responding to emergencies, but we struggle to plan for the short and long term. Promoting well-being as an investment requires a cultural shift.” Together, these perspectives suggest that normalizing mental health conversations and embedding psychological well-being in long-term planning remain critical priorities.

Lack of Leadership Buy-in

Senior managers often lack awareness or prioritisation of well-being. One interviewee from Hungary observed, "In addition, the lack of management support is a significant barrier. Many managers do not recognise the importance of well-being at work or do not consider it a strategic priority." Similarly, a UK participant said, "There's a lack of recognition sometimes from senior leaders… just the open and honest dialogue and balance around what that means for their staff." Based on interviews conducted in Italy, one participant emphasized that "the main obstacle is the desire to maintain the status quo, especially in large companies: management often adopts a conservative stance and resists cultural and strategic change." Another interviewee pointed out that "often, the leadership awareness comes after a dispute or complaint, and often we are called in from below, by the workers. However, if we want to promote well-being, the involvement of management is necessary."

Fragmentation and Underfunding

Many organisations have limited budgets, disconnected data systems, and fragmented interventions. A UK participant explained, "Organisations struggle to identify and give access to data… with all the apps, absence management systems – we have completely disconnected data." A Romanian respondent noted, "Limited budgets and lack of knowledge at the

decision-making level" were major obstacles. Based on interviews conducted in Italy, a systemic gap exists in the country's approach to mental health, where crisis response often takes precedence over proactive planning, and where efforts to integrate individual and organizational strategies remain fragmented, preventing meaningful, long-term changes. Indeed, one participant noted that "there are many resources for responding to crises, but far less ability to plan in the short and long term; investment usually happens only when problems become acute, while preventive action is often overlooked." Another highlighted the ongoing divide between organizational and individual interventions, explaining that "it will therefore be difficult to convey a unitary vision of mental health by bringing together all levels: individual, group, organization and then prevention, primary, secondary and tertiary." Additionally, one interviewee observed that "companies often start with micro-level interventions like individual support or training, which are less disruptive and more reassuring, but they avoid deeper organizational changes that would require real investment." *Sectoral Differences*

Public and small private sector organisations often lag behind large or multinational firms. Interviews conducted in Italy reveal a significant gap between large corporations and small to medium-sized enterprises in addressing workplace well-being. While larger companies demonstrate some openness and a foundational awareness of the issue, smaller firms struggle due to a lack of knowledge and infrastructure. One interviewee indeed noted that "small and medium-sized enterprises are at least ten years behind large companies in addressing workplace well-being—not out of resistance, but due to a lack of awareness and infrastructure to access and apply resources." In Portugal, despite progressive legislation, implementation often remains inconsistent—particularly in the public sector where structural and budgetary constraints are more pronounced. Germany, on the other hand, demonstrates innovative practices, especially among large companies with integrated psychosocial risk assessment processes and cross-disciplinary collaboration. Meanwhile, in Hungary and Romania, smaller private firms were reported to be more agile and responsive than public institutions, although overall investment in well-being remains limited across the board.

Low Standing of Occupational Psychology

A lack of recognition and professional visibility hampers systemic influence. A German participant shared, "Hardly any permanently employed occupational psychologists in companies… better solution in Austria where occupational psychologists have a similar standing to occupational physicians." Another interviewee from the UK stated, "Occupational psychology is less established… people would look to HR… but not know the difference between occupational, clinical, and counselling psychology." Similarly in Italy, where there is still an ongoing struggle to clarify and validate the specific role of work and organizational psychologists, whose expertise is often misunderstood or overshadowed by the clinical image of the profession. As one Italian interviewee noted, "A major challenge is helping others understand the distinct role of work and organizational psychologists, who are still often confused with clinical professionals, and whose preventive and strategic approach remains undervalued."

Policy Implementation and Gaps

Although many countries have formal guidelines or legal requirements, implementation is often uneven.

Key issues include:

Mismatch Between Law and Practice

Formal policies may exist, but their impact is often limited by a lack of practical enforcement or cultural readiness. In Italy, the challenge is not the regulation itself, but the fact that compliance alone is insufficient. There is a tendency to fulfill legal obligations in a formalistic manner, without engaging with their underlying purpose. As one interviewee observed, "The legislation contains significant potential for promoting well-being, but in practice, it is often treated as a mandatory cost rather than a strategic opportunity to align HR and HSE interventions." In Spain, legislation is typically oriented towards illness prevention, with limited provisions for the proactive promotion of mental health. In Romania, while welfare policies are well articulated on paper, the financial and managerial support required for effective implementation is frequently lacking. This results in a substantial gap between policy intentions and workplace realities. A Portuguese participant reflected similarly: "Despite the fact that it is laid down very well in the legislation, there is a very big gap between what is recommended and what is done." A UK practitioner also highlighted the limitations of rigid policy frameworks: "Rigid policies are in place… they are very well adhered to, but that also has challenges… for somebody with fluctuating needs… that's a real challenge."

Together, these insights illustrate that the presence of formal policy is not sufficient. Without practical enforcement, managerial engagement, adequate resources, and a supportive organizational culture, policies risk becoming symbolic rather than transformational tools for well-being.

Overreliance on Box-Ticking Compliance

Some organisations follow formal rules and policies without a clear understanding of their underlying purpose or potential impact. As one UK participant noted, "In some cases, policies are adhered to by the letter and that can be a challenge. In other places… they're not put into practice." Another practitioner added, "The management standards… they might do them if they think they're going to be sued," suggesting that compliance is sometimes driven more by fear of liability than by a genuine commitment to employee well-being. Interviews conducted in Italy further highlighted this tension between bureaucratic compliance and authentic engagement. Although regulations are in place, they are often approached as a mere formality, rather than as opportunities for meaningful organisational development. One interviewee observed, "Many organizations just want to avoid trouble—they

approach psychosocial risk assessments with a confirmation bias, hoping to 'find nothing to fix,' rather than as a tool for improvement." These accounts point to a critical gap between policy compliance and purposeful implementation, underscoring the need to shift from rule- following for its own sake to a culture that values continuous learning and proactive well- being promotion.

Lack of Integration Across Stakeholders

Successful implementation often requires buy-in from HR, legal, health and safety, and line management, which is rarely coordinated. One UK respondent explained, "We're not quite there in terms of making that clear… whose responsibility is it… it needs to be a shared responsibility across different stakeholders." A German participant added, "There's a lack of coherent guidance available for employers really on that…"Successful implementation often requires buy-in from HR, legal, health and safety, and line management—which is rarely coordinated. A recurring issue highlighted in the interviews conducted in Italy is the lack of coordination between key departments such as HR and HSE, which undermines the potential for integrated and effective action on workplace wellbeing. As one Italian interviewee explained, "Coordination between HSE and HR must be a top-level strategic goal—without that, integration is unlikely to happen."

EDI and Well-being Intersections

Interviewees noted that while EDI principles and well-being goals are often aligned in theory, they are not always integrated in practice. Key points include:

EDI as a Catalyst and a Challenge

When designed and implemented effectively, Equity, Diversity, and Inclusion (EDI) initiatives—such as those focused on neurodivergence or gender equity—can foster inclusive environments that support mental health. However, when poorly executed, such efforts risk generating resistance, being perceived as tokenistic, or becoming disconnected from broader well-being goals.

Interviews conducted in Italy strongly underscored the essential link between mental health and inclusion, emphasizing that both should be viewed as integral components of workplace well-being. One interviewee put it succinctly: "Promoting mental health and inclusion should be seen as two sides of the same coin—both require recognizing that mental health struggles and diversity-related needs are normal and present in every workplace." Another participant reinforced this, stating, "The challenge is not integrating well-being and EDI—they are not in conflict. The difficulty lies in systematizing them. It should not be done just for the benefit, but because it is the right thing to do."

In Hungary, EDI initiatives are still in their early stages, with limited support for the inclusion of people with disabilities or minority groups. As one participant shared, "Another problem is that the inclusion of people with disabilities is still not sufficiently implemented." In contrast, the UK has developed more structured and mature approaches, particularly in relation to neurodivergent conditions. However, practitioners noted that these efforts can become generic or superficial when not meaningfully connected to overarching well-being strategies. As one UK practitioner reflected, "People that are passionate about EDI or specific issues are not necessarily wanting to be seen as mental health or well-being advocates either."

These perspectives point to the importance of a holistic and integrated approach, where EDI and mental health are not treated as separate initiatives, but as mutually reinforcing pillars of a healthy and inclusive work environment.

Lack of Literacy in Diversity Issues

Particularly in the areas of neurodiversity and minority integration, persistent knowledge gaps continue to hinder meaningful progress. As a Croatian interviewee observed, “Even well-meaning initiatives can go wrong without a deep understanding of minority- specific stressors and cultural nuance.” Similarly, a Romanian participant remarked, “Managers often confuse EDI with legal compliance only—they do not consider the impact on psychological safety or team dynamics.”

Interviews conducted in Italy further highlighted a fragmented approach to workplace well-being, where equity, diversity, and inclusion (EDI) and mental health are frequently addressed in isolation. These efforts tend to focus on narrowly defined groups, missing opportunities to design integrated, organisation-wide strategies. One Italian interviewee explained, “I treat EDI and mental health with interventions aimed at a small portion of people with specific needs, neglecting the opportunity to link them to a broader and more comprehensive well-being intervention.”

Another Italian practitioner pointed to a limited recognition of workforce diversity, stating, “There is still a lack of awareness that we have a multi-ethnic workforce. While multinational companies are ahead, public institutions are only beginning to address challenges like intergenerational diversity.”

These insights reflect the need for deeper understanding, cross-cutting approaches, and strategic alignment of EDI and mental health efforts—moving beyond compliance to foster inclusive, psychologically safe, and resilient workplaces.

Fragmentation of Initiatives

Diversity, well-being, and other programs often operate in silos rather than through an integrated approach. One UK participant commented, "HR runs EDI, but well-being sits with Occupational Health—there’s little cross-talk between them." Similarly, a Spanish practitioner added, "We see isolated efforts. There’s no unifying vision or joined-up thinking." Diversity, well-being, and other programs often operate in silos rather than through an integrated approach. Also interviews conducted in Italy highlight a common challenge: the tendency to address well-being and EDI as separate, isolated efforts rather than as part of a cohesive organizational strategy. As one Italian interviewee observed, “One major issue is that well-being and EDI are often addressed separately. Organizations tend to treat them as isolated interventions, missing the opportunity to integrate them into a broader and unified strategy.”

Future Trends and Recommendations Key opportunities and recommendations include:

- Integrate EDI and Well-being Strategies: Establish frameworks that connect inclusive practices with well-being outcomes. A UK participant suggested, "Bringing together the different parts of the organisation to look at wellbeing and inclusion jointly will really help drive long-term change." Interviews conducted in Italy emphasized the need to move beyond fragmented approaches and toward a unified vision that integrates mental health, EDI, and organizational well-being into a cohesive strategy. As one Italian interviewee noted, “Too often, EDI and mental health are seen as separate efforts focused on small groups with specific needs—what’s missing is the opportunity to embed both into a broader, organization-wide well-being strategy.” Another added, “The challenge is not integrating well-being and EDI—they are not in conflict. The difficulty lies in systematizing them. It should not be done for the sake of benefit, but because it is the right thing to do,” while a third highlighted that “ideally, it is about promoting mental health and inclusion as two sides of the same coin.”

- Promote Interdisciplinary Collaboration: Encourage joint work between psychologists, HR professionals, health experts, and leaders. One German interviewee emphasised, "We need to work as teams—HR alone cannot do this, nor can psychologists without the backing of leaders." Interviews conducted in Italy underscore the strategic role that occupational psychologists can play in fostering organizational and social sustainability by bridging gaps between legal, HR, and productivity domains. Indeed one Italian interviewee explained, “Occupational psychologists should act as bridges—connecting legal, HR, and productivity concerns within a logic of organizational and social sustainability.” Another emphasized the importance of interdisciplinary collaboration, noting that “we work alongside labor law experts, and the recognition of companies also comes through non- financial incentives. Collaboration across disciplines is essential to build sustainable well- being strategies.”

- Invest in Evaluation: Require measurement of outcomes from interventions to ensure effectiveness. A Croatian practitioner commented, "We are good at running programs but poor at evaluating what actually works—we need stronger feedback loops." Italian interviews highlight the need to move beyond isolated programs toward structured, evidence- based approaches that embed evaluation throughout the entire process of promoting workplace well-being. As one Italian interviewee noted, “We must go beyond running programs—we need structured, evidence-based evaluation frameworks to understand what works and how to adjust over time.” Another added, “Good practices concern everything that goes beyond the minimum legal compliance. For example, some organizations use legal compliance as an opportunity to base well-being promotion interventions on concrete data, through systematic surveys and focus groups.”

- Elevate the Role of Occupational Psychology: Advocate for certification, formal inclusion in legislation, and greater visibility. Interviews conducted in Italy highlight the crucial role of psychologists in shaping workplace well-being at both organizational and policy levels. One interviewee stressed the need for greater presence in decision-making, stating that "we need more psychologists in decision-making positions, both within organizations and at policy levels, to ensure workplace well-being becomes part of strategic planning." Another emphasized that "occupational psychologists should become experts in organizational dynamics, understanding the logic of different departments to be recognized as strategic consultants." Additionally, participants recommended enhancing psychologists' skills in "organizational analysis and evidence-based design, while integrating technological changes." A respondent from Romania

noted, "There should be more formal recognition and clearer legal frameworks for the role of occupational psychologists in organisations."

- Tailor Solutions Across Contexts: Consider sectoral, cultural, and organisational specificities in designing interventions. For example, in smaller economies like Croatia and Hungary, tailored approaches may need to emphasise cost-effective solutions and leverage community-based networks, whereas in larger economies like Germany or the UK, scalable programs supported by robust data infrastructure and interdisciplinary collaboration are more feasible. Interviews conducted in Italy emphasize the critical need to adapt well- being strategies to the context of small and medium enterprises, which make up the vast majority of the national business landscape but often lack the resources for structured initiatives. As one Italian interviewee explained, “Small enterprises represent 80% of the Italian business fabric, yet they often lack the capacity to implement structured well-being initiatives—this calls for scalable, consortium-based service models.” Another noted, “Small and medium enterprises are about ten years behind large companies on these issues. They need tailored service models, possibly through consortia, to ensure economic sustainability.” Furthermore, sector-specific nuances—such as the rigidity of the public sector in Portugal or the agility of SMEs in Romania—underscore the importance of flexible, context-sensitive planning.

- Address Moral and Ethical Tensions: Acknowledge the emotional toll and moral injury risks for psychologists when systems are not ready to act on their recommendations. As one Italian interviewee noted, “Occupational psychologists face ethical dilemmas when their insights are ignored; it’s crucial they develop strategic awareness and organizational literacy to be truly impactful.” Another added, “Sometimes we are called in after a crisis or a complaint. If we want to promote well-being, we must act earlier, even when the organization is not yet ready to listen.” This reveals the complex ethical and strategic challenges faced by occupational psychologists, particularly when their expertise is overlooked or brought in too late to be preventive. One UK practitioner remarked, "You can feel like you're putting people back into systems that are broken—it creates a sense of helplessness."

Conclusion

This white paper underscores the complexity and urgency of advancing workplace well-being across Europe. The findings reveal that although occupational psychologists are viewed as trusted advisors, they remain underutilized, often operating on the periphery of policy and decision-making frameworks. Systemic constraints—such as limited recognition of psychosocial risks, insufficient enforcement of legislative mandates, and the siloing of EDI initiatives—continue to undermine holistic well-being efforts.

Academic literature highlights that sustainable well-being strategies must go beyond reactive support systems and embrace organizational-level interventions, including leadership development, job redesign, and inclusive policy making (LaMontagne et al., 2014; Nielsen & Noblet, 2018). Evidence shows that workplace cultures that support psychological safety and voice not only protect mental health but also enhance innovation and collaboration (Edmondson, 1999).

Incorporating EDI into well-being initiatives is not merely aspirational but grounded in empirical research. For instance, Cortina et al. (2013) introduced the concept of "selective incivility," highlighting how subtle forms of discrimination, such as incivility, disproportionately affect marginalized employees, leading to negative outcomes like increased turnover intentions and decreased job satisfaction. This underscores the importance of fostering an inclusive environment to support mental health. Similarly, Plaut et al. (2009) discussed how diversity approaches in organizations can influence feelings of inclusion and engagement among employees, particularly those from underrepresented groups. Their research suggests that when organizations acknowledge and value diverse identities, it can enhance psychological safety and overall well-being.

To capitalize on these findings, European institutions and employers must:

- Elevate the status of occupational psychology through formal accreditation and legal mandates
- Move from policy rhetoric to coordinated implementation
- Build bridges between EDI, mental health, and organizational strategy Ultimately, the future of workplace well-being in Europe hinges on a paradigm shift: from individualized stress management to systemic transformation. Occupational psychologists are uniquely positioned to guide this transition—provided they are empowered, integrated, and heard.

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