UNIVERSIDAD DE OVIEDO



DOCTORADO DE PSICOLOGÍA

Influence of the Corporate Social Responsibility initiatives on the psychosocial well-being of workers

La influencia de las iniciativas de Responsabilidad Social Corporativa en el bienestar psicosocial de los trabajadores

By

DANIEL MARI RIPA

UNIVERSIDAD DE OVIEDO



DOCTORADO DE PSICOLOGÍA

Influence of the Corporate Social Responsibility initiatives on the psychosocial well-being of workers

La influencia de las iniciativas de Responsabilidad Social Corporativa en el bienestar psicosocial de los trabajadores

Director: Dr. JUAN HERRERO OLAIZOLA

Doctorando: DANIEL MARI RIPA

University of Oviedo

Asturias, 2015



1.- Título de la Tesis

Vicerrectorado de Internacionalización y Postgrado

Universidad de Oviedo

Órgano responsable: Departamento de Psicología



RESUMEN DEL CONTENIDO DE TESIS DOCTORAL

Español/Otro Idioma: La influencia de las	Inglés: Influence of the Corporate Social
iniciativas de Responsabilidad Social	Responsibility initiatives on the psychosocial
Corporativa en el bienestar psicosocial de los	well-being of workers
trabajadores	
2 Autor	
Nombre: Daniel Mari Ripa	
·	
Programa de Doctorado: Psicología	

RESUMEN (en español) (4000 caracteres)

La presente Tesis Doctoral analiza la influencia de las iniciativas de la Responsabilidad Social Corporativa (RSC) de las empresas en la salud, seguridad y bienestar de los trabajadores. Para ello, se utiliza una orientación multimétodo, que incluye análisis cualitativos y cuantitativos así como diversas fuentes de datos. En primer lugar, se examina el grado en que 27 estándares de evaluación de RSC cubren las condiciones laborales, a través de una extensa revisión, y qué áreas reciben una mayor atención. Se ha efectuado un análisis temático con el objeto de configurar un marco de evaluación que cubra las condiciones laborales, las cuales se han comparado con los estándares más relevantes de la Organización Internacional del Trabajo (OIT). Este marco de evaluación se aplicó posteriormente a los informes de RSC de 100 compañías del Global Financial Times 500 (FT500) para analizar el grado en que las compañías gestionan y mejoran las condiciones de trabajo (incluyendo la salud, la seguridad, y el bienestar) como parte de sus actividades de RSC. En segundo lugar, la presente investigación explora el papel de la RSC en la motivación para implementar políticas de Seguridad y Salud en el Trabajo (SST) y gestión de los riesgos psicosociales en las compañías europeas. En ese sentido, se ha analizado la influencia de las exigencias o preocupación de los clientes sobre la reputación de la empresa con respecto a la implementación de 12 políticas de Seguridad y Salud en el Trabajo (SST) y de gestión de los riesgos psicosociales en la empresa. La muestra la constituyeron 28.649 entrevistas con gestores de SSO de empresas de 31 países europeos (Encuesta ESENER). En tercer lugar, la presente investigación analiza el impacto de los riesgos psicosociales laborales más prominentes en la salud de los trabajadores, teniendo en cuenta sus características individuales y las del país en el que trabajan. Para ello, se utiliza una base de datos amplia realizada con 14.876 empleados de 22 países europeos (European Social Survey).

Los resultados del primer estudio permitieron desarrollar un marco de evaluación que incluyó seis áreas temáticas: condiciones de empleo, formación, ejecución y comunicación, relaciones industriales, diversidad y discriminación, salud y seguridad ocupacional, y derechos humanos, así como otras temáticas de segundo y tercer orden. Tras la aplicación de este marco de evaluación al análisis de la cobertura de las condiciones laborales en los informes de RSC, se encontró un elevado nivel de información en estos aspectos, con dos notables excepciones: relaciones industriales y derechos humanos. Se encontró una mayor presencia de la información recopilada sobre formación y desarrollo, clima organizacional y comunicación interna, prevención de SST y no discriminación y género. Las regiones de América y Europa y



Vicerrectorado de Internacionalización y Postgrado

ASTURIAS
CAMPUS DE EXCELENCIA
INTERNACIONAL
AD FUTURIUM

Universidad de Oviedo

las industrias con más riesgos tangibles mostraron una mejor ejecución. En el segundo estudio, se encontró que las exigencias de los clientes así como el interés por mejorar la reputación corporativa fueron potentes motivadores para implementar sistemas de gestión de SST y riesgos psicosociales. Por tanto, RSC puede conceptualizarse como una herramienta para promover una mejora de SST en el lugar de trabajo. La mayor probabilidad de implementar sistemas de gestión de SST y riesgos psicosociales se encontró en las empresas más grandes y en los países con una pertenencia a la Unión Europea previa al año 2004. También, la industria manufacturera y el sector de bienes fueron los que con mayor probabilidad incorporaban sistemas de gestión de SST mientras que las compañías de servicios tenían mayor probabilidad de realizar medidas relacionadas con los riesgos psicosociales. En el tercer estudio, los resultados mostraron que la mayoría de los peligros psicosociales estudiados tenían un impacto en la salud de los trabajadores, aunque hubiera una influencia del nivel de desarrollo humano en la relación entre algunos peligros (percepción de riesgo para salud en el trabajo y equilibrio entre vida y trabajo) y la salud de los trabajadores. De acuerdo con estos resultados, se puede concluir que los estándares de RSC y las iniciativas en el lugar de trabajo parecen cumplir con los derechos básicos laborales y de salud y seguridad. Debido a la ausencia de legislación nacional e internacional y a los desafíos inherentes en el desarrollo e implementación de una única orientación legal/regulatoria, esta investigación destaca que las iniciativas de RSC se pueden utilizar como una forma de mejorar las condiciones en el trabajo y reducir los peligros psicosociales si se complementan las regulaciones actuales. Los peligros asociados a la salud y seguridad en el trabajo aún provocan un impacto negativo en la salud del trabajador que puede ser contemplada por políticas sobre salud y seguridad globales. Estas políticas pueden ser implementadas de forma aún más rápida si las exigencias de los clientes y la voluntad de mejorar la imagen corporativa van en esa dirección, por una parte, e implementando estándares de RSC integradores que tengan en cuenta los peligros psicosociales. La investigación concluye con la propuesta de aspectos incluidos en los estándares de RSC que pueden ser utilizados para implementar intervenciones en el lugar de trabajo.

RESUMEN (en Inglés)

This doctoral research analyses the influence of Corporate Social Responsibility (CSR) initiatives undertaken by enterprises on the health, safety and well-being of workers. To do so, a multi-methods approach is used, including qualitative and quantitative analyses using multiple data sources. Firstly, it examines the coverage of working conditions in the main 28 CSR standards, identified through an extensive review, and which areas receive more emphasis. A thematic analysis is conducted in order to build an evaluation framework covering working conditions, which was compared to relevant ILO standards. This evaluation framework is then applied to the CSR reports from 100 FT500 Index companies to analyse the extent to which companies manage and improve working conditions (including health, safety and well-being) as part of their CSR activities. Secondly, this research explores the role of CSR drivers behind the implementation of Occupational Health and Safety (OHS) and psychosocial risk management policies in European companies. The influence of requirements from clients or concern about the organization's reputation on the implementation of twelve OHS and psychosocial risk management initiatives is analysed. The sample included 28.649 interviews with OHS managers of establishments in 31 European countries from the ESENER survey. Thirdly, this research analyses the impact of the most prominent psychosocial risks at work on workers' health, taking into account individual and country-level characteristics. It uses a large dataset



Vicerrectorado de Internacionalización y Postgrado

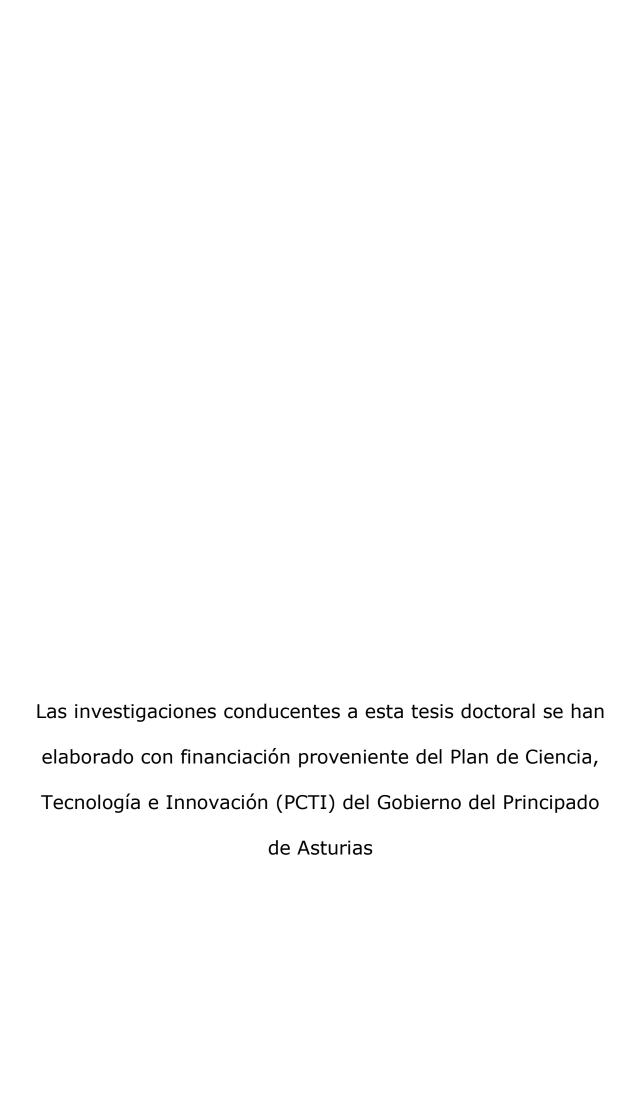
ASTURIAS
CAMPUS DE EXCELENCIA
INTERNACIONAL
AD EUTURIUM

Universidad de Oviedo

which contains interviews conducted with 14.876 employees from 22 European countries (European Social Survey).

Results from the first study allowed to develop an evaluation framework that included six themes: employment conditions; training, performance and communication; industrial relations; diversity and discrimination; occupational health and safety, and human rights, as well further second and third order themes. After applying this to the coverage of working conditions of CSR reports, it was found that overall reporting was high, although two notable exceptions were found (i.e., industrial relations and human rights). Higher reporting was found in training and development, organizational climate and internal communication, OHS prevention and nondiscrimination and gender. Americas and Europe regions and industries with more tangible risks showed a better performance. In the second study, it was found that client requirements as well as an interest in improving corporate reputation were powerful drivers for implementing OHS and psychosocial risk management systems. Therefore CSR may be thought also as a tool to promote a better performance in OHS at workplaces. Higher likelihood of implementing OHS and psychosocial risk management systems were found in largest establishments and pre-EU 2004 membership countries. Also, manufacturing and goods sector were more likely to implement OHS while service companies had an increased odds ratio for psychosocial risk management measures. In the third study, results show that most psychosocial hazards studied had an impact on workers' health, although there was an influence of the level of human development in the relation between two hazards studied (i.e., perception that health is at risk and work-life balance) and subjective health. On the basis of the findings from the reviews and studies carried out as part of this research, it can be concluded that CSR standards and initiatives at workplace seem to follow basic health and safety and labour rights. Due to the lack of international and national legislation and inherent challenges in the development and implementation of a solely legal/regulatory approach, this research highlights that CSR initiatives can be used as a way to improve working conditions and reduce psychosocial hazards by complementing existing regulatory approaches. OHS hazards still provoke negative impacts on workers' health and can be addressed by comprehensive health and safety policies. These policies can be accelerated by client requirements and a will to improve corporate image, as well as by implementation of comprehensive CSR standards considering psychosocial hazards. This research concludes by proposing issues included in CSR standards that can be used to implement workplace interventions.

SR. DIRECTOR DE DEPARTAMENTO DE PSICOLOGÍA SR. PRESIDENTE DE LA COMISIÓN ACADÉMICA DEL PROGRAMA DE DOCTORADO EN PSICOLOGÍA



ABSTRACT (English)

This doctoral research analyses the influence of Corporate Social Responsibility (CSR) initiatives undertaken by enterprises on the health, safety and well-being of workers. To do so, a multi-methods approach is used, including qualitative and quantitative analyses using multiple data sources. Firstly, it examines the coverage of working conditions in the main 28 CSR standards, identified through an extensive review, and which areas receive more emphasis. A thematic analysis is conducted in order to build an evaluation framework covering working conditions, which was compared to relevant ILO standards. This evaluation framework is then applied to the CSR reports from 100 FT500 Index companies to analyse the extent to which companies manage and improve working conditions (including health, safety and well-being) as part of their CSR activities. Secondly, this research explores the role of CSR drivers behind the implementation of Occupational Health and Safety (OHS) and psychosocial risk management policies in European companies. The influence of requirements from clients or concern about the organization's reputation on the implementation of twelve OHS and psychosocial risk management initiatives is analysed. The sample included 28.649 interviews with OHS managers of establishments in 31 European countries from the ESENER survey. Thirdly, this research analyses the impact of the most prominent psychosocial risks at work on workers' health, taking into account individual and country-level characteristics. It uses a large dataset which contains interviews conducted with 14.876 employees from 22 European countries (European Social Survey).

Results from the first study allowed to develop an evaluation framework that included six themes: employment conditions; training, performance and communication; industrial relations; diversity and discrimination; occupational health and safety, and human rights, as well further second and third order themes. After applying this to the coverage of working conditions of CSR reports, it was found that overall reporting was high, although two notable exceptions were found (i.e., industrial relations and human

rights). Higher reporting was found in training and development, organizational climate and internal communication, OHS prevention and non-discrimination and gender. Americas and Europe regions and industries with more tangible risks showed a better performance. In the second study, it was found that client requirements as well as an interest in improving corporate reputation were powerful drivers for implementing OHS and psychosocial risk management systems. Therefore CSR may be thought also as a tool to promote a better performance in OHS at workplaces. Higher likelihood of implementing OHS and psychosocial risk management systems were found in largest establishments and pre-EU 2004 membership countries. Also, manufacturing and goods sector were more likely to implement OHS while service companies had an increased odds ratio for psychosocial risk management measures. In the third study, results show that most psychosocial hazards studied had an impact on workers' health, although there was an influence of the level of human development in the relation between two hazards studied (i.e., perception that health is at risk and work-life balance) and subjective health. On the basis of the findings from the reviews and studies carried out as part of this research, it can be concluded that CSR standards and initiatives at workplace seem to follow basic health and safety and labour rights. Due to the lack of international and national legislation and inherent challenges in the development and implementation of a solely legal/regulatory approach, this research highlights that CSR initiatives can be used as a way to improve working conditions and reduce psychosocial hazards by complementing existing regulatory approaches. OHS hazards still provoke negative impacts on workers' health and can be addressed by comprehensive health and safety policies. These policies can be accelerated by client requirements and a will to improve corporate image, as well as by implementation of comprehensive CSR standards considering psychosocial hazards. This research concludes by proposing issues included in CSR standards that can be used to implement workplace interventions.

ABSTRACT (Spanish)

La presente Tesis Doctoral analiza la influencia de las iniciativas de la Responsabilidad Social Corporativa (RSC) de las empresas en la salud, seguridad y bienestar de los trabajadores. Para ello, se utiliza una orientación multimétodo, que incluye análisis cualitativos y cuantitativos así como diversas fuentes de datos. En primer lugar, se examina el grado en que 27 estándares de evaluación de RSC cubren las condiciones laborales, a través de una extensa revisión, y qué áreas reciben una mayor atención. Se ha efectuado un análisis temático con el objeto de configurar un marco de evaluación que cubra las condiciones laborales, las cuales se han comparado con los estándares más relevantes de la Organización Internacional del Trabajo (OIT). Este marco de evaluación se aplicó posteriormente a los informes de RSC de 100 compañías del Global Financial Times 500 (FT500) para analizar el grado en que las compañías gestionan y mejoran las condiciones de trabajo (incluyendo la salud, la seguridad, y el bienestar) como parte de sus actividades de RSC. En segundo lugar, la presente investigación explora el papel de la RSC en la motivación para implementar políticas de Salud y Seguridad en el Trabajo (SST) y gestión de los riesgos psicosociales en las compañías europeas. En ese sentido, se ha analizado la influencia de las exigencias o preocupación de los clientes sobre la reputación de la empresa con respecto a la implementación de 12 políticas de Salud y Seguridad en el Trabajo (SST) y de gestión de los riesgos psicosociales en la empresa. La muestra la constituyeron 28.649 entrevistas con gestores de SST de empresas de 31 países europeos (Encuesta ESENER). En tercer lugar, la presente investigación analiza el impacto de los riesgos psicosociales laborales más prominentes en la salud de los trabajadores, teniendo en cuenta sus características individuales y las del país en el que trabajan. Para ello, se utiliza una base de datos amplia realizada con 14.876 empleados de 22 países europeos (European Social Survey).

Los resultados del primer estudio permitieron desarrollar un marco de evaluación que incluyó seis áreas temáticas: condiciones de empleo, formación, ejecución y comunicación, relaciones industriales, diversidad y discriminación, salud y seguridad ocupacional, y derechos humanos, así como otras temáticas de segundo y tercer orden. Tras la aplicación de este marco de evaluación al análisis de la cobertura de las condiciones laborales en los informes de RSC, se encontró un elevado nivel de información en estos aspectos, con dos notables excepciones: relaciones industriales y derechos humanos. Se encontró una mayor presencia de la información recopilada sobre formación y desarrollo, clima organizacional y comunicación interna, prevención de SST y no discriminación y género. Las regiones de América y Europa y las industrias con más riesgos tangibles mostraron una mejor ejecución. En el segundo estudio, se encontró que las exigencias de los clientes así como el interés por mejorar la reputación corporativa fueron potentes motivadores para implementar sistemas de gestión de SST y riesgos psicosociales. Por tanto, RSC puede conceptualizarse como una herramienta para promover una mejora de SST en el lugar de trabajo. La mayor probabilidad de implementar sistemas de gestión de SST y riesgos psicosociales se encontró en las empresas más grandes y en los países con una pertenencia a la Unión Europea previa al año 2004. También, la industria manufacturera y el sector de bienes fueron los que con mayor probabilidad incorporaban sistemas de gestión de SST mientras que las compañías de servicios tenían mayor probabilidad de realizar medidas relacionadas con los riesgos psicosociales. En el tercer estudio, los resultados mostraron que la mayoría de los peligros psicosociales estudiados tenían un impacto en la salud de los trabajadores, aunque hubiera una influencia del nivel de desarrollo humano en la relación entre algunos peligros (percepción de riesgo para salud en el trabajo y equilibrio entre vida y trabajo) y la salud de los trabajadores. De acuerdo con estos resultados, se puede concluir que los estándares de RSC y las iniciativas en el lugar de trabajo parecen cumplir con los derechos básicos laborales y de salud y seguridad. Debido a la ausencia de legislación nacional e internacional y a los desafíos

inherentes en el desarrollo e implementación de una única orientación legal/regulatoria, esta investigación destaca que las iniciativas de RSC se pueden utilizar como una forma de mejorar las condiciones en el trabajo y reducir los peligros psicosociales si se complementan las regulaciones actuales. Los peligros asociados a la salud y seguridad en el trabajo aún provocan un impacto negativo en la salud del trabajador que puede ser contemplada por políticas sobre salud y seguridad globales. Estas políticas pueden ser implementadas de forma aún más rápida si las exigencias de los clientes y la voluntad de mejorar la imagen corporativa van en esa dirección, por una parte, e implementando estándares de RSC integradores que tengan en cuenta los peligros psicosociales. La investigación concluye con la propuesta de aspectos incluidos en los estándares de RSC que pueden ser utilizados para implementar intervenciones en el lugar de trabajo.

Abbreviations

CSR Corporate social responsibility

EC European Commission

EU European Union

Eurofound European Foundation for the Improvement of Living and Working

Conditions

EU-OSHA European Agency for Safety and Health at Work

FT 500 Global Financial Times 500

GRI Global Reporting Initiative

IFC International Finance Corporation

ILO International Labour Organization

ISO International Organization for Standardization

OECD Organization for Economic Co-operation and Development

OHS Occupational Health and Safety

UN United Nations

WBCSD World Business Council for Sustainable Development

WHO World Health Organization

Dedication

A todas las personas que durante el año 2011 acudieron a las plazas de países de medio mundo para recordarnos que la justicia y la dignidad es un bien por el que merece la pena luchar cada día de nuestras vidas.

Acknowledgments

A mis padres, María Victoria y Sinesio, y a mi tía, Victoria, por haberme apoyado siempre. A Raquel, por escucharme durante todos estos años de investigación y sueños. A Juan Herrero, porque sin él y sin su paciencia nunca habría llegado a ser investigador.

A Aditya Jain y Stavroula Leka, dos colegas y amigos, que hicieron de esta tesis lo que hoy es. Me entregaron una parte de su vida profesional y humana para ayudarme crecer como persona e investigador. A todo el equipo de Nottingham y en especial a Nicholas Andreou y Luis Torres, con quienes compartí esperanzas y proyectos en las estancias en su Universidad.

A Valentina Forastieri, por ser mi mentora en la Organización Internacional de Trabajo y enseñarme a pensar más allá de la academia. A todo el equipo de Safework y LABADMINSOHS de la OIT, y en especial a Javier, Francisco, Mari Luz, Pedro, Begoña, Tzevetomira y Victoria y a mis compañeros como intern, Nikhil, Patricia, Nyske y Somin. A David, Rubén y Rebeca, por acogerme y alojarme en Ginebra.

A Nele De Cuyper y Hans de Witte, por recordarme que nunca hay que rendirse, y por reconciliarme con la psicología del trabajo. A mis compañeros en Leuven, Patricia y Marcela. A Niki Harré por involucrarme en Auckland en el proyecto Western Springs. A mis colegas de Psicología Social en la Universidad de Oviedo. A Lorena, Ana, Jara y Tzvetomira por ayudarme en las revisiones de esta tesis, y a Xuacu y a Andrés Alfaro, por estar allí cuando más los necesitaba. A mis compañeros del 15M, del CSOA La Madreña, de Podemos, del Grupo Parlamentario, de la Asociación de estudiantes de Psicología y de las Asambleas de Estudiantes, porque juntos estos años construimos la utopía. A todo el equipo de la Federación de Jóvenes Investigadores, y en especial a

Javier y a Elena, por no dejar ni un solo día de defender la investigación. A los periodistas e investigadores valientes que alzan la voz contra las injusticias.

Y sobre todo, a mi abuela Inés, con quien me crié, y que fue ingresada y falleció mientras realizaba una de las estancias de investigación de esta tesis doctoral.

Table of Contents

	Abstractix
	Abbreviationsviix
	Dedicationix
	Acknowledgmentsx
	List of Tablesxix
	List of Figuresxx
PA	RT I: CONCEPTUAL ANALYSIS1
	INTRODUCTION
	1. CSR, PSYCHOSOCIAL HEALTH AND WELL-BEING
	1.1. A changing world of work13
	1.2. Working conditions and psychosocial work-environment as a way to promote well-being: scope and context
	1.3. Occupational Health and Safety and Psychosocial hazards and risks23
	1.3.1. Definition of psychosocial hazards and risks24
	1.4. CSR and Health and Safety at Work29
	1.4.1. What is CSR?29
	1.4.1.1.Definitions of CSR29
	1.4.1.2 Historical evolution, and current thinking, of CSR32
	1.4.2. Internal CSR and OHS perspectives37
	1.4.3. Challenge of defining CSR and the 'defining-by-instruments' way out43
	1.4.4. External pressures and corporate reputation as drivers of OHS and CSR46
	1.4.4.1.Sustainability and pressures from external stakeholders (e.g., consumers, NGOs, media)47
	1.4.4.2.Sustainable supply chain management and client requirements48
	1.4.4.3.Drivers for CSR49
	1.4.4.4.Health and safety sustainable policies54
	1.4.4.5. Sustainable and responsible policies pay off56

	1.4.5. Conclusion59
2.	FROM A GLOBAL CONCERN TO THE HUMAN DEVELOPMENT: PSYCHOSOCIAL WORK ENVIRONMENT
	2.1. Prevalence of work-related stress and psychosocial risks around the world.
	2.2. Economic impact68
	2.3. Human capabilities and development7
	2.3.1 The Capabilities Approach72
	2.3.2. Enhancing Capabilities: The Role of Organizations72
	2.3.3. Living a healthy life: Psychosocial hazards as conversion factors at work
	2.4. Workplace interventions to reduce psychosocial hazards and improve working conditions
3.	WORKING CONDITIONS AND HEALTH AND SAFETY: HARD AND SOFT POLICIES
	3.1. Introduction: Hard and soft policy79
	3.2.International legislation: ILO Conventions and Recommendations and El Directives and Agreements
	3.2.1. ILO Conventions and Recommendations83
	3.2.2. European legal framework: EU Directives84
	3.2.3. Occupational diseases: National and international legislation89
	3.3. Soft law: Social dialogue and collective agreements and CSR92
	3.4. Psychosocial risk management and policies98
	3.5. The need for a 'CSR inspired' approach to promote working conditions .100 $$
	3.6. Different contexts, different CSR priorities and working conditions needs
4.	DEVELOPMENT OF CSR: CSR STANDARDS AND PSYCHOSOCIAL RISKS 109
	4.1. Corporate Social Responsibility Instruments and Standards109
	4.1.1 Kind of CSR standards109
	4.1.2. Main CSR standards112
	4.2. Corporate Social Responsibility Standards: how psychosocial risk factors are covered
	4.2.1. Job Content
	4.2.2. Workload and work pace119
	4.2.3. Work Schedule
	4 2 4 Control 12 ^a

	4.2.5. Environment and Equipment	129
	4.2.6. Organizational culture and function	130
	4.2.7. Interpersonal relationships at work	134
	4.2.8. Role in organization	138
	4.2.9. Career development	140
	4.2.10. Home-work interface	144
PAR1	T II: EMPIRICAL RESEARCH	149
5	5. OBJECTIVES AND HYPOTHESIS	151
	5.1. Objectives	152
	5.1.1. General objective	151
	5.1.2. Specific objectives	151
	5.2. Hypotheses	152
	5.2.1. General Hypothesis	152
	5.2.2. Specific hypotheses	153
STUE	DY 1	155
	OY 1	S ARE COVERED IN
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS	S ARE COVERED IN
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS	S ARE COVERED IN 157
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS	5 ARE COVERED IN 157 157
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS	5 ARE COVERED IN 157 160
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS 6.1. Introduction	S ARE COVERED IN 157 160 160
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS	S ARE COVERED IN157157160160
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS 6.1. Introduction 6.2. Methods 6.2.1. Sample 6.2.2. Procedure 6.2.3. Variables	S ARE COVERED IN157160165
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS	S ARE COVERED IN157160165169
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS	S ARE COVERED IN 157 160 160 165 169
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS	S ARE COVERED IN
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS	S ARE COVERED IN
	6. CSR IN THE BUSINESS ARENA: HOW WORKING CONDITIONS 27 CSR STANDARDS AND IN 100 CSR REPORTS	S ARE COVERED IN

STUD	Y 2	. 209
7.	HOW CSR CONTRIBUTES TO IMPLEMENT OHS AND PSYCHOSOCIAL MANAGEMENT INITIATIVES IN EUROPEAN COMPANIES	
	7.1. Introduction	211
	7.2. Methods	215
	7.2.1. Sample	215
	7.2.2. Procedure	217
	7.2.3. Variables	217
	7.2.4. Analytical strategy	222
	7.3. Results	223
	7.3.1. Client requirement and OSH management	223
	7.3.2. Client requirement and psychosocial risk management	226
	7.4. Discussion	229
	7.4.1. Firm size, sector, country, and OHS and psychosocial concerns	229
	7.4.2. Employer image and client requirements	233
	7.4.3. Limitations and future research	236
STUD	Y 3	. 241
8.	IMPACT OF PSYCHOSOCIAL RISK FACTORS ON EUROPEAN EMPLOYEES' V BEING AND JOB SATISFACTION.	
	8.1. Introduction	243
	8.2. Methods	247
	8.2.1. Sample	247
	8.2.2. Procedure	247
	8.2.3. Variables	249
	8.2.4. Analytical strategy	251
	8.3. Results	252
	8.4. Discussion	255
PART	8.4. Discussion	

	9.1. Working conditions at corporate level and in CSR standards (Study 1)263
	9.1.1. Discussion of the main findings263
	9.1.2. Influence of institutional and theoretical and research developments
	9.2. Client requirements and corporate reputations as drivers for OHS (Students)
	9.2.1. Discussion of the main findings27
	9.3. Impact of psychosocial hazards on workers' health, human developmen and CSR interventions (Study 3)274
	9.3.1. Discussion of the main findings274
	9.4. Interventions at organization-level in OHS and psychosocial risk management
	9.5. The avenue to human development283
	10. CONCLUSIONS285
PA	ART IV: REFERENCES259
	DEFEDENCES

List of Tables

Table 1.1. ILO Conventions on occupational health and safety and other related
Conventions20
Table 1.2. 15 most frequent definitions of CSR29
Table 2.1. Occupational health & safety priorities in industrialized & developing
countries. Results from Delphi surveys66
Table 2.2. Barriers to addressing causes/solutions. Preliminary focus group findings67
Table 3.1. Main international legislation about OHS and psychosocial risks87
Table 3.2. Main international voluntary OHS and psychosocial risks standards and
guidance documents94
Table 4.1. Description of the types of CSR standards and main characteristics 110
Table 4.2. Summary of key CSR standards114
Table 4.3. CSR tools and instruments included in the analysis117
Table 4.4. Job Content
Table 4.5. Workload and work pace120
Table 4.6. Work Schedule124
Table 4.7. Control
Table 4.8. Environment and Equipment129
Table 4.9. Organizational culture and function131
Table 4.10. Interpersonal relationships at work
Table 4.11. Role in organization
Table 4.12. Career development and pay142
Table 4.13. Home-work interface146
Table 6.1. Studies citing selected CSR standards and instruments

Table 6.2. Number of companies included in the GRI or DJSI database, by WHO region
Table 6.3. Number of companies included in the GRI or DJSI database, by NACE sector
Table 6.4. Employement Conditions
Table 6.5. Organizational Development and Culture
Table 6.6. Industrial Relations
Table 6.7. Occupational Health and Safety (OHS) System181
Table 6.8. Diversity and non-discrimination
Table 6.9. Human Rights
Table 6.10. Number of companies reporting on the 30 subthemes (%)191
Table 7.1. Country-level, operating sector and size. Descriptive statistics in 31
European countries
Table 7.2. Logistic Regression: Client requirement and OSH management 224
Table 7.3. Logistic Regression: Client requirement and psychosocial risk management
Table 8.1. Country-level descriptive statistics for subjective health and Human
Development Index (HDI) in 22 European countries248
Table 8.2. Estimates, robust standard errors and 95 percent confidence intervals for
fixed and random effects for covariates of general subjective health among employees
in 22 European countries

List of Figures

Figure 1.1 Research model and studies conducted in the research10
Figure 1.2 Dual pathway hazard – harm25
Figure 1.3. Risks, reactions and long-term consequences of work-related stress26
Figure 1.4. The 'new stakeholders' perspective on OSH and CSR28
Figure 1.5. Types of CSR standards44
Figure 3.1. Multi-level model of interventions for psychosocial risk management80
Figure 3.2. Processes and outcomes of PRIMA-EF model99
Figure 6.1. Thematic template used to organise the data emerging from the CSR
reports
Figure 6.2. Number of companies reporting issues on the six themes by region192
Figure 6.3. Number of companies reporting on the six themes by NACE sector193
Figure 7.1. Conceptual and analytical model used in Study 2

PART I: CONCEPTUAL ANALYSIS

Introduction

There has been a genuine interest in the Social Sciences in the study of the influences of working conditions on the psychosocial well-being of workers in the last few decades. Thus, scientific research in areas such as Occupational Health Psychology has witnessed a growing interest and a vast array of theoretical explanations and models have been provided by researchers. Despite this research effort, less scholarly attention has been directed towards the role that Corporate Social Responsibility, via its influence on working conditions, might have on the psychosocial well-being of workers. In our view, this is an area of study that needs more scholarly attention, since CSR may explain how and when interests on corporation and interests on workers' health find each other at a junction. Thus, the main aim of the present doctoral Thesis is to study the Influence of the Corporate Social Responsibility initiatives in the workers' health and safety and psychosocial well-being.

While the empirical evidence of the effects of working conditions on health has been linked to the role that working conditions play in worsening and/or improving human and social development (Sen, 1999), a comprehensive theoretical framework of how these working conditions evolve is warranted. CSR, in our view, might play here a significant explanatory role, since its growing levels of implementation in companies worldwide is guiding the creation of new and more responsible work environments, with a special focus on the working conditions. These relationships between CSR and working conditions, however, are not straightforward and one might ask, first, what leads a company to change or maintain its actual working conditions. In this regard, working conditions are affected both by 'hard law', as ILO Conventions and recommendations, labour and health and safety international and national legislation, and by 'soft law', including OHS international policies and management systems, CSR

standards, psychosocial risk management systems, etc... While 'hard law' require companies to follow regulatory norms related to working conditions and health and safety, 'soft law' runs in a more voluntary basis. An organization aiming to be socially responsible should follow both 'hard' and 'soft' law.

Compliance with 'hard' and 'soft' law, including 'hard' and 'soft' regulations (e.g., health and safety policies, CSR standards) on occupational health and safety and psychosocial risk management could lead a company to become socially responsible. CSR actions could promote social integration and welfare at work, making it possible to propose business models that foster strategic innovation and competitiveness, while keeping workers' well-being and community welfare. In order to fulfil their ethical and reputational objectives, companies develop CSR initiatives, which require to comply with national and international regulations on working conditions and occupational safety and health (OSH), but they also can go beyond voluntary initiatives (Zwetsloot & Ripa, 2012). Soft law and specifically CSR standards may identify a minimum level of compliance in any particular area of working conditions. These standards allow organizations to supplement existing hard laws and regulations to reach the required ethical level of performance. Hard and soft law are both analysed in the literature reviews conducted in this research. Chapter 3 presents a review of both hard and soft law relevant to the prevention and management of psychosocial hazards and OHS, including legal frameworks at international and European level (e.g., ILO Conventions and Recommendations, EU Directives, EU Framework Agreements), guidance initiatives, lists of occupational diseases, and countries with interesting legal developments. Soft law is analysed in Chapters 3, 4 and 5 (Study 1, part 1), including OHS international policies and management systems, CSR standards, psychosocial risk management systems, etc... These 'soft' policies define the expectations about what CSR should be and, later, give recommendations about how to implement responsible policies to promote well-being.

CSR standards define, measure and promote CSR practices and interventions within the companies, as all ultimately seek improve the level of socially responsibility of organizations where these instruments are implemented. These CSR practices include OHS and psychosocial risk management (chapter 3 & 4) at the company level, reducing the psychosocial risks impact on workers' health. The problem has its roots in that the vast majority of CSR standards were built during 2002-2004, although afterwards new instruments have appeared and older have been updated. Early reviews of CSR instruments (European Commission, EC, 2003; EC, 2004a; European Economic and Social Committee, 2005) might be unable to capture the diversity that new tools have brought, particularly those that relate to labour issues and working conditions. This process has been called as the 'standard consolidation' (Waddock, 2008). Chapter 4.1. reviews existing CSR standards, elaborating a classification in categories, discussing their main advantages and disadvantages, and selecting 28 CSR instruments that were widely recognized in the scientific literature. However, the coverage of working conditions and occupational health in CSR standards is a relatively unexplored area of research (Ripa, Herrero & Gracia, 2010). To improve the knowledge of this, Study 1 (part 1) conducts a thematic analysis (Braun & Clarke, 2006) focused on which health and safety and working conditions issues were included in the 27 most relevant CSR standards available in the literature (chapter 4.1.)

The World Health Organization (WHO, 2003) defined 10 psychosocial risk factors: job content, workload and work pace, work schedule, control, environment and equipment, organizational culture and function, interpersonal relationships at work, role in organization, career development, and home-work interface. These psychosocial risks were found to impact on physical and psychological health (cardiovascular diseases, work-related stress...) and organizational negative effects (absenteeism, productivity, job satisfaction) (Leka & Jain, 2010). In Chapter 4, main impacts on psychosocial hazards on health and organization are studied, while an

analysis of the prevalence of work-related stress and its economic impact is included in chapter 2.

Occupational health and safety has become a central part of CSR (Montero, Araque & Rey, 2009). However, company's drivers and motives to be ethical and compliance with CSR and OHS standards can be different (Ripa & Herrero, 2012). Managers can follow ethical reasons to engage with stakeholders (Freeman, 1984), but also enlightened self-interest for the company (McWilliams & Siegel, 2001; McWillians, Siegel & Wright, 2006). Client requirements and sustainable supply chain management can drive CSR. Another CSR driver which has received a lot of attention from researchers has been the interest in improving corporate reputation and external image of the company by implementing CSR policies. Both drivers have been studied in Chapter 1.5. The literature usually concludes that corporate reputation is a key point for managers and that they often pursue to improve how clients or customers perceive the company when adopting CSR initiatives. Although promising research suggests that OHS management can lead them to a better corporate image and social reponsibility stakeholders' perception (Fernandez-Muñiz, Montes-Peón & Vázquez-Ordás, 2009; Sánchez-Toledo, Fernández, Montes, & Vázquez, 2009), it is still an open question how this driver (e.g. corporate reputation) leads to implementation of specific health and safety or psychosocial risk management systems, improving workers' health. Study 2 therfore aimed to address this research gap. This study analyses if one specific driver of CSR, the 'client requirements and the interest in improving corporate reputation and external image' of the company, can lead to the implementation of either OHS management systems and/or psychosocial risk management systems, regardless of size and kind (public/private) of enterprise, sector or country. To uncover this, data from European Survey of Enterprises on New and Emerging Risks (ESENER) conducted by the European Agency for Safety and Health at Work (EU-OSHA, 2010) was used, which included 28,649 telephone interviews to OHS managers in 31 European countries about their motives to

implement health and safety policies at company-level, including psychosocial risk management. This is important since the implementation of CSR depends many times on the willingness of company's managers.

While over 6,800 companies in 135 countries have adhered to the UN Global Compact (November, 2011), unfortunately, it is difficult to assess whether a company is actually implementing CSR initiatives and which areas are receiving more interest. Despite the momentum behind CSR created by policy makers, there is still little appreciation of organizational practice in this area. Some companies are being externally audited, although most common way to ensure accountability of CSR initiatives is by publicizing a CSR annual report. The impact of CSR reporting is currently very large worldwide, as reflected in data from the International Survey of Corporate Responsibility Reporting (KPGM, 2011), which revealed that 95% of the 250 largest companies worldwide (G250) make reports on their CSR activities, while 80% of them are attached to the Global Reporting Initiative, an instrument that homogenized reporting methodology on CSR. However, there is a need for empirical data by charting existing CSR practices in the area of managing the work environment. Study 1 (part 2) analyses whether CSR reports in largest global companies mention initiatives to improve working conditions and health and safety, also finding regional and sector differences, and which specific aspects receive more attention. There seems to be an ambiguity over whether corporate practice lives up to levels of practice envisioned in CSR tools and instruments. Our research sought to contribute to the debate on CSR as a vehicle to promote better management of the work environment by using annual CSR reports as a source of information about company's policies. Therefore the value this study offers is in providing such evidence, building on methodological limitations in previous work, to address the unexplored area mentioned before. A theoretical framework developed in Study 1 (part 1) was applied to 100 CSR reports from the universe of the 500 largest companies according

to the index of the Financial Times (FT500) published in 2010. The aim is to motivate organisations to better manage the work environment in light of its relationship to several desirable outcomes.

Finally, all hard and soft law and CSR practices in the companies have potential to improve working conditions, tackling psychosocial hazards and increasing levels of physical and psychological workers' health. Study 3 tries to advance the debate about human development, the working environment, and subjective health in Europe. Drawing on the Sen's Capabilities Approach, it proposes that employers' policies at the organizational level are one important social conversion factor for enhancing employees' capabilities at work. Reducing psychosocial hazards and increasing the workers' health could lead to higher human capabilities and personal freedom; indeed, better working conditions could influence positively national levels of Human Development Index. Therefore, this paper explores the impact of the psychosocial hazards at work on the capability "to live a heathy life" in a multi-level analysis from 2010 (5 round) European Social Survey data of 14.876 employees from 22 European countries with different levels of human development measured by the Human Development Index (HDI). This study takes into account several psychosocial risk factors (job content, workload, work organization, physical risks to health, co-worker support, satisfaction with salary, financial stress, job satisfaction, work-life balance) and analyse their impact on self-perceived health of European workers, after controlling gender, age, educational background and human development index of the country in which respondents live. It also analyses whether human development at the country level can influence the association between psychosocial hazards and perceived health.

A final aim of our study is to emphasize the need for further company-level interventions to reduce psychosocial hazards. This intervention could be based on the framework developed in chapter 4.2. This framework analysed how psychosocial risks are tackled for in 28 CSR standards. CSR standards were compared with the 10

psychosocial risk factors, indicating which specific standard covered each factor and, therefore, providing information on the degree of coverage by factor and standard and suggesting that there are areas which have much room for improvement. It helps to point out which specific CSR instruments include actions to prevent psychosocial risks at work and how it would be a framework which included specific measures to face each psychosocial risk, prescribing actions and practices that should follow socially responsible organizations to improve workers' health. Figure 1.1 summarizes the research model and studies conducted in this research.

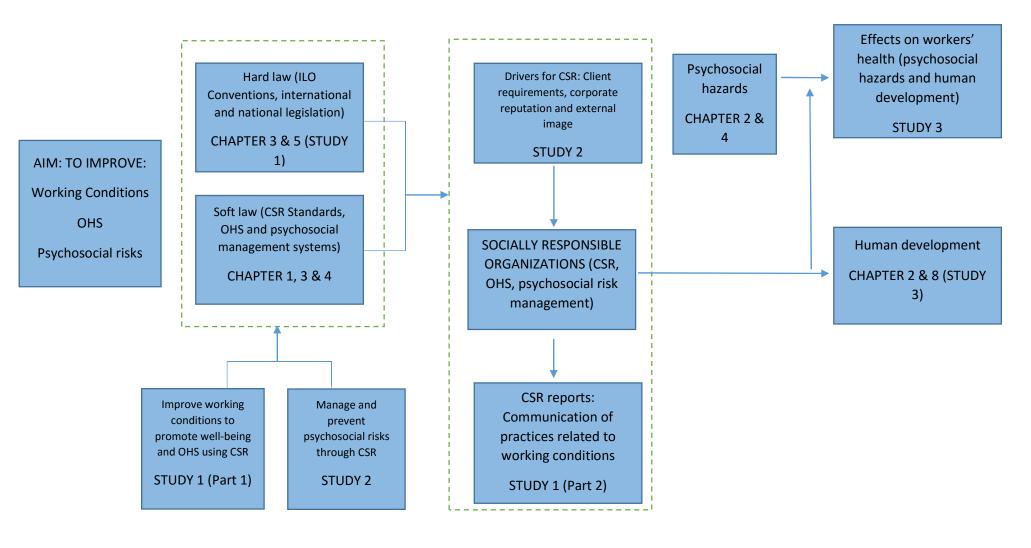


Figure 1.1. Research model and studies conducted in the research

CSR, psychosocial health and wellbeing

1.1. A changing world of work

Changes in the global economy during the last decades have transformed how working conditions are organised both in Europe and around the world, including the nature of work and work organisation, contractual arrangements and new forms of employment, use of new technology, and changes in workforce (EU-OSHA, 2000, 2009; ILO, 2010a; Sparks, Faragher & Cooper, 2001). As a result, there has been an increase in temporary and part-time work, and agency and third-party workers (EU-OSHA, 2007; Kompier, 2006), which may increase the number of precarious jobs. This kind of jobs are likely to have worse working conditions (e.g., non-permanent contracts, lower wage, lack of social security, and a decrease in training opportunities, and health and safety standards), which can result in higher job demands, job insecurity, lower control and negative health outcomes (Benach, Amable, Muntaner & Benavides, 2002; Benach et al., 2014; Benavides, Benach, Diez-Roux & Roman, 2000; De Cuyper et al., 2008). For instance, in Denmark it was found that all work aspects, except supervisor support, worsened (e.g., violence, co-workers social support, role clarity, job control, development, work pace, etc.) from 1997 to 2005 for all subgroups of workers (Pejtersen & Kristensen, 2009)

In addition, there has been a shift from occupations with a high exposure to physical risks (involving accidents and fatalities) towards occupations with exposure to other forms of work-related risks such as psychosocial risks, including working intensification (e.g., higher workload and demands, longer working hours, lack of compensation and support, emotional pressure, fear to be dismissed) (EU-OSHA, 2007). This could partially explain the decrease in the number of accidents in industrialised countries (Davies & Jones, 2005), hiding a tendency to outsource dangerous work from these nations to other areas of the globe. The ILO (2003b) estimated in 2003 that 270 million occupational accidents occur

annually and recently updated this figure to 317 million injuries through workplace accidents (ILO, 2011, 2013b). Although, 2.34 million people died each year from work-related accidents and diseases, the vast majority (2.02 million, 86%) died due to occupational diseases, mainly affected by psychosocial risks. Three diseases related to these risks are leading the global causes of disability: mental health disorders and cardiovascular and musculoskeletal diseases (ILO, 2000, 2013a, 2013b).

Psychological health is a concern around the world. In the EU-27, 23 per cent of workers suffered from low levels of well-being and 6 per cent were likely to suffer from depression in 2010 (European Foundation for the Improvement of Living and Working Conditions, Eurofund, 2012a), while 9.5 per cent found their job stressful at all times (Eurofund, 2007). Higher rates of work-related stress (up to 30.4% on average, comparing to 20.2% of first 15 EU member states) have been found in new EU member states (Eurofund, 2007). It is estimated that one in five of the workers suffers from mental health problems, rising to two in five for lifetime prevalence, with higher prevalence rates for younger adults and women (OECD, 2012). Workers suffering a mental disorder are absent from work because of health reasons more often than any other and also have more days of absence (OECD, 2012). Around 40% of European workers reported having been absent from work due to sickness or having worked while ill ('presenteeism') at least one day in the previous year (Eurofund, 2012a). Presenteeism and underperforming are reported by 74% of all workers with a mental disorder, comparing to 26% of workers without a mental disorder (OECD, 2012).

Perception of psychosocial hazards, work-related stress, and consequently self-perceived health, job satisfaction and mental health problems could be influenced by working, social and regulatory conditions in the country. Variables such as health and safety culture, plans and inspection (Dragano et al., 2015), gross domestic product (Dollard & Neser, 2013), welfare systems (Bambra, Lunau, Van der Wel, Eikemo, & Dragano, 2014; Lunau, Bambra, Eikemo, van der Wel, & Dragano 2014) and human development (Sen, 1999) could influence these factors and health outcomes. A study by Ridge, Bell, Kossykh, and Woolley (2008) carried out in the UK over a period of 10 years showed that as the proportion of

people with ill-health increased, economic growth slowed down, while work-related illnesses would explain 11 per cent of the impact of general health on economic performance. Similar findings have also been replicated at the global level (ILO, 2006b).

In addition, the economic crisis since 2008 has led to increasing unemployment worldwide and, consequently, has increased the negative effects to physical and psychological health. Furthermore, underpaid jobs and the phenomena of 'the working poor' are known to affect around 25 per cent of all labour force in developing countries, but this is also problematic in several developed countries (Benach, Muntaner, Santana & Chairs, 2007). For instance, in Europe, a higher impact of precarious jobs were found in women and people in European Eastern and Southern countries (Puig-Barrachina et al., 2014). The International Labour Organization (2015) estimates that 201 million people in the world were unemployed in 2014, over 31 million more than in 2007. The youth unemployment rate is three times higher than the average and global unemployment is expected to increase by 3 million in 2015 and by 8 million by 2019 (ILO, 2015b). This means that there is a global employment gap of 61 million, and that if we consider new labour market entrants until 2019, 280 million jobs would be needed by then to close the global employment gap caused by the economic crisis (ILO, 2015b).

Several countries are experiencing more economic problems and workers are suffering from greater financial stress and worsening perceived health, as a consequence of the economic crisis. According to the ILO (2015), although unemployment is decreasing in Japan, the USA, and some EU countries, it is still dramatically high in southern EU countries and the situation is deteriorating in regions such as Latin America and the Caribbean, China, the Russian Federation and several Arab countries. Unemployment is particularly high in the EU-28 (9.7%), rising up to 22.7% in Spain and 25.4% in Greece (Eurostat, 3 June, 2015) and in North and Sub-Saharan Africa and the Middle East, where can reach 30% (ILO, 2015b).

Furthermore, according to European Labour Force Survey, 14% of EU workers in 2014 had a temporary contract (Eurostat, August, 2015), while the proportion of individuals working part-time also increased from 16.7% in 2004 to 19.6% in 2014 (Eurostat, 2015). Vulnerable and precarious employment affects to 1.44 billion workers, after increasing by 27 million since 2012 (ILO, 2015b). It is especially serious in Sub-Saharan Africa and South Asia countries, where three of every four workers are in vulnerable employment. On the positive side, East Asia region have reduced vulnerable employment from 49.5 per cent in 2007 to an expected 38.1 per cent in 2019. Finally, labour force participation have decreased 0.7 per cent since 2007 and remains in 63.5 per cent, losing 37 million potential workers (ILO, 2015b). Working conditions within developing countries are not homogeneous, with a higher presence of self-employed workers and the informal sector and drastic differences between urban and rural areas (WHO, 2007).

In industrialised countries, organizational restructuring has led to downsizing, closure of companies and outsourcing, increasing job insecurity and fear of losing employment and provoking negative effects on the communities (Sparks et al., 2001), as well as lower occupational health and safety outcomes and workers' well-being (Bohle, Quinlan, & Mayhew, 2001; Quinlan & Bohle, 2009). In such an environment many companies have decided to relocate their factories to low-wage countries and outsource their production thus reducing employment opportunities in industry in developed countries (EU-OSHA, 2007, NIOSH, 2002). These factors can lead to a higher workers' fear to lose their jobs, difficulties to re-enter in the labour market or accepting poor quality low-level jobs (EU-OSHA, 2007). Vulnerable group of workers, as disabled people, could be even more affected by the effects of high unemployment and organizational restructuring (EU-OSHA, 2007). In sum, precarious workers usually perform the most hazardous jobs and work in poorer conditions (e.g., less health and safety training, successive short-term contracts), increasing the risk of occupational accidents (EU-OSHA, 2007). Loss or lack of employment, loss of income, underemployment (e.g., involuntarily working fewer hours than desired or having more formal education or being more skilled than job requirements, not being able to fully utilize job skills), or job insecurity can lead to impaired health (ILO, 2012b), and can become structural (OECD, 2014).

These changes in global economy can have an effect on workers' health and safety. For instance, occupational health services are guaranteed for less than 10 per cent of workers in developing countries and just from 20 to 50 per cent of workers in industrialized countries (WHO, 2003). For the ILO (2012b, 2013b), the economic crisis is responsible for the closing down of facilities, cutting jobs, reduction of public spending, more temporary and subcontracted workers, which also compromises health and safety measures and increases work-related accidents and diseases.

Working conditions are related to better human and social development, and they have been linked to Sen's (1999) theory of capabilities. Thus, human development and well-being can be improved by ensuring adequate and fair working conditions. Taking this into account, Human Development Index was created to measure several factors related to working conditions, including health, education and material well-being (see Chapter 2.3).

1.2. Working conditions and psychosocial work-environment as a way to promote well-being: scope and context

Working conditions refer to the conditions under which work is performed and include aspects such as work environment, time, place and organization of work. While the term 'work environment' has been traditionally related to more physical and environmental factors, it should also include other factors related to work organization, such as psychological and social factors (Jain, Leka, & Zwetsloot, 2011; Leka, Cox, & Zwetsloot, 2008). Working conditions are regulated by various forms of labour law including legislation,

collective agreements, work rules, and the contract of employment. The European Foundation for the Improvement of Living and Working Conditions (Eurofound) states that working conditions 'refer to the working environment and aspects of an employee's terms and conditions of employment and cover such matters as: the organisation of work and work activities; training, skills and employability; pay; health, safety and well-being; and working time and work-life balance' (Eurofound, 2011). Furthermore, labour rights including health and safety at work are gradually seen as fundamental human rights, and as such should be a part of any framework aimed at promoting working conditions. In addition, these rights are considered as ethical principles of growing business relevance (ILO, 2009). The ILO has defined decent job as having opportunities for a work that

"[I]s productive and delivers a fair income, security in the workplace and social protection for families, better prospects for personal development and social integration, freedom for people to express their concerns, organize and participate in the decisions that affect their lives and equality of opportunity and treatment for all women and men" (ILO, n.d.).

Benach et al. (2007) complemented the ILO decent job definition with the notion of "fair employment", which implies a just relation between employers and employees that requires:

"(1) freedom from coercion, which excludes all forms of forced-labour such as bonded labour, slave labour, or child labour, as well as work arrangements that are so unbalanced that workers are unable or afraid to assert their rights; (2) job security in terms of contracts and safe employment conditions; (3) fair income, that is, sufficient to guarantee an adequate livelihood relative to the needs of society; (4) job protection and the availability of social benefits including provisions that allow harmony between working life and family life, and retirement income; (5) respect and dignity at work, so that workers are not discriminated against because of their gender, ethnicity, race, or social class; (6) workplace participation,

a dimension that allows workers to have their own representatives and negotiate their employment and working conditions collectively within a regulated framework; and (7) enrichment and lack of alienation, where work is not only a means of sustenance; rather, jobs should be as much as possible an integral part of human existence that does not stifle the productive and creative capacities of human beings" (p. 381).

On an international level, ILO Conventions provide the basis for a comprehensive regulatory policy framework of working conditions. Table 1.1 presents several ILO Conventions of relevance to working conditions. As it can be seen, these cover a multitude of issues including health, safety and wellbeing, pay, worker representation, discrimination, and equality.

European Commission (2004b) called for improving the quality in work, investing in human capital and job quality. This included the improvement of health and safety at work, facilitating appropriate access to training and skill development and maintaining good working conditions that allow to keep and attract staff, as well as ensuring social dialogue and negotiation and collaboration between workers' representatives and management at enterprise level. However, a wealth of evidence suggests that still much needs to be done to improve working conditions, while most emphasis has been put on quantity rather than quality (Eurofund, 2007b). Discrimination at work, unequal pay, new patterns of employment contracts and lack of availability of lifelong learning are still common problems among European workers (Eurofound, 2012a). The situation in developing countries is similar if not worse.

Discrimination is a prominent problem according to the first global report on discrimination at work "Time for Equality at Work" (ILO, 2003b). It considered aspects such as new forms of discrimination (e.g., disability, HIV/AIDS, age or sexual orientation), as well as the new less visible forms of discrimination (e.g., global migration, inequalities, racial and religious

discrimination, relegation of women to lower-skilled jobs, 'glass ceiling' or relegating them to paid domestic work or unpaid family work, multiple discrimination).

Tabla 1.1. ILO Conventions on occupational health and safety and other related Conventions

Convention	Name of Convention	Year of Adoption	Countries ratified
Convention	Name of convention		(October
			1, 2015)
1	Hours of work (Industry)	1919	52
13	White Lead (Painting). (To be revised status)	1921	63
14	Weekly Rest (Industry)	1921	120
17	Workmen's Compensation	1925	74
	(Accidents) (Outdated and revised status)		
18	Workmen's compensation of Occupational Diseases (Outdated and revised status)	1925	68
29	Forced Labour	1930	178
45	Underground Work (Women) (Interim status)	1935	98
47	Forty-Hour Week	1935	15
87	Freedom of Association and Protection of the Right to Organise	1948	153
97	Migration for Employment (Revised)	1949	49
98	Right to Organise and Collective Bargaining	1949	164
100	Equal Remuneration	1951	171
105	Abolition of Forced Labour	1957	175
111	Discrimination (Employment and Occupation)	1958	172
115	Radiation Protection	1960	50
119	Guarding of Machinery (To be revised status)	1963	52
120	Hygiene (Commerce and Offices)	1964	51
127	Maximum Weight (To be revised status)	1967	29
132	Holidays with Pay (Revised)	1970	36
135	Workers' Representatives	1971	85
136	Benzene (To be revised status)	1971	38
138	Minimum Age	1973	168
139	Occupational Cancer	1974	39
140	Paid Educational Leave	1974	35
142	Human Resources Development	1975	68
148	Working Environment (Air Pollution, Noise and Vibration)	1977	45
154	Collective Bargaining	1981	46
155	Occupational Safety and Health	1981	64
156	Workers with Family Responsibilities	1981	44
161	Occupational Health Services	1985	32
162	Asbestos	1986	35
167	Safety and Health in Construction	1988	29
170	Chemicals	1990	18
171	Night Work	1990	13
174	Prevention of Major Industrial Accidents	1993	18
175	Part-time Work	1994	14
176	Safety and Health in Mines	1995	30
182	Worst Forms of Child Labour	1999	180
183	Maternity Protection, Revised	2000	29
184	Safety and Health in Agriculture	2001	15
187	Promotional Framework for Occupational Safety and Health	2006	35

Note: In addition, other categories of International Labour Standards have been adopted by the ILO such as Recommendations and Protocols. The ILO have developed Codes of Practices as well: Protocol of 2002 to the Occupational Safety and Health Convention, 1981 (10 countries ratified); Occupational Health Services Recommendation, No. 171, 1985; Promotional Framework for Occupational Safety and Health Recommendation, No. 197, 2006 Prevention of Major Industrial Accidents Recommendation, No. 181, 1993; Recommendations (Nos. 118, 114, 144 and 147); Recommendation 97, Protection of Workers' Health Recommendation, 1953; Welfare Facilities Recommendation, No. 102, 1956; List of Occupational Diseases Recommendation, 2002, R194 (Revised, 2010) and 1996 Code of Practice on the recording and notification of occupational accidents and diseases; Recommendation No. 164, Occupational Safety and Health Recommendation, 1981; and several other codes of practice and guides

According to the ILO, discrimination can trap people in the worst, low-paid or informal economy jobs, while denying benefits, social protection, training, or credit. Discrimination due to disability also provokes a denial of opportunities. Consequently, just 40 per cent of people with disabilities were employed in 2003, and as high as 52 per cent of EU workers with disability were economically inactive (ILO, 2007b). Discrimination can lead to poverty, so a strategy for poverty reduction and human development could be necessary (ILO, 2003b).

Accumulating evidence across the world clearly indicates that occupational health and safety (OHS) conditions within organisations are also poor and influenced by the above mentioned issues at work (WHO, 2002). Statistics have long documented the prevalence and impact of occupational accidents and diseases. According to the ILO and the WHO (2005), occupational diseases are the most prevalent danger faced today by people at their work. The WHO suggests there are 160 million new cases of work-related illness yearly, and these occupational risks have been reported to contribute to chronic diseases, including cardiovascular diseases, cancer and depression (WHO, 2002). Workplace accidents or diseases result in 2.3 million deaths per year (ILO, 2013a, 2013b) and have a significant impact on the workers' health (ILO, 2011). Changes in working environment increase risk to workers' health, safety and wellbeing with associated negative effects to the sustainability of organisations and society at large.

Psychosocial risks at work are defined as those aspects of the design and management of work, and its social and organisational contexts that have the potential for causing

psychological or physical harm (Cox & Griffiths, 2005), and are an integral part of working environment. Linked to these psychosocial risks, issues such as work-related stress and workplace harassment and violence are now widely recognised as major challenges to occupational health and safety (EU-OSHA, 2009, Leka, Jain, Zwetsloot, & Cox, 2010). Psychological harassment is a form of employee abuse arising from unethical behaviour and leading to a workers' victimisation that can impact on their health (WHO, 2003). Psychosocial risks at work have been linked to a number of health related issues including: mental health (e.g. depression, anxiety and burnout), social and behavioural health (e.g. smoking and drinking), and physical health (e.g. heart disease, musculoskeletal disorders, and diabetes) as well as to absenteeism, presenteeism, and reduced organisational performance (Leka & Jain, 2010).

Avenues to alleviate poor working conditions are also substantially worsening. Collective bargaining or social dialogue has been useful in Europe and other countries (Broughton, 2008); however it is far less effective or often non-existent in developing countries, with many workers not operating in unionised workforces (ILO, 2003b). For instance, in their survey on the violation of trade union rights, the International Confederation of Free Trade Unions (2006) suggests that there has been an increase in the violent repression of workers' rights in many parts of the world (i.e., Africa), including a failure to respect the right of workers to organise to strike or bargain collectively. In OECD countries, after 2008 economic crisis, social dialogue is almost absent in many countries and governments have implemented cuts in public services, changes in labour laws and austerity policies without negotiating with workers' organizations since 2009. Consequently, critics from workers' organizations have been raising and more confrontation strategies have been developed, including strikes, in countries like Finland, Portugal, Slovenia, Spain or Italy (Hyman, 2010). Taking this into account, there is clearly a need to look for a number of policies and approaches to promote and manage working conditions.

There is now evidence that shows the interrelationships between the various aspects of working conditions and their outcomes. For example, research has shown that organisational restructuring, job insecurity and precarious employment can lead to poor

wellbeing and negatively affect productivity (Wiezer et al., 2011). Similar effects have been found as a result of an imbalance between efforts and rewards at work (Siegrist, 1996). This requires to promote a comprehensive view of working conditions in attempting to manage them effectively (WHO, 2010), considering new and emerging challenges in order to implement comprehensive approaches that are pro-active, positive and preventative (EC, 2002; ILO, 2003a).

1.3. Occupational Health and Safety and Psychosocial hazards and risks

Financial crisis has impacted on occupational health and safety. Effects of economic crisis on organizational changes and on occupational health and safety measures, can include a compromise in OHS measures (e.g., loss in OHS professionals, decline in OHS measures, aggravated OHS conditions in informal jobs, overwork, longer working hours, cutting in OHS resources, outsourcing and subcontracting, relocations) leading to an increase in workplace accidents, diseases or ill-health (ILO, 2012b).

However, there is also a trend to increase the implementation of comprehensive risk management and health and safety policies. Risk management in OSH is a systematic, evidence-based, problem solving strategy, which includes an assessment of causes of the risks and psychosocial hazards and their effects, audits to recognize and evaluate existing management practices, an action plan intended to remove or reduce these risks on the basis of risk assessment and audit, and a continuous and final monitoring and evaluation which pretend to give feedback to the process (Jain, 2011).

The main focus of the action plan is to reduce risk factors at source, redesigning the work environment within the organization but, when not possible, initiatives to reduce or to alleviate risks can be necessary. Psychosocial risk management started in the 90s with Cox's work (Cox, 1993) as a systematic problem-solving process on the basis of previous

management systems used to the management of other hazards to health (e.g., chemicals). Leka, Hassard, et al. (2008) reviewed European 'best practice approaches' based on the risk management cycle to identify key features. Common principles found were participative methods including workers' and employer' representatives, a process of assessment, design of actions, implementation and evaluation, and the adaptation to the specific needs of each organization of the actions to reduce work-related stress.

1.3.1. Definition of psychosocial hazards and risks

Psychosocial hazards are recognized as one of the major contemporary challenges for workers' health and well-being. The International Labour Organization defines psychosocial factors in terms of the interactions among job content, work organization and management, and other environmental and organizational conditions, on the one hand, and the employees' competencies and needs on the other, that may have a hazardous influence over employees' health through their perceptions and experience (ILO, 1986). Psychosocial hazards are defined as those aspects of the design and management of work, and its social and organisational contexts that have the potential for causing psychological or physical harm (Cox & Griffiths, 2005). There is a reasonable consensus on the nature of psychosocial factors, which have been categorized under ten broad areas: job content, workload and work pace, work schedule, control, environment and equipment, organizational culture and function, interpersonal relationships at work, role in organization, career development, and home-work interface (Cox, 1993; WHO, 2003, 2008). They are are linked to work-related stress, workplace violence and harassment or bullying (Leka et al., 2010).

Psychosocial risks also could be understood as social conversion factors as they enable or restrict the capability set of people at work (see chapter 2.3). Hazards imply the capability of a certain element at work environment to cause damage or harm, while harm refers to the physical and psychological work-related damage, injury or disease and risk refers to the

likelihood that a certain hazard can cause harm (Cox, 1993; Jain, 2011) (Figure 1.2.). A risk management approach tries to assess potential risks in the work environment that may cause that particular hazards cause harm to employees (Leka, Griffiths, & Cox 2004).

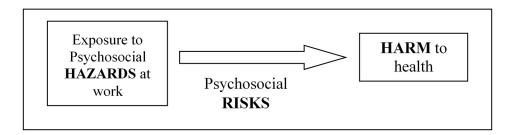


Figure 1.2. Hazard, risk and harm. Adapted from Cox (1993).

A large body of research shows an association between exposure to psychosocial hazards, or to an interaction between physical and psychosocial hazards, and a multitude of individual and organizational level outcomes. A recent review by the WHO (Leka & Jain, 2010) highlights the detrimental impact of psychosocial hazards on workers' physical (e.g. heart disease, musculoskeletal disorders, and diabetes), mental (e.g. depression, anxiety and burnout), and behavioural health (e.g., smoking and drinking) as well on organizational outcomes as absenteeism, productivity, job satisfaction and intention to quit (e.g., Michie & Williams, 2003; Vahtera, Pentti & Kivimaki, 2004; van den Berg, Elders, de Zwart, & Burdorf, 2009). For instance, job satisfaction can be affected by salary, tenure status, work-related stress (Chung & Kowalski, 2012), but can also impact on workers' physical and mental health and performance (Faragher, Cass & Cooper, 2005; Kopp Stauder, Purebl, Janszky, & Skrabski, 2009) and MSDs (Fernandes et al, 2010).

Furthermore, psychosocial hazards have been shown to impact mental health as depression, anxiety and psychological disturbance (Bonde, 2008; De Lange, Taris, Kompier, Houtman, & Bongers, 2004; Netterstrøm et al., 2008; Tennant, 2001). Psychosocial hazards also contribute to unsafe execution of tasks and increase the rate of accidents and occupational diseases (Cornelio, 2013).

The evidence suggests that effects of psychosocial hazards on physical and psychological health follow two processes: first, a direct pathway, and second, an indirect stress-mediated

pathway (see Figure 1.2) (Cox, Griffiths, & Rial-González, 2000). According to the WHO (2003), work-related stress is the response that people may have after being faced with work demands and pressures that are not matched to their knowledge and abilities to cope. The most stressful situation come when there are excessive demands and pressures that are not matched to workers' knowledge and abilities, and there is little support from others and limited control over the working environment (Leka et al., 2004). Work-related stress includes emotional, cognitive, behavioural and physiological reactions to aspects of work environment and organization (EU-OSHA, 2009). These reactions can include work-related violence and bullying or harassment. Harassment occurs when one or more worker or manager are repeatedly and deliberately abused, threatened and/or humiliated in circumstances relating to work, and violence when a worker or manager is assaulted in circumstances relating to work, with the purpose or effect of violating their dignity (EC, 2007a). It includes psychological offenses.

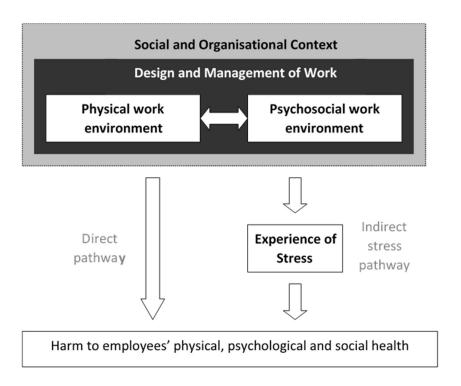


Figure 1.3. Dual pathway hazard - harm. Adapted from Cox et al. (2000).

Several reviews and international studies have analysed effects of psychological hazards on health. Niedhammer, Malard, and Chastang (2015) recently found, after questioning 26,883 men and 20,079 women in France, that low decision latitude, high psychological demands,

low social support, low reward, bullying and verbal abuse were associated with depression and anxiety for both genders. In a previous study, Niedhammer, Chastang, Sultan-Taïeb, Vermeylen, & Parent-Thirion (2013) analysed the association between psychosocial work factors (decision latitude, psychological demands, social support, physical violence, sexual harassment, discrimination, bullying, long working hours, shift and night work, job insecurity, job promotion and work-life imbalance) and sickness absence in 31 European countries. They found that high psychological demands, discrimination, bullying, low-job promotion and work-life imbalance for both genders and physical violence for women were all associated with sickness absence. Slany et al. (2014), after analysing psychosocial hazards in 32,708 workers in 34 European countries from the 2010 EWCS, found that job demands, career development, social relationships, and workplace violence were associated with long sickness absence. Several studies have focused on psychosocial risks at work analysing country-differences (Bambra et al., 2014; Lunau et al., 2014; Niedhammer, Sultan-Taïeb, Chastang, Vermeylen, & Parent-Thirion, 2012). Niedhammer et al. (2012), by using a sample of 14,881 male and 14,799 female workers from the 2005 EWCS, found a different prevalence of exposure to psychosocial risks among eighteen psychosocial work factors in 31 European countries.

Psychosocial hazards (e.g., high workload, low social support and control, monotonous work, job dissatisfaction) and work-related stress have been also related to MSDs (Deeney & O'Sullivan, 2009; Sobeih, Salem, Genaidy, Daraiseh, & Shell, 2006) and to unhealthy behaviours (EU-OSHA, 2000; Kouvonen et al., 2005; Kouvonen, Kivimaki, Cox, Cox, & Vahtera, 2006; Nakao, 2010). In the UK, according to THOR-GP 2011-2013, main precipitating events causing work-related stress, depression and anxiety were workload pressures (e.g., scheduling, shift work) (24.1 per cent), interpersonal pressures and bullying (23.4 per cent), changes at work and cutting in staff and resources (12.4 per cent), lack of personal development (8.2 per cent) and problems with home-work interface (6.2 per cent) (HSE, 2014). In Australia, main causes leading to injury or disease claims by mental stress were work pressures, workplace harassment or bullying and exposure to workplace violence

(Safe Work Australia, 2015b). Diseases due to mental stress cause a higher cost and longer absenteeism than other diseases (Safe Work Australia, 2015b). Figure 1.5 summarizes main risks, stress reactions and long-term consequences, that can include individual consequences, such as distress, irritation, worry, strain, unable to think logically, feeling depressed or anxious, sleeping problems, less self-esteem and life satisfaction, psychological (e.g., depression, violent behavior, suicide attempts) and physical problems (e.g., symptoms as headaches, stomach aches, ulcers, high blood pressure, high cholesterol levels, higher likelihood of stroke, heart disease or kidney disease), unhealthy activities (e.g., alcohol abuse, less exercise), but also organisational effects as absenteeism, undercommitment, staff turnover, less organizational loyalty, less creativity, impairing performance and productivity, higher accident rates, increasing complaints from clients and customers, lower staff recruitment attraction and damage to organization's image (ILO, 2012b; Leka et al., 2004).

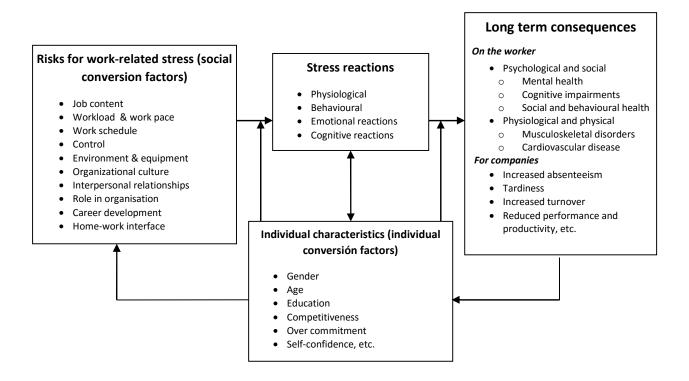


Figure 1.4. Risks, reactions and long-term consequences of work-related stress. Adapted from Kompier and Marcelissen (1990).

1.4. CSR and Health and Safety at Work

1.4.1. What is CSR?

This section reviews and discusses the main theories of CSR, the underlying assumptions of each theory, as well as an historical and evolutionary approach and suggests the theoretical links between CSR and health and safety at work. First it focuses on the definitions of CSR, following which it analyses the historic evolution and current thinking of CSR.

1.4.1.1. Definitions of CSR

Corporate Social Responsibility (CSR) has been defined in many ways over the years and, although mostly referred to as CSR, the same underlying themes have also been termed business ethics, corporate responsibility and sustainability or corporate social performance (Crane & Matten, 2010). CSR is used here as an umbrella term for these different notions, recognising they have a number of commonalities between them (Blowfield & Frynas, 2005; Dahlsrud, 2008). In fact, not only there not seem to be an agreed upon definition of CSR (Dahlsrud, 2008), but also consensus seems to be lacking when a company can be said to fulfil its responsibilities to society (Taneja, Taneja & Gupta, 2011).

Tabla 1.2. 15 most frequent definitions of CSR

Source	Definition		
Commision of the	A concept whereby companies integrate social and environmental concerns		
European	in their business operations and in their interaction with their stakeholders		
Communities, 2001	on a voluntary basis		
World Business Council	The commitment of business to contribute to sustainable economic		
for Sustainable	development, working with employees, their families, the local community		
Development, 1999	and society at large to		
	improve their quality of life		
World Business Council	Corporate social responsibility is the continuing commitment by business to		
for Sustainable	behave ethically and contribute to economic development while improving		
Development, 2000	the quality of life of the workforce and their families as		
	well as the local community and society at large		

Commision of the European Communities, 2001	Corporate social responsibility is essentially a concept whereby companies decide voluntarily to contribute to a better society and a cleaner environment
Business for Social Responsibility, 2000 Business for Social	Business decision making linked to ethical values, compliance with legal requirement and respect for people, communities and the environment Operating a business in a manner that meets or exceeds the ethical, legal,
Responsibility, 2000	commercial and public expectations that society has of business. Social responsibility is a guiding principle for every decision made and in every area of a business
IBLF, 2003	Open and transparent business practices based on ethical values and respect for employees, communities and the environment, which will contribute to sustainable business success
Khoury et, al, 1999	Corporate social responsibility is the overall relationship of the corporation with all of its stakeholders. These include customers, employees, communities, owners/investors, government, suppliers and competitors. Elements of social responsibility include investment in community outreach, employee relations, creation and maintenance of employment, environmental stewardship and financial performance
Business for Social Responsibility, 2003	Corporate social responsibility is achieving commercial success in ways that honour ethical values and respect people, communities and the natural environment
Commision of the	CSR is the concept that an enterprise is 40 Voluntariness
European	European accountable for its impact on all relevant stakeholders. It is the
Communities, 2003	continuing commitment by business to behave fairly and responsibly and
	contribute to economic development while improving the quality of life of the work force and their families as well as of the local community and society at
	large
CSRwire, 2003	CSR is defined as the integration of business operations and values,
35.ttm c/ 2003	whereby the interests of all stakeholders including investors, customers,
	employees and the environment are reflected in the company's policies and
	actions
Hopkins, 1998	Corporate social responsibility is concerned with treating the stakeholders of
	the firm ethically or in a socially responsible manner. Stakeholders exist
	both within a firm and outside. Consequently, behaving socially responsibly
	will increase the human development of stakeholders both within and
-	outside the corporation
Ethics in Action	CSR is a term describing a company's obligation to be accountable to all of its stakeholders in all its operations and activities. Socially responsible
Awards, 2003	companies consider the full scope of their impact on communities and the
	environment when making decisions, balancing the needs of stakeholders
	with their need to make a profit
Jones, 1980	CSR is defined as the notion that corporations have an obligation to
	constituent groups in society other than stockholders and beyond that
	prescribed by law or union contract, indicating that a stake may go beyond
	mere ownership
Hopkins, 2003	CSR is concerned with treating the stakeholders of the firm ethically or in a
	responsible manner. 'Ethically or responsible' means treating stakeholders in
	a manner deemed acceptable in civilized societies. Social includes economic
	responsibility. Stakeholders exist both within a firm and outside. The wider
	aim of social responsibility is to create higher and higher standards of living,
	while preserving the profitability of the corporation, for peoples both within
Note: Adapted from D	and outside the corporation

Note: Adapted from Dahlsrud (2008).

Most definitions, however, share certain themes (Aragón & Rocha, 2005; Dahlsrud, 2008) including: recognizing the triple bottom line, namely economic, social and environmental impacts (Elkington, 1999); stakeholder engagement (Freeman, 1984), integration into company management and strategy (Porter & Kramer, 2006) and transparency and social accountability.

Despite the above mentioned concerns, several institutions have created their own CSR definitions which have been mainly adopted in practice, for example, those by the World Business Council for Sustainable Development (WBCSD) or European Union, becoming the most cited definitions (Dahlsrud, 2008). Thus, the definitions of CSR by the European Union, WBCSD, United Nations, Business for Social Responsibility, OECD or ILO have indeed contributed, in a way, to normalising the field. The World Business Council for Sustainable Development (WBCSD, 2000) stated that CSR is: "improving the quality of life of the workforce and their families as well as of the local community and society at large" (p. 3). In 2001, the European Commission launched a European debate with the publication of the Green Paper on CSR, later followed by the European White Paper. CSR was defined by the European Commission in 2002 as 'the integration by companies of social and environmental concerns into their business operations and into their interactions with their stakeholders on a voluntary basis' (EC, 2002). The International Organization for Standardization (ISO, 2010) has also defined CSR in its ISO 26000 Guide:

The responsibility of an organization for the impacts of its decisions and activities on society and the environment, through transparent and ethical behaviour that contributes to sustainable development, health and the welfare of society; takes into account the expectations of stakeholders; is in compliance with applicable law and consistent with international norms of behaviour; and is integrated throughout the organization and practiced in its relationships.

In 2011, the European Commission proposed a new, broader and simpler definition of CSR: "Corporate Social Responsibility is the responsibility of enterprises for their impact on society". Respect for applicable legislation and for collective agreements between the social partners, is a prerequisite for meeting that sustainability (EC, 2011a). In this new definition, it is recognised that corporate responsibilities are derived from both legislative, but also wider, societal requirements. This view supports an existing position in the literature that CSR extends beyond voluntary initiatives (Carroll, 1983; GRI, 2011; McBarnet, 2009; Schwartz & Carroll, 2003). The European Commission (EC, 2011a) also notes that enterprises should establish a process to integrate social, environmental, ethical, human rights, and consumer concerns into business operations and core strategy, in collaboration with stakeholders. The aims of CSR are described as (1) maximising the creation of shared value for the owners/shareholders of the enterprise and for their other stakeholders and society at large; and (2) identifying, preventing and mitigating their possible adverse impacts (EC, 2011a). In essence CSR is an approach to business where decisions are made considering 'what is right' so that "corporate behaviour [is] up to a level where it is congruent with the prevailing social norms, values and expectations." (Carroll, 1979, p.498). Policy makers are now aiming to achieve traditional legislative goals through this approach (Albareda, Lozano, & Ysa, 2007)

1.4.1.2 Historical evolution, and current thinking, of CSR

Zweetsloot and Ripa (2012) reviewed the historical evolution of CSR and identified different stages of CSR development (Blowfield & Murray, 2008; Carroll & Shabana, 2010; Frederick, 2008; Lee, 2008). Following Frederick's (2008) previous work, Zwetsloot and Ripa (2012) analysed the history of the CSR concept across four stages or types of CSR: CSR₁ or Corporate Social Stewardship (1950s-1960s); CSR₂ or Corporate Social Responsiveness (1960s-1970s); CSR₃ or Corporate/Business Ethics (1980s-1990s); and CSR₄ or Corporate Global Citizenship (1990s-2000s).

Overall, the evolution of CSR concept illustrates the need of corporations to gain social legitimacy (Van Oosterhout & Heugens, 2008) and it starts around the 1950s. Was Bowen (1953/2013) the first in suggesting that businessmen should have 'social responsibilities', although it was unclear what these were. At that time, financial concerns regarding CSR initiatives were not dominant; these were carried out because it was the ethical thing to do. Bowen influenced many forward thinking academics and activists. Together, their influence shifted the focus from leader responsibility (businessmen) to corporate responsibility. However, critics as Friedman (1962, 1979) existed, whose arguments would dominate the 1980s, where the first theoretical models were conceived (Corporate Social Performance, Carroll, 1979, Wood, 1991). Meanwhile, CSR had already received attention outside the academic world since the 1960s as a consequence of youth protests and 'unethical' activities of big companies in the USA and Europe. Public opinion began to sway and the first social accountability initiatives rose, as citizens and institutions began to require ethical commitment from business.

In the 1980s, the rise of neoliberalism displaced CSR from most MNEs companies, except the most exceptional (Casado, 2006). The dominant belief was that if companies were economically sound, society would benefit. From this point of view, deregulation and dilution of social boundaries were necessary to allow companies to grow, creating jobs and contributing to society. CSR became a secondary issue. This changed as labour and environmental scandals began to increase (Exxon Valdez shipwreck in Alaska in 1989, sweatshops in Asia, Bopal disaster in India in 1984, etc.). Global pressure from social movements and consumers appeared again. This pressure eventually was held, as companies started adopting codes of conduct and increased transparency. CSR was perceived to be a way of minimising negative impact and therefore risk, and enterprises began engaging with stakeholders (Freeman, 1984).

The Rio Summit in 1992 (United Nations Conference on Environment and Development), highlighted the importance of sustainability, which soon became aligned with CSR

perspectives. This added to the growing momentum of CSR interest, which provoked the development of multiple standards. The field eventually became overwhelmed with tools, guidance and standards. This plethora of materials, lead to several institutional and multistakeholder initiatives in the 2000s to rationalise these CSR initiatives, to develop CSR management tools.

Business was beginning to be seen as accepting responsibility for global impacts. However, the 2008 economic crisis in the USA and Europe seemingly reduced the governmental pressure for CSR, as other priorities dominated the agenda (e.g. increasing jobs rather than promotion of 'good' jobs). In the USA and Europe the public is demanding more from business regarding their activities, while financial markets are asking for – and often being granted – less stringent legislation. Conversely, CSR is gaining importance in a number of developing countries experiencing high economic growth, especially in Latin America.

Several theories of CSR have also been developed (see Garriga & Melé, 2004; Lee, 2008, for summaries). Garriga and Melé (2004) classify the theories based on academic background: Corporate Social Performance; Shareholder Maximization; Stakeholder Theory; and Corporate Citizenship. These different origins lead to different initiative goals in practice, making it difficult to integrate these theories.

Corporate Social Performance (Carroll, 1979; Wood, 1991, 2010) attempts to comprehensively assess the impact of CSR policies. To do so, it builds a theoretical framework which -in theory- could help to evaluate CSR at different levels (institutional, organizational, and individual) and across different dimensions. Wood (2010) proposes a model of CSR whereby there are inputs (principles of social responsibility - legitimacy, public responsibility and managerial discretion), processes of social responsiveness (environ-mental scanning, stakeholder management, and issues/public management), and outputs (outcomes and impacts of performance - effects on people and organizations, on the natural and physical environment and stakeholders, and on social systems and institutions). However, the framework is difficult to implement in practice, which has led to criticism (Gond & Crane, 2010). Similarly, there have been no empirical,

comprehensive, tests of the model and it has proved difficult to compare social performance of different firms.

Shareholder Maximization (Friedman, 1962; McWilliams et al., 2006; McWilliams & Siegel, 2001) or Integration in Core Operations to increase profitability (Lee, 2008) is linked to Corporate Financial Performance and the 'business case' for CSR. Although CSR was initially discussed only in relation to ethics: businessmen had a 'social duty' to their societies; however, after Milton Friedman's (1962, 1970) critique of the concept, CSR initiatives became more scrutinised (Zweetsloot & Ripa, 2012). The American economist (1970), in a seminal article in The New York Times Magazine, "The Social Responsibility of Business is to Increase its Profits", challenged the fundamental concept of CSR. He criticised the 'mismanagement' of corporate executives engaged in these social initiatives claiming that companies would incur unnecessary financial costs for shareholders. It highlights elements including CSR as risk management, cost-effective, human resource management, and developing innovation capacity (EC, 2009a). This approach sees CSR as a strategic resource to improve the bottom line of a corporation (McWilliams et al. 2006, as cited in Lee, 2008). Recently, it has broadened to include both financial and social dimensions.

Stakeholder theory is based on the notion that enterprises should be responsive and engage with different agents who have interests –'a stake'- in the company's survival (Freeman, 1984; Phillips, Freeman & Wicks, 2003; Freeman, Wicks & Parmar, 2004), including trade unions, shareholders, workers, NGOs, consumers, governments and civil society, the environment, etc. These "can affect or are affected by the achievement of an organization's purpose", (Freeman, as cited in Perrini & Russo, 2010, p. 209). This approach addresses the issue of measurement and testing by identifying key actors and defining their positions and functions. Therefore, companies can structure their efforts towards stakeholder needs rather than a more overwhelming 'society'. There is no distinction between social and economic concerns, they are both driven by stakeholder needs and should be central to an organization's priorities.

Corporate Citizenship (Matten & Crane, 2005) is derived from political science. It focuses on the relationship between business and political institutions, specifically how enterprises can improve citizenship rights in communities where they are operating. It also explains institutional pressures and trends in the business world. Under this approach it is implied that companies accept responsibility for global corporate impacts, implementing international sustainability codes, policies or compliance mechanisms.

Recent approaches emphasize Human Rights and Sustainability (World Commission on Environment and Development, 1987). They take into account direct and indirect impacts of enterprises, and their products throughout their life-cycle, on society. Through this perspective it is argued that sustainability driven growth leads to new business opportunities (WBCSD & IFC, 2008). Examples include Green Jobs Economy and Decent Work which have entered the policy agenda over recent years (ILO, 2012a, 2012d).

In recent years, European countries began applying 'austerity measures' and business pushed for 'labour flexibility'. Working conditions in Western countries steadily declined. After growing CSR acceptance, economic crisis in Europe and EU threatens to end the promising future of CSR (Ripa & Herrero, 2012). Companies must now decide whether they want to play a more active role in solving global problems. The 'social side of the equation' in business is becoming dramatically relevant (Lee, 2008).

Following Ripa and Herrero (2012), CSR has become more contradictory during the last decade. On one hand, the concept has included more issues under its umbrella and became more global. On the other hand, it has become increasingly linked with financial self-interest: companies invest in CSR because they believe that it will eventually pay off (Lee, 2008). Performance-oriented studies have become prevalent, putting back ethics-driven research. In sum, there is 'less ideology' and 'more business case' (Kurucz, Colbert, & Wheeler, 2008). Citizens' expectations about socially responsible management of companies have also increased, while similar commitment from business has not been forthcoming. Consequently, citizens' trust for business has decreased (Casado, 2006), an example being the aftermath of the recent global economic crisis. Thus, the public has become sceptical

regarding CSR and public disclosures. Some factors contribute towards this trend: lack of operationalization of CSR (how to measure it accurately); contradictory practices including precarious jobs or restructuring and outsourcing (Aragón & Rocha, 2004); and self-accountability. Business understands this, with 74% of companies recognising that their CSR management does not satisfy their stakeholders (Business for Social Responsibility, in Casado, 2006).

NGOs and trade unions have also been critical of CSR. Several companies prefer to formally adopt and communicate responsible business principles, without translating them consequently into actions, therefore, CSR remains a superficial undertaking without much impact, which is known as 'green-washing' (Laufer, 2003). NGOs are concerned over 'green-washing', while trade unions, initially feared that CSR could be a way to eradicate collective bargaining (Aragón & Rocha, 2005). External CSR also can provoke conflicts within the company if sustainable policies are not taking into account the company's workers with the most precarious contracts (Arenas & Rodrigo, 2008).

CSR's rapid expansion came as a consequence of dramatic corporative misbehaviour in the 1980s and early 1990s. As such, if it is seen as unable to contribute to the pressing problems of the world such as social and human development, it will be perceived as a failure. There is a need to better link CSR with community impacts. Better CSR instruments and stronger requirements are necessary, including an assessment of their impact over Millennium Development Goals (MDG) or in the promotion of social welfare in the local communities in developing countries.

1.4.2. Internal CSR and OHS perspectives

The concept of CSR can apply internally or externally. In the latter, ethical considerations are targeted outside the group (e.g. the environment), while internally, CSR endeavours revolve around employees (HSE, 2005). The internal dimension of CSR includes human

resources management, health and safety at work, adaptation to change, management of environmental impacts and natural resources; while the external applies to local communities, business partners, suppliers and consumers, human rights, and global environmental concerns (EC, 2001). As CSR involves social concerns, this includes working conditions and occupational safety and health (OSH). For example, the European Agency for Safety and Health at Work organised a project on CSR and Safety and Health at Work (EU-OSHA, 2004). Furthermore, 'welfare in industries' as a concept was included in the International Labour Organization's Encyclopaedia of Occupational Health and Safety as early as 1930 (ILO, 1930).

Recent theoretical developments and research on CSR reveals an emerging global consensus on basic standards of corporate behaviour, which include several aspects of working conditions such as psychosocial hazards at work (Goel & Cragg, 2005; GRI, 2011; Paine, Deshpande, Margolis, & Bettcher, 2005). The European Commission (2003) further defined 11 key issues, after reviewing 17 CSR instruments: financial, economic development, consumer affairs, human rights, employee relations, community investment, bribery and corruption; biodiversity, air quality and noise pollution, energy and water, and waste and raw materials. An internal and external dimension of CSR was identified (EC, 2001). The internal dimension includes human resources management, health and safety at work, adaptation to change, management of environmental impacts and natural resources; while the external is based on local communities, business partners, suppliers and consumers, human rights, and global environmental concerns).

European Commission (2004, p. 7) recommended that contents of standards should be in accordance with "the core labour standards identified by the ILO and include child and forced labour, discrimination issues, freedom of association and collective bargaining, health and safety, wage levels, working times and disciplinary practices". As a consequence, the basic themes of CSR come from international labour standards and regulations (ILO fundamental conventions, UDHR, OECD Guidelines), and all these issues tend to be included in CSR instruments (Zweetsloot & Ripa, 2012).

For example, an OECD review (2009), based on the analysis of OECD guidelines, ILO Multinational Enterprises (MNE) Declaration and the Global Compact, identified 12 labour issues in major CSR instruments: freedom of association and collective bargaining; elimination of all forms of forced and compulsory labour; abolition of child labour; non-discrimination in respect of employment and occupation; general development; employment promotion; training; wages and benefits; hours of work; safety and health; social protection; industrial relations. These links exist at the international and national level. The Global Reporting Initiative (GRI) is an international tool used to measure CSR reporting. It considers 'labour practices and decent work' which includes OSH indicators as well as several other areas related to OSH, such as labour/management relations (ILO, 2012a, Zweetsloot & Ripa, 2012). The OSH component comprises four core indicators: practices on notification and recording of occupational incidents; description of OSH committees; rates of standard injury, lost days, absenteeism and fatalities; and description of initiatives on HIV/AIDS.

In the well-known report from the European Agency for Safety and Health at Work (EU-OSHA, 2004) on CSR and OSH, an overview is given of international CSR initiatives that are relevant to international and national policies to stimulate good safety and health at work. Another example is the World Health Organization's Healthy Workplaces Framework (WHO, 2010) which incorporates CSR as an element of a best practice comprehensive approach to managing occupational health and safety.

Summarising this trend, Montero et al. (2009) analysed 20 international CSR instruments, including the GRI, a draft of the ISO 26000 and the United Nations Global Compact (UNGC), assessing the importance of OSH within them. The authors found that 17 distinctly mention OSH while the remaining indicators are externally focused. Furthermore, in seven of these tools, OSH is a distinct principle rather than a subsection. Lastly, relating to performance evaluation, OSH tended to have a significant weighting. The authors thus suggest that "OSH can be considered a central element of CSR" (p.1442). Despite the comprehensive coverage

of labour issues in CSR instruments, employees' well-being in relation to CSR initiatives, has not always received adequate interest from research. The bidirectional influence between psychosocial conditions on organizations (job security, engagement, values, ideology, etc.) and CSR requires further exploration (Zweetsloot & Ripa, 2012).

All in all, CSR is rapidly changing the business context of safety and health at work. This will have implications for OSH strategies on global, national and company level. CSR opens up a number of new perspectives on OSH (Zwetsloot, 2003; Zwetsloot & Ripa, 2012), each of them creating opportunities for strengthening and further developing OSH:

- The positive approach for OSH
- The strategic perspective on OSH
- The stakeholder perspective
- The global perspective
- Integrated approaches to safety, health and well-being at work
- The broader range of possible intervention strategies

The positive approach suggests to connect positive outputs of OHS to CSR. Aspects such as healthy and productive workforce, decent work, well-being at work or work engagement are benefits derived of both a good CSR and OHS management system (Zwetsloot & Ripa, 2012). The strategic perspective assumes that CSR should be part of the business core principles and values as well as of the long-term strategy, and suggests that OHS might be considered as a strategic issue for the organization's future. OHS is usually strongly focused on the operational level, i.e. on solving concrete OSH problems at workplace level. This allows OHS not to be considered most of the times as a priority issue, especially in economically difficult times.

Zwetsloot and Ripa (2012) propose to implement a strategic OHS policy, connected to the CSR organization's strategy, including issues as visions for the future of the organization, long term goals, in order to define guiding principles. For instance, accident free workplaces (Aaltonen, 2007; Zwetsloot et al., 2013) or even to eliminate, or at least, to reduce 40

occupational diseases can be strategic commitments. Serious accidents at workplace may damage the company's reputation; on the other side, a healthy workforce is more productive, reduces costs of sickness absence and presenteeism and attracts talent easily.

The stakeholder perspective considers that OHS policy at company level must be implemented between management and workers in collaboration with experts, government, NGOs and social partners (employer and worker representatives), but also considering consumers, mass-media, investors, shareholders, OHS professionals, and health insurance companies (Jain, 2011; Zwetsloot & Ripa, 2012). A good OHS development in the organization requires, then, engagement and support from stakeholders.

The global perspective emphasizes how these ethical principles are universal and should be promoted everywhere. Furthermore, companies operating in developed countries are increasingly requested to manage their global supply chain in order to follow OHS and ethical principles. This is a key aspect in low-wage countries, whose companies often are affected by customer and social pressure to MNEs in developed countries, but also from international legislation (e.g., EU directives).

The integrated approach for safety, health and well-being at work suggests that the different areas of safety and health can strengthen each other, impacting on well-being, work-life balance, fundamental rights at work, etc. (Zwetsloot & Ripa, 2012). Integral approaches to OHS as Human Resource Management, Total Health Management (NIOSH, 2012), ILO's SOLVE (ILO, 2012b), WHO Healthy Workplaces Model (WHO, 2010) are therefore crucial for OHS and well-being.

Finally, Zwetsloot and Ripa (2012) propose several intervention strategies: a) power-force strategy (i.e., legal requirement to comply standards); b) conviction strategy (i.e., OHS is good for the business and for the people); c) ethical or value strategy (i.e. the acknowledgement that is the 'right thing to do'); d) interest strategy (i.e. using business case to convince managers that health and safety rewards economically, demands from

workers' organizations); intrinsic motivation strategy (i.e. managers with strong convictions and moral leaders).

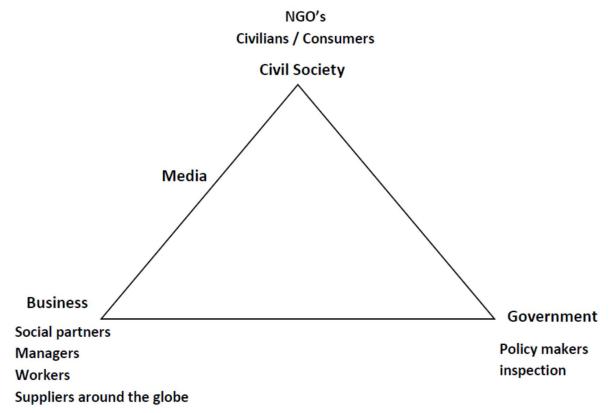


Figure 1.5. The 'new stakeholders' perspective on OSH and CSR. Adapted from Zwetsloot & Ripa (2012).

CSR implies that OSH becomes related to a much broader field: a global approach influenced by stakeholder demands and focused on the social dimension. New stakeholders make more complex the OHS decisions and force to connect them to CSR and business strategy, either to follow ethical principles and to reach business added-value. CSR opens new opportunities to manage OHS within the companies, to experiment with positive OHS concepts, assess business opportunities and connect to strategic long-term OHS and CSR strategies and development (Zwetsloot & Ripa, 2012).

1.4.3. Challenge of defining CSR and the 'defining-by-instruments' way out

While the study and practice of CSR is not new, there was an 'explosion' of CSR interest in the late 1990s and early 2000s (Carroll & Sabanah, 2010; Lee, 2008; Ripa & Herrero, 2012; Zwetsloot & Ripa, 2012). To develop and implement a CSR policy requires companies to periodically review their existing business practices and to adapt them accordingly. CSR standards, tools and instruments have been central to this 'explosion' of CSR interest. Hundreds of new standards appeared as business sought a 'golden rule' to implement CSR initiatives, with the influx at times leading to confusion among managers and CEOs about how to deal with emerging pressures.

Smith (as cited in Rasche, 2009) defined an 'accountability standard' as "predefined rules and procedures for organisational behaviour with regard to social and/or environmental issues that are often not required by law" (p. 194). These standards help companies "to integrate CSR values into their strategy and operations, either by setting out principles for responsible behaviour, providing a set of procedures and implementation steps, or offering indicators and measurement methodologies to evaluate and report on performance" (European Commission, 2004, p. 7). They are usually developed by third-parties and applied across sectors and geographic regions - although sometimes are company specific - and often monitored by independent international bodies (Rasche, 2009). Ripa and Herrero (2012) classified six main types: Codes of Behaviour and Ethics Principles; Auditing and Management systems; Sustainability and Social Reporting; Social and Environmental Investment Indexes; CSR reputation and social rankings; and Multi-method self-improvement instruments (Figure 1.7).



Figure 1.6. Types of CSR standards. Adapted from Ripa & Herrero (2012).

The relevance of these instruments, codes, and standards has rapidly increased since the pioneer CSR standards emerged, partly due to the lack of clarity and empirical testing of CSR definitions and theories. In essence, it is still not clear 'what CSR is', what are its causes and consequences or 'what is desirable or required' (Van Oosterhout & Heugens, 2008, p. 197-198). This descriptive side of CSR has risen as the 'frontline', a way of solving the normative problems of a partly-empty CSR definition, and detecting what dimensions the concept should have. Ethical standards describe CSR relative to how it applies in the real world (Van Oosterhout & Heugens, 2008). CSR would be either the 'inventory of CSR activities' (Basu & Palazzo, 2008) or the results we obtain from companies' social assessment through CSR instruments and standards. However, it is difficult to detect real differences among firms, and information can be manipulated (Basu & Palazzo, 2008).

Moreover, standards and instruments offer to build "a common understanding of central concepts such as 'sustainable development' and 'corporate social responsibility'" (Mazurkiewicz, 2004, p. 1), and serve as a "declaration on the universal rights and duties of business" (Hoffman and McNulty, 2009, as cited in Werhane, 2010, p. 695). Consequently, while in 1991 there were only embryonic attempts to develop CSR instruments, since then "a plethora of such principles have been developed" (Werhane, 2010, p. 695). Nowadays, there is a broad infrastructure in the CSR field, including instruments, standards, regulations and institutions (Waddock, 2008), but considerable overlap among them (Tate,

Ellram, & Kirchoff, 2010). Managers often have difficulties to select which specific standards they should implement, and they are guided by strategies as shareholders or institutional pressures, business association closeness, or 'as many as possible' standard strategy (Goel & Cragg, 2005; Rasche, 2009; Ripa & Herrero, 2012). We can find more than 300 ethics codes and CSR instruments (Mazurkiewicz, 2004; McKague & Cragg, 2007), mostly developed during the 'standardisation revolution' which happened between 1997 and 2002 (GRI in 1999; SA8000 in 2000; UNGC in 2000).

For some authors, this process is not more than a 'flight forward' (Van Oosterhout and Heugens, 2008), because this 'mess' of CSR instruments usually have not followed specific theories and dimensions, indeed CSR standards are at times an eclectic combination of them, and theories have often not been the basis for creating instruments. However, despite these concerns, standards and instruments are crucial for CSR. They influence behaviour in a "recognisable and reproducible" way (Goel & Cragg, 2005, p. 4), although more as self-improvement, through benchmarking, than as assessment tools. Their use supports the advancement of an ethical culture within the companies (Maon, Lindgreen, & Swaen, 2010) and offers firm-specific, accountable, publicly available, CSR information. They have progressively become part of CSR strategic management models (Porter & Kramer, 2006), or have included in their methodology, the principle-process-outcome approach (Wood, 2010) or the Plan-Do-Check-Act cycle (EC, 2009b).

In sum, this infrastructure fills "the numerous governance gaps for which hard law is either non-existent or is weakly enforced" (Rasche, 2010, p. 283). As a consequence, CSR instruments can contribute to improving working conditions and workers' health and safety. They could potentially help companies go further than meeting requirements of existing legislation, in new areas of interest such as employee well-being. Therefore, an analysis of the issues that are included in CSR standards becomes fundamental.

1.4.4. External pressures and corporate reputation as drivers of OHS and CSR

In the competitive world of business, it is essential to maintain and enhance both the business reputation and the influence in the global marketplace. Thus, the basic requirement 'not to harm people or degrade the environment' has increasingly become part of the CSR agenda and has, indeed, influenced many organisations (EU-OSHA, 2004). In this sense, the influence of stakeholders (either, primary stakeholders as consumers or employees, or secondary stakeholders as governments, community or NGOs) has been evident since they may positively influence CSR either within the companies or in SMEs subsidiaries of larger companies or MNEs (Park, Chidlow & Choi, 2014; Park & Ghauri, 2015). Stakeholders have expectations about organizational ethical performance in several and diverse areas, including social, labour, environmental and health and safety issues, but also they request to manage firms' supply chain in a sustainable way.

Linked to company's stakeholders, CSR became popular during 60s and 70s, but it was displaced from most multi-national companies during the 80s and early 90s. In the late 90s and early 2000s, supply chain management and corporate behaviour received increased attention from stakeholders and shareholders after labour and environmental scandals in the previous years that involved MNEs. This led to higher pressures from NGOs and international social movements and to a growing international awareness of global sustainability problems (Carroll & Sabanah, 2010; Lee, 2008; Ripa & Herrero, 2012). Meanwhile, shareholder activism and responsible investment has also played a role in developing CSR (Blowfield & Murray, 2008; Oh, Park and Ghauri, 2013). Thus, some companies responded by trying to send a strong message to the world: economic benefits without social concerns were no longer acceptable. Consequently, there were renewed efforts from companies to implement firstly CSR policies, and secondly to translate several of their labour, health and safety or environmental values to their suppliers.

1.4.4.1. Sustainability and pressures from external stakeholders (e.g., consumers, NGOs, media)

CSR evolved towards sustainable development, including the aim to identify, prevent and mitigate their possible adverse impacts (EC, 2011a). Moreover, businesses began to portray an image of responsibility for global impacts (Ripa & Herrero, 2012) and integration of social, environmental, ethical, human rights, and consumer concerns into business operations, in collaboration with stakeholders, is nowadays in the agenda (EC, 2002, EC, 2011a). Consequently, stakeholders have increasing expectations about firm's sustainable policies and supply chain management, demanding more accountability and monitoring, auditing and validation of information, including "the extent to which a firm justifies behaviors and actions across its extended supply chain to stakeholders" (Gualandris, Klassen, Vachon, & Kalchschmidt, 2015, p. 1).

The scrutiny of all aspects of business performance is not just a matter for enforcers but is intensively carried out by investors, non-governmental organisations (NGOs), society, and particularly business competitors. Stakeholder theory is based on the notion that enterprises should be responsive and engage with different agents who have interests –'a stake'- in the company's survival (Freeman, 1984; Phillips et al., 2003; Freeman et al., 2004). It assumes that there is a moral obligation to go beyond firm interests to integrate and balance stakeholder interests, therefore moral and transformational leaders as managers would be required (Verissimo & Lacerda, 2015). Meanwhile, shareholder-maximization and enlighted self-interest approaches for CSR (McWilliams & Siegel, 2001; McWilliams et al., 2006) defend that firm engages in CSR because they anticipate economic benefits as corporate reputation and better financial performance (Verissimo & Lacerda, 2015).

Muller and Kolk (2010) remind that external pressures on firms (e.g., pressure from stakeholder groups, competitive pressures from the market, regulatory pressures) could led to the implementation of more ethics programmes, though internal stakeholders as workers'

organizations and employees can also put significant pressure on reaching a higher level of OHS performance. Lynch-Wood, Williamson, and Jenkins (2009) call this the externally driven business case (EDBC) for CSR. Brower and Mahajan (2012), after conducting a 2000 to 2007 longitudinal study on 447 US firms by using KLD database (a database that includes health and safety performance), concluded that having a greater breadth of corporate social performance (CSP) could be caused by greater sensitivity to stakeholder demands due to firm's strategic emphasis on marketing, greater diversity of stakeholder demands and greater degree of scrutiny or risk from stakeholders. In their model, firm's degree of globalization, corporate brand or firm size could influence the implementation of CSP.

Sustainable or green supply chain management addresses these issues (Ahi & Searcy, 2013), although the social side of sustainability is not so often taken into account (Seuring, 2013). Moreover, several indicators have been proposed (Hutchins & Sutherland, 2008) and more presence of labour and ergonomic issues within sustainability policies has been claimed (Bolis, Brunoro & Sznelwar, 2014).

1.4.4.2. Sustainable supply chain management and client requirements

Largest companies are increasingly implementing CSR initiatives, according to their reporting data (KPMG, 2011) and pressures from these large companies –but also from any organization faced to a public scrutiny- can drive smaller companies within their supply chain to implement CSR initiatives, after being directly pressured (Nisim & Benjamin, 2008) or through ethical purchasing or selection of suppliers (Carter & Jennings, 2002; Reuter, Goebel & Foerstl, 2012). Smaller companies sometimes also try to implement sustainable policies in their supply chain. For instance, European SMEs try to transfer socially responsible behaviours to suppliers either in Europe or in developing countries, by using different strategies, tools, auditing and management systems (Ciliberti, De Haan, De Groot, & Pontrandolfo, 2011; Ciliberti, Pondtrandolfo & Scozi, 2008). After implementing

sustainable supply chain management, if a supplier does not meet CSR requirements, it could lose contracts with the company which wants to manage its supply chain in a sustainable way. For instance, this happened in China where an increasing number of Chinese companies were losing international orders after they were not meeting standards of environment, human rights or safety, and these pressures modified their CSR performance (Miao, Cai & Xu, 2012). Consequently, client requirements are a significant driver for suppliers in implementing CSR initiatives, as it has been found also regarding green initiatives in German automotive suppliers (Canïels, Gehrsitz & Semeijn, 2013). This was also found in the UK, where the inclusion of social requirements as preconditions to supply was found to increase the motivation to engage in CSR of more than half of the 103 UK SME owners and managers surveyed, although a quarter could be put off tendering and 12% thought that CSR criteria would be counter-productive (Baden, Harwood & Woodward, 2009).

1.4.4.3. Drivers for CSR

Stakeholder demands for sustainability and ethical accountability can impact directly in any large or small organization faced to public scrutiny, but also indirectly through sustainable supply chain management and requirements from a company to its subsidiaries or suppliers. Lynch-Wood et al. (2009) difference among drivers (e.g., factors determining the extent to which a firm needs to retain the approval of external stakeholders related to an ethical behaviour, as client requirements), the impact of these drivers (e.g., enhance or protect corporate reputation after meeting external expectations), and the response to these drivers (e.g., beyond compliance reaction, such as implementing OHS management policies). In the end, the organization's aim attempts to improve employers' external image and corporation reputation to the whole range of stakeholders and, specifically, to customers and clients (e.g., increasing customer and client loyalty and satisfaction). Customers may pay higher prices for products from ethical companies, attract better

qualified employees and gain competitive advantage when corporate reputation is higher, having an indirect link to financial performance (Orlitzky, Schmidt, & Rynes, 2003; Yoo & Pae, in press).

Improving corporate reputation and external image has been recognized in research as one of the main drivers of CSR (Aguinis & Glavas, 2012). For instance, Cetindamar (2007), after conducting a survey among 29 companies participating in the UN Global Compact, found that improving corporate image was one of the main drivers to join UN Global Compact. Moreover, increased corporate image altogether with better network opportunities were the major benefits for UNGC participant companies. In any case, to add company value, firms should be able to gain visibility or credit by internal or external stakeholders and to be able to capture or internalize the benefits of CSR programs, while co-creation and engagement and interactivity with stakeholders increase positive outcomes and reduce risks and harms (Jamali, El Dirani, & Harwood, 2015).

Therefore, organizations can implement (green) sustainable and responsible supply chain management because they try to gain legitimacy, reputation or improve their external image (Czinkota, Kaufmann & Basile, 2014). A mature sustainable supplier management can enhance operational performance and create competitive advantages, while protecting corporate reputation from negative media attention and consumer boycotts (Foerstl, Reuter, Hartmann, & Blome, 2010, Hoejmose, Roehrich & Grosvold, 2014). Stakeholder pressures after a company is being accused of unethical behaviour can provoke a change of corporate strategy to improve its ethical posture, therefore an effective and proactive response to stakeholders is fundamental to keep company's legitimacy, leading paradoxically to an improvement of the long-term corporate image (Eweje & Wu, 2010). Indeed, CSR can contribute to the security of the firm, reducing crime against more ethical companies due to a perceived higher firm legitimacy, stakeholder satisfaction or perception of fairness (Del Bosco & Misani, 2011). Zheng, Luo and Maksimov (2015) analysed 288 firms in China and found that they implement sustainability CSR when seek to gain legitimacy especially with insider stakeholders, while they implement philanthropic initiatives for outsider

stakeholders. Then, the "greater the likelihood of adverse shifts in the social perceptions of how an organisation is acting, the greater the desirability on the part of the organisation to attempt to manage these shifts in social perceptions" (O'Donovan, in Lynch-Wood et al., 2009, p. 55) by attempting to increase its legitimacy.

Furthermore, a joint action between a company and its supplier is necessary to increase reputation and external image of both organizations. This was found in China by Lee, Lau and Cheng (2013), after analysing 200 matched pairs of manufacturers and suppliers in the food, pharmaceutical, automotive and clothing industries, concluding that suppliers were involved by manufacturers in promoting employee rights protection, leading to improvements in corporate reputation and financial performance of both manufacturers and suppliers. Improving corporate reputation and image was also found to be either a driver or a benefit of implementing environmental management systems and practices in the UK (Elmualim, Valle & Kwawu, 2012) and Nigeria (Wood, Alo, & Clark, 2014). However, to build company reputation, CSR activities must be fit according to firm's size and main business activity (Brammer & Pavelin, 2004).

Size has been found a key factor to know the level of response to external pressures and to externally driven business case in sustainable policies, since most SMEs would not be affected by these pressures (Lynch-Wood et al., 2009). SMEs would be less visible either to stakeholders or to purchasers of virtuous ethical behaviour, reducing SMSs concerns for ethical actions (Lynch-Wood et al., 2009). SMEs impacts and harms are also fewer and less visible and noticeable than in larger organizations. While perhaps not intentionally less responsible, SMEs have struggled to adopt CSR. This is partly because a significant proportion of the work (topics, practices and measurements) has been designed for the idiosyncrasy of Multinational Enterprises (MNEs), especially for their application in developing countries (Zweetsloot & Ripa, 2012). Additionally, CSR requires more economic and managerial resources than SMEs usually have. Despite this, SMEs have closer

interactions with communities, and their local, ethical reputation is more critical to business.

These factors could help in the implementation and maintenance of responsible initiatives.

Lynch-Wood et al. (2009) after analyzing externally driven business case for environmental behaviours suggests several reasons to explain lower CSR practices in SMEs. Firstly, unethical SME firm's reputation and external image is less likely to be damaged after not meeting stakeholder expectations or not publishing CSR reports, while markets could not reward ethical efforts of SMEs. Secondly, SMEs have less need for legitimacy, since they suffer fewer impacts on their reputation from stakeholders. Thirdly, smaller organizations are less likely to have scale processes to regulate CSR and health and safety. Fourthly, customer pressures are higher when a supplier has a limited number of corporate customers, and lower when a supplier has many kinds of customers and consumers. Individual consumer power and corporate customer power is suggested to be higher in large firms, since most SMEs supply for other SMEs of the supply chain rather than for large corporate customers and consumers do not have in a SME a visible and common object to address their pressures: "a small firm with a limited number of customers will act under the influence of that power; a small firm with many customers of equal power will not feel any specific influence unless these customers act cooperatively" (Lynch-Wood et al., 2009, p. 59). This is shown in corporate boycotts, often addressed to large companies, where consumers have the potential to change manager behaviours.

In addition, customers, NGOs and society usually have less interest on smaller companies, many times they have even no knowledge of the SME and brand visibility, while public expectation and needs to protect corporate identity are stronger in larger companies than in SMEs. Visibility is linked to publicity and, consequently, more opportunities to threaten firm's legitimacy after stakeholder actions. Finally, Lynch-Wood et al. conclude that there is a market socially regulated by the external pressures which rewards virtuous behaviours and penalise harmful activities, however many smaller firms not experience these pressures and are mostly driven by regulation and not by voluntary practices: they produce smaller social impacts, have customers with limited power, have less visible brands, and

communities are less interested in them and provoke less external pressures. Furhermore, the largest companies could have a higher awareness in promoting safety initiatives (Cagno, Micheli, Masi, & Jacinto, 2013). Paradoxically, size effects and reputation can influence each other: Largest firms and financially successful firms are associated to become over-rated and to have a stronger social reputation. Meanwhile, firms' wrong doing against primary stakeholders enhances the probability of becoming under-rated (Liston-Heyes & Ceton, 2009).

Walsh, Mitchell, Jackson, & Beatty (2009), following the work of Brown et al, defined four types of corporate reputation: identity (held by organizational members); intended image (mental associations about the organization that organizational leaders want an important audience to hold); construed image (what organizational members believe that people think about organization); and reputation (mental associations about the organization actually held by others outside the organization). They define customer-based reputation as "the customer's overall evaluation of a firm based on his or her reactions to the firm's goods, services, communication activities, interactions with the firm and/or its representatives or constituencies (such as employees, management, or other customers) and/or known corporate activities" (p. 129), and includes socially responsible activities.

A sustainable management of supply chain can also lead to customer satisfaction and loyalty. Xu and Gursoy (2015) found, after analysing US hospitality goods and service firms, that social dimension of sustainability supply chain management can increase US customer satisfaction and positively influences customer loyalty. However, sources of what consumers perceive as ethical from a company are diverse and complex, including multiple and different areas (Brunk, 2010), and can evolve during different corporate stages of CSR development (Öberseder, Schlegelmilch, & Murphy, 2013).

Interestingly, this kind of relationship between clients and suppliers can improve CSR standards due to its collaborative nature between main company and its supply chain; then, companies can have a leadership role, disseminating sustainable practices and promoting

learning in a contributive or proactive way in their supply chain management (Gosling, Jia, Gong, & Brown, in press). Furthermore, this collaborative approach to sustainable supply chain is likely to increase supplier participation (Canïels et al., 2013), while investment in formal relationship building mechanisms and relational aspects between small suppliers and MNEs have been proposed in the food sector (Touboulic & Walker, 2015), and relational ties, knowledge transfer and absorptive capacity was claimed in Pakistani suppliers of Japanese firms (Khan & Nicholson, 2014).

1.4.4.4. Health and safety sustainable policies

OSH is an essential component of CSR as well as a requirement that may have legal implications if it is not assured (Leka et al., 2010). CSR requires to follow the law on working conditions and Occupational Health and Safety (OSH), but also extends beyond the law with voluntary initiatives, supplementing health and safety standards (Zwetsloot & Ripa, 2012). OSH has become a central part of CSR, appearing distinctly in CSR standards (Montero et al., 2009). These authors, after analyzing 20 international CSR standards, found that 17 distinctly mention OSH, and in seven of them OSH is a distinct principle.

The reputation of multinationals and their ability to receive public contracts from governments depends on keeping an accurate level of reputation throughout their supply chain. Consequently, any business operating with companies with a high reputation to protect can be required to follow CSR standards and OHS requirements (Sowden & Sinha, 2005), and companies often support OHS standards in the supply chain (Walters & James, 2011). Overall, good governance and safety is linked to organizational value-creation (e.g., 'safety pays and rewards'; Cagno et al., 2013) and aspects as an accurate work-life balance and ethical reputation is increasingly important for workers (Bevan, 2010), while bad governance has an economic impact (Boardman & Lyon, 2006).

CSR principles can be integrated in human resource management, moreover, OHS and psychosocial risk management can be a part of a strategic human resource management

which aligns strategic HR with strategic CSR (Jamali et al., 2015). This can add value for business, increasing ethical sensitivity, increased trust and loyalty and building positive employee attitudes, commitment and performance, and creating internal dynamics and outcomes that are difficult to duplicate and provide sustainable competitive advantage (Jamali et al, 2015). Human resource systems (e.g., pay and reward, training and development, etc.) also can either create a competitive advantage by promoting the development of an ethical climate among stakeholders or being a source of vulnerability by destructing firm's ethical climate (Manroop, 2015).

Consequently, client or consumer requirements can lead to OHS management (Law, Chan & Pun, 2006). Raj-Reichert (2013) analysed supply chains of electronic MNEs regarding health and safety dissemination and found that self-regulatory nature of standards and codes produce self-disciplinary effects on safety and health managers, being able to spread health and safety practices in the supply chain. Furthermore, OHS certifications, as OHSAS 18001, are seen as a way to mantain a socially responsible position (Sánchez-Toledo et al., 2009) and improve corporate reputation. Companies expect that managing health and safety appropriately could lead to a public perception of social responsibility and to a better firm's image. Managers' perception of this idea has been tested favourably on companies certified with OHSAS 18001 (Fernández-Muñiz et al., 2009), and on 136 EU SMEs (Harms-Ringdahl, Jansson, & Malmen, 2000), although other studies attribute it a secondary role as a driver of OHS (Kok & van Steen, 1994). In fact, firm's will to improve corporate reputation could promote OHS, as tested in 18 Northern Ireland managers' perceptions (Moore, Parahoo & Fleming, 2011) and 106 Norwegian transport sector managers' attitudes to OHS (Njå & Fjelltun, 2010).

However, the implementation of CSR should be carried out using a structured approach, in a relevant way to the specific organisation (EU-OSHA, 2004). A comprehensive OHS management system is essential, including aspects as analysis of causes of sickness, risk evaluation, measures to return to work, existence of a documented OHS policy or

involvement of line-management, supervisors or high-level meetings. Regarding psychosocial risk management, procedures to deal with work-related stress, bullying and harassment, violence at work or work organization, working time arrangements and training and development are key aspects to reduce risks and improve workers' well-being.

1.4.4.5. Sustainable and responsible policies pay off

In last decades, research turned to formalising the potential benefits for companies investing in CSR in an attempt to garner support for the concept and overcome corporate reluctance (Zweetsloot & Ripa, 2012). In this light, a business case for CSR was developed (Carroll & Shabana, 2010). This put forward the argument that there is a relationship between corporate financial performance (CFP) and corporate social performance (CSP) (Lee, 2008; Margolis & Walsh, 2003). Nowadays, there is an understanding that CSR is linked to the innovativeness and competitiveness of a firm (Zweetsloot & Ripa, 2012), as illustrated by a European Competitiveness Report in 2008 (EC, 2009a). According to this report, aspects such as social sustainability or a diverse workforce positively impact on innovation and competitiveness. Lee (2008) suggests that this reflects the shift of CSR as a macro level issue to an organizational level, where being responsible has to be justified financially. As such the emerging driver for CSR is the notion that CSR investment will eventually pay off. Indeed it has been noted that: "if Friedman were to revisit the subject today, 'he would find much less to concern him" (Vogel 2007, in Lee, 2008, p. 55). Furthermore, this social-financial link has recently seen increased focus.

Aguinis and Glavas (2012), after reviewing 181 articles in 17 selected journals, found as a consistent finding at institutional-level 'an improvement in a firm's reputation' as an outcome of CSR. It leads to more favourable evaluations of the company and its products and more loyalty by consumers. Aspects as customer and consumer satisfaction, identification, trust and their behaviour could be influenced. Walsh et al. (2009) defended that corporate reputation could have a stronger effect on service companies rather than manufacturing ones, due to their higher exposure to customers. Then, Walsh et al. (2009)

concluded that a good corporate reputation increase customer satisfaction, trust, retention and loyalty. Finally, Wagner, Bicen and Zachary (2008), in a study in the retail industry, found that local working conditions (including having employees working in an unsafe or an unclean environment) was one of the three top irresponsible behaviours for consumers.

Although the link between social performance and financial performance could be intuitive, assessing that link has been extremely complicated (Zweetsloot & Ripa, 2012). It was not until two influential meta-reviews of 127 (Margolis & Walsh, 2003) and 52 empirical studies (Orlitzky, et al., 2003) that some positive conclusions emerged. Other studies have also been promising. Webley and More (2003) found that organizations practicing an ethical code, outperformed organizations without such a code. Evidence also supports the inverse. Carroll and Shabana (2010) also reviewed this relationship, explaining previous negative associations on the basis of contextual factors and idiosyncrasies of companies.

Other outputs from social performance could be competitive success (Gallardo-Vázquez & Sanchez-Hernandez, 2014), enhance value or protecting destroy of value (Chollet & Cellier, in press), and better financial performance, following the metaanalysis of 52 studies by Orlitzky et al. (2003). They found a positive relationship between CSR and financial outcomes. This relationship was stronger when reputation was used as a proxy for corporate social responsibility (Aguinis & Glavas, 2012). There could be a virtuous cycle where firms with better financial performance also exhibit better social performance and this social performance also lead to a higher financial performance, although the effect of reputation in social performance is less clear in research (Yoo & Pae, in press). Yoo and Pae (in press) concluded that companies with high reputation which win prestigious business awards make charitable contributions to enhance long-term value of the company, rather than short-term goals. Coulmont and Berthelot (2015) found a relationship of French companies listed on the SBF 250 index affiliated to the UN Global Compact and a higher investors' value and least operational risk. They conclude that this could be credible signal for investors of the future cash flows due to a higher consideration of human rights, labour,

environment or anti-corruption considerations in its daily operations. Nevertheless, authors as Lu, Chau, Wang, & Pan (2014), after reviewing 84 empirical research articles, found that relationship between corporate social performance and corporate financial performance remains inconclusive and changes over time, so they suggest to contextualize that link in its specified community.

Liston-Heyes and Ceton (2009) found a discrepancy between actual and perceived corporate social performance, what means that CSP reputation do not often match with reality. Largest firms and financially successful firms are associated to become over-rated and to have a stronger social reputation. Meanwhile, firms' wrong doing against primary stakeholders enhances the probability of becoming under-rated. It seems that "business community punishes social irresponsibilities to primary stakeholders harshly" (p. 291). National context and regulation environment, industry and firm size have been pointed out to moderate this relationship between company's external image and implementation of CSR (Aguinis & Glavas, 2012), but it has not been tested at European level including concerns of OHS and main drivers, and has never been analyzed its influence on psychosocial risk management.

Vogel (2007) argues that CSR is good for companies only under certain conditions, including, coherent institutional support and a big enough market for virtues. Accordingly, the question is not "Does corporate responsibility pay", but "Under what condition does corporate responsibility pay" (Blowfield & Murray, 2008), taking into account relevant variables including market, and industry (Carroll & Shabana, 2010). As Vogel (2007) explains "CSR is best understood as a niche rather than a generic strategy: it makes business sense for some firms in some areas under some circumstances" (p. 3). As the author explains, the paradox is that "[t]here is a place in the market economy for responsible firms. But there is also a large place for their less responsible competitors" (p. 3).

1.4.5. Conclusion

CSR is a hot topic today, while it includes safety and health at work. The development of both OHS and CSR requires a continuous communication and engagement with stakeholders, both NGOs and mass media and traditional OHS stakeholders (e.g., employees, employees' and employees' organization, labour inspection).

CSR allows to develop strategic approaches to promote health and safety, increasing organization's reputation and engagement with stakeholders. Managers, employees, safety and health professionals, and policy makers must involve to promote actions and go beyond fancy communication (Zwetsloot & Ripa, 2012).

2. From a global concern to the human development: Psychosocial work environment

To develop this chapter, a review of the prevalence of psychosocial hazards and work-related stress around the world was carried out and is presented in the next sections of this chapter.

2.1. Prevalence of work-related stress and psychosocial risks around the world

Houtman and Jettingoff in a report for the WHO (2007) affirmed that "due to globalisation and changes in the nature of work, people in developing countries have to deal with increasing work-related stress" (p. 4), although as a report by the European Safety Agency states (EU-OSHA, 2007), these emerging risks also are also appearing in developed countries. Indeed, research shows that psychosocial risks and work-related stress are a global issue with global health impacts. More than 2 million people die each year due to occupational diseases (ILO, 2011), and health problems aggravated or caused by work-related stress and psychosocial risks, such as mental health difficulties, cardiovascular diseases and MSD injuries, which are the three leading causes of disability (ILO, 2000). Furthermore, there are 160 million cases each year of non-fatal work-related diseases (ILO, 2013a). The European Working Conditions Survey and the European Social Survey have provided data on the situation of psychosocial hazards and work-related stress in Europe.

The 5th European Working Conditions Survey (EWCS, 44,000 respondents) in 2010 (Eurofund, 2012a) analysed the prevalence of psychosocial hazards in Europe. According to

this survey, 59 per cent of workers stated that they worked at high speed, 18 per cent were dissatisfied with their work-life balance and 30 per cent had no autonomy to organize their job tasks, speed and breaks. Taking into account that psychosocial risks are related to the onset of health problems, it is not surprising that 23 per cent of workers reported low levels of well-being, 6 per cent were likely to suffer from depression, and 40 per cent of workers in Europe reported having been absent from work due to sickness (Eurofund, 2012b). This tendency is reproduced in both sexes: 27 per cent of women and 26 per cent of men reported work-related stress, while musculoskeletal disorders are reported by 61% of women and 58% of men, and poor mental well-being by 22 per cent of women and 17 per cent of men (Eurofund & EU-OSHA, 2014). According to the EU Labour Force Survey, between 1999 and 2007, nearly 28 % of respondents, reported that their mental health had been affected by exposure to psychosocial risks (EU-OSHA, 2014). Poor health and wellbeing indicators are experienced by workers in lower occupational classes and workers in large companies, while countries as Lithuania (41 per cent), Czech Republic (32 per cent), Latvia (32 per cent) and Croatia (31 per cent) showed poorer mental health (Eurofund & EU-OSHA, 2014). Self-employed workers showed poorer work-life balance, but higher job security and meaningful work (Eurofund & EU-OSHA, 2014).

At the country level, the data suggests that the problem distributes homogenously in most countries. An increase in work-related stress was found in Belgium (from 2007 to 2010), Bulgaria (from 2005 to 2010), Ireland (2003 to 2009), the Netherlands (from 2007 to 2010) or France (from 2003 to 2010), although not in Finland (Van Gyes & Szekér, 2013). An increase in the level of work-related stress between 1991 and 2011 was also found in others non-european countries such as Canada (Duxbury & Higgins, 2012a, 2012b). Global economic crisis could be influencing this trend (ILO, 2012b, 2013b). Impact of economic crisis between 2008 and 2010 in the EU caused a reduction in work intensity in some sectors due to a lower demand, although work intensity increased notably in Ireland, Spain, and the UK from 2008 to 2012 (Eurofund, 2013a). Job insecurity has also been shown problematic. 16 per cent of EU workers expected to lose their job within six months, a figure than only increased in two points between 2008 and 2012, although this increase have been 62

much more higher in countries as Lithuania or Ireland. Higher levels of job insecurity appear in elementary occupations, operators and skilled workers in industry and construction, while workers in public sector showed higher job security (Eurofund & EU-OSHA, 2014).

In the UK, according to the 2013/14 Labour Force Survey, an estimated 487,000 individuals (39% of all work-related illnesses) believed that they were experiencing work-related stress, depression or anxiety (HSE, 2014). Female workers had a higher incidence rate and occupations as human health and social work, education and public administration and defence (e.g., in health professionals, nurses, teaching and educational professionals, and health and social care associate professionals), and workers in organizations over 250 employees had the highest prevalence rate (HSE, 2014). In the 2010 UK Psychosocial Working Conditions survey, workers stating that their job was very or extremely stressful rose up around 15 per cent (HSE, 2012). In countries such as Spain, the 7th National Survey of Working Conditions carried out by the National Institute for Safety and Hygiene at Work (n= 8,892 interviews) found that 17.2% of workers in 2011 reported stress, anxiety or nervousness (20.4% of females), and 4.9% suffered from depression or sadness (6.5% of females), while 23.9 per cent believed that they were coping with too much work, although more workers stated supervisor and co-workers support than in 2005 (INSHT, 2012).

In Canada, a national study conducted in 2011 (n=25,021) showed that high perceived stress was reported by 57 per cent of employees, high depressed mood by 36 per cent and poor self-perceived health by 46 per cent. Additionally, 65 per cent of workers worked more than 45 hours per week. All these indicators have become worse since 2001 (Duxbury & Higgins, 2012a, 2012b). Other studies in Canada offer a lower but significant rate of work-related stress. In 2010, 27% of workers reported that their daily life was highly stressful (Crompton, 2011), while other study (n=22,118) found that 31 per cent of workers suffered from chronic work-related stress (Dewa, Lin, Kooehoon & Goldner, 2007). In the USA, despite of the relative lack of rigorous national surveys, higher rates of work-related stress

were also found. The series Stress in America™ surveys analyse each year the evolution of work-related stress. According to this survey (n=3,068), it was found that 60 per cent of workers believed that work was a main or somewhat significant source of stress in 2014; 25 per cent of workers said stress impacted on their physical health and 28 per cent in their mental health, a significant decrease from 2011 (APA, 2015). In addition, US workers described their symptoms of stress such as feeling irritable/angry (37 per cent), being nervious/anxious (35 per cent), having lack of interest/motivation (34 per cent), feeling fatigued (32 per cent) or being depressed (32 per cent) (APA, 2015). Financial stress is also a significant problem in the USA. Nearly three quarters of adults (72 per cent) felt stressed about money in 2014 and almost a quarter (22 per cent) experienced extreme stress about money, while 26 per cent felt stressed about money most or all of the time. Women experienced a higher rate of stress, more symptoms and higher stress due to economic reasons and family responsibilities (APA, 2015). Overtime is another problematic issue in the USA, as was found in 2010 NIOSH occupational health supplement (Alterman, Luckhaupt, Dahlhamer, Ward, & Calvert, 2013a, 2013b). In this survey, 18.7 per cent of workers reported to work 48 hours or more per week. This could interfere work-home balance, since 16.3 per cent of workers believed that was not easy to combine work with family responsibilities (Alterman et al., 2013a, Alterman et al., 2013b).

In Latin America, despite of the traditional lack of data, several countries have recently conducted national surveys, showing similar results (e.g., Argentina, Chile, Panama, Costa Rica, Nicaragua, El Salvador, Honduras, Guatemala, Colombia). In Argentina, the First National Survey on Employment, Work Conditions, Labour Environment and Health (n=7,195 workers) showed that over forty per cent of the workers were affected for at least one psychosocial hazard (Cornelio, 2013). Additionally, workers exposed to psychosocial hazards were found to have a higher rate of occupational diseases and accidents than non-exposed workers (Cornelio, Alfredo, Itati-Iñiguez & Sapoznik, 2012). In Chile, 30 per cent of women and 16.7 per cent of men reported feeling melancholic, sad or depressed for a period of two weeks the previous year in the first national survey of Employment, Work, Health and Quality of life conducted to 9.503 Chilean workers developed by the Ministry of 64

Health (MINSAL, DT & ISL, 2011), while over 30 per cent found their works emotionally exhausting (Ministerio de Salud, 2006). In Central America, the First Central American Survey on Working Conditions and Health was conducted in Panama, Costa Rica, Nicaragua, El Salvador, Honduras, Guatemala (n=12,024). According to this survey, 12 to 16 per cent of workers in Costa Rica, Nicaragua, El Salvador, Honduras and Guatemala reported that they felt constantly under stress at work, while 9 to 13 per cent felt sad or depressed (Benavides et al., 2014; OISS & INSHT, 2012).

Long working hours and work-related stress in also a problem in Australia and Asia. Over 40 per cent of Australian workers were doing overtime and 18 per cent worked more than 48 hours per week (Dollard et al., 2012). Finally, around 5 per cent of serious claims of disease were due to mental stress in 2012-13 (Safe Work Australia, 2015a). In Japan, the Survey on the Prevention of Industrial Accidents (MHLW, 2011) found that 32.4 per cent of employees reported that they suffered from strong anxiety, worry and stress in the previous year, while 8.1 per cent of establishments included employees' leave due to mental health problems for at least one month, according to Survey on State of Employees' Health (MHLW, 2012). Causes such as work content, workload or relationship with co-workers were reported to be causing work-related stress (Hara, 2014). In Korea, in a comparison between the first and second Korean Working Conditions Survey (Kim, Park, Rhee, & Kim, 2015), the proportion of long working hours decreased from 45% in 2006 to 43.9% in 2010, as well the work pace intensity and the work developed with strict deadlines. In a 2006 survey, work-related stress affected 18.4 per cent of male and 15.1 per cent of female employees (Choi & Ha, 2009). Depression and anxiety disorders also decreased from 5.4 per cent in 2006 to 2.3 per cent in 2010. However, in Asia and Africa most countries lack data about work-related stress, with exceptions such as Thailand (Yiengprugsawan et al., 2015) and South Africa (Peltzer, Shisana, Zuma, Van Wyk, & Zungu-Dirwayi, 2009). This is because most developing countries lack national surveys and surveillance systems assessing workrelated stress and psychosocial risks, although a growing interest is beginning to flourish. For instance, the first African interministerial conference on health "New and emerging

envirionmental threats to human health" committed to tackle stress (Kortum, Leka & Cox, 2011). Following Kortum, Leka and Cox (2010), decision-makers in most developing countries still perceive occupational health as a luxury, which leads to poor data and reseach and lack of political action and enforcement. Kortum et al. (2010), conducting focus groups and interviews with experts and a two-round Delphi panel, concluded that there was a network of worldwide experts with a common understanding on stress and knowledge about intervention approaches (see table2.1).

Table 2.1. Occupational health & safety priorities in industrialized and developing countries. Results from Delphi surveys

Occupational health & safety priorities		
Priorities in developing countries		
Injury/accident prevention		
Monitoring and surveillance of psychosocial		
risks, work-related stress & violence &		
harassment at work; substance abuse and		
risky behaviours		
Capacity building		
Infectious diseases		
Musculo-skeletal disorders		
Chemicals, noise, and biological agents		
Safety culture & health & safety standards		
Comprehensive legislatory & policy framework		
to include the informal sector & enforcement of		
health & safety		
Occupational health services & improvement of		
healthcare, incl. primary healthcare		
Registration, surveillance and data collection on		
workers' health		

Note: Adapted from Kortum Leka and Cox (2010).

In developing countries, experts usually focus on the importance of a macro-level approach to work-related stress, including political conflicts, poverty, job insecurity, unemployment, social, political, economic, cultural and religious structures, the prevalence of HIV/AIDS, and the impact of globalization (Kortum et al., 2010). Gender inequalities, industrial pollution, infectious diseases, poor hygiene and sanitation, poor nutrition, poor living conditions,

inadequate transportation systems, poverty, unemployment, under and self-employment, precariousness of working condition with work-related stress were other problems reflected by the WHO, although on the other side developing countries could have higher social support from family and the community (WHO, 2007).

Following Kortum et al. (2010), experts point out that workplace issues and occupational risks requiring more attention were injury and accident prevention (83%), psychosocial risks (68%), work-related stress (62%), violence and harassment at work (53%) and infectious diseases (53%, the issue more cited in Africa), substance abuse and risky behaviours (100% in Africa, less than 50% in the others), and musculoskeletal disorders (82% in Western-Pacific, 60% in Eastern Mediterranean; probably due to these countries are suffering rapid industrialization).

Table 2.2. Barriers to addressing causes/solutions. Preliminary focus group findings

General barriers	Solutions proposed
Lack of resources & research	Employers can facilitate
Authorities/employers don't act (lack of political	Networking (learn about grey literature from
decisions & enforcement)	emerging economies)
Lack of enforcement	Use experts available
Boundaries (work/non-work)	Atrengthen legislation
Lack of understanding of psychosocial risks	Involve workers/communities
Fears of unionization (by employers)	Address informal sector workers incl migrants
	and domestic workers
Improvements don't reach ordinary workers	Interventions/tools (redefine/refine
	approaches)
Lack of action (we only diagnose)	Consider differences within & between
	countries
Basic needs not addressed	Multi-nationals want to save their image
Lack of skills concerning new forms of work	Need for health statistics
Need for higher focus on prevention in H&S in	Respect for traditional ways of creating
general	livelihoods

Note: Adapted Kortum, Leka and Cox (2010).

Experts considered that the most important psychosocial risks were lack of control over work process (100% Africa and Americas); time pressure and high job demands (high in

America and Western-Pacific); discrepancies between abilities, skills, job demands and expectations (Eastern Mediterranean 80%, just 16% of Western-Pacific sample); poor management practices (Western-Pacific 100%); poor physical conditions (Europeans 58% and Western-pacific 50%); job insecurity (Africa 100%, South-East Asian 70%, and Western-Pacific 66%); precarious employment (Europeans 50%, Africa 32%, Western-Pacific 32%); and conflict in interpersonal relationships (Eastern Mediterranean 60% and WP 50%). Main barriers and solutions proposed are shown in Table 2.2.

As this sections exposes, there is a lack of international coherent and comparable data on psychosocial risks and work-related stress. Dollard, Skinner, Tuckey, and Bailey (2007) reviewed 35 national surveillance systems about psychosocial risks in 20 countries and four multi-country systems. They suggested to put a higher focus on national surveillance and international benchmarking of labour conditions, with a higher cooperation of stakeholders and flexibility to identify and assess emerging riks factors and groups. They also defend the inclusion in surveillance systems of indicators related to emotional demands; workplace bullying, harassment, and violence; exposure to acute stressors; organisational justice issues; the impact of organisational change, including downsizing, mergers, and globalization of work and companies; and positive psychological states of well-being and engagement; as well to external and upstream factors.

2.2. Economic impact

The economic impact of work-related accidents and diseases has been estimated to represent an annual 4 per cent loss in global gross domestic product (GDP), or about US\$2.8 trillion in direct and indirect costs of injuries and diseases (ILO, 2013b). Indeed, between 50 and 60 per cent of all lost working days could be linked to work-related stress (EU-OSHA, 2000). Aspects such as regulation of working conditions or health and safety systems could influence working conditions and, additionally, increase mortality and economic costs of work-related stress (Goh, Pfeffer & Zenios, 2015). The European

Commission estimated in 2002 that the costs of work-related stress in the EU-15 was €20 billion a year, a 10 per cent of the total cost of all work-related illnesses (EU-OSHA, 2014). A European report (Matrix, 2013) stimated that the cost in Europe of work-related depression, including abseenteism, presenteeism, loss of productivity and health and social care costs was €617 billion annually. Another study conducted by Sobocki et al. in 2004 (EU-OSHA, 2014) in 28 European countries estimated that the economic cost of depression was of €118 billion, 1 per cent of Europe's GDP, although this figure has been raised up to €240 billion per year for mental health disorders according to the European Network for Work Health Promotion. Costs of cardiovascular diseases was estimated to be in 2009 around €196 billion a year (9 per cent of total health expenditure), while MSDs costs could be 2 per cent of European GDP (EU-OSHA, 2014). When considering direct and indirect costs of psychosocial risks and work-related stress, several issues have been considered: absenteeism, accidents, administrative costs, compensation costs, early death and early retirement, health and medical costs, legal costs, loss of earnings, medication and rehabilitation costs, overstaffing to compensate, presenteeism, production loss, turnover and rehiring costs (EU-OSHA, 2014).

At national level, in the UK, the total number of working days lost due to work-related stress, depression or anxiety was 11.3 million in 2013/14, an average of 23 days per case of stress, depression or anxiety (HSE, 2014). Another source of data, THOR-GP, reports that 59% of all reported days of sickness are caused by mental ill health (HSE, 2014). Psychological conditions accounted for 40% of all new sickness compensation claims in Sweden in 2012, according to the Swedish Social Insurance Authority (Leka et al., 2014). The estimated average absence per case of stress, depression or anxiety between 2011 and 2013 was of 39 days lost, 14 days more than the 25-day average for all sickness absence cases (HSE, 2014). Anxiety, stress and neurotic disorders were also associated in the USA with longer periods of lost work days than non-fatal injuries and illnesses (25 days vs 6 days on average) than non-fatal injuries and illnesses (NIOSH, 2004). In France, coronary heart diseases and mental disorders caused by job strain were stimated to cost from 1.8 to

3 billion euros to the national economy (Sultan-Taïeb, Chastang, Mansouri, & Niedhammer, 2013). In Germany, total cost of job strain was stimated to be €29.2 billion annually, including direct and indirect costs, such as lost working years (EU-OSHA, 2014). In Spain, between 11 and 27 per cent of mental disorders could be caused by working conditions in 2010, with a health cost between €150 and €372 million and 2.78 million days lost with a cost of €170.96 million in days lost and between €63.9 and €78.9 million in years of potential life lost (UGT, 2013). In Canada, the cost of lost working time due to work-related stress was as high as \$12 billion per year, increasing up to \$20 billion annually when including the costs of mental health for employers (Statistics Canada, 2009).

In the USA, Goh and colleagues (2015) estimated that 120,000 deaths per year and 5 to 8% of healthcare costs in 2008 were associated to the working conditions. This model only considered the direct association between psychosocial factors and workplace practices and healthcare costs and morbidity, not including reduced employee productivity, absenteeism or worker compensation. According to the model, work conditions include issues such as provision of health insurance, unemployment and layoffs, job insecurity, working long hours, shift work, existence of work-family conflict, job control, job demands, social support and fairness and organizational justice. In their results, low job control would case around 31,000 deaths annually, with an estimated cost of \$11 billion. Job insecurity would case 29,000 deaths per year, with a cost of \$16 billions, while shift work would cause 12,000 deaths per year, with a cost of \$12 billion. Other costs would be: long hours (\$13 billion), work-family conflict (\$24 billion), high demands (\$48 billion), low support (\$9 billion) and perception of organizational unfairness (\$16 billion). However, higher mortality was associated to the lack of health insurance and unemployment and layoffs. When all factors are combined, more than 120.000 deaths per year could be caused by these factors, with an estimate of total costs incurred in excess of \$180 billion, a figure comparable to the mortality of cerebrobascular diseases or to the costs of diabetes. Mortality and costs were higher in 2010 than in 2006, probably due to the influence of economic crisis.

In Australia, Safe Work Australia estimated that around 5 per cent of total serious claims were caused by mental stress in 2013-14 (Safe Work Australia, 2015a). In 2008-09, the cost of mental stress was 5.3 billion annually, 9 per cent of the total cost of 60.6 billion for injuries and diseases although they are only the 4 per cent of the total cases (Safe Work Australia, 2012). Mental stress claims are the most expensive claims due to a longer sickness absence, including more time lost and higher costs per worker than other claims, despite their acceptance rate is lower than for other claims (Safe Work Australia, 2013). For instance, in 2011-12, serious claims caused by mental stress had a median time lost of 15.6 weeks, compared to the median time of 5.4 of all other serious claims (Safe Work Australia, 2014). Depression costs could rise up to AUD\$8 billion per annum; AUD\$693 million per annum of this would be caused by job strain and bullying, while higher costs are associated to harassment and bullying and work pressure (Dollard et al., 2012).

2.3. Human capabilities and development

As we have seen, psychosocial hazards are related to deficient working conditions and can impair workers' health. Their negative effects take place regardless of country, either in developed or developing countries. However, worse effects could be expected in developing countries with high rates of informal jobs and a lack of health and safety legal frameworks. On the other hand, a decent working environment also can contribute to human and social development (Sen, 1999). Furthermore, by cultivating decent working conditions also can be improved community's health, either in developed or developing countries.

2.3.1 The Capabilities Approach

To promote human and social development, the Human Development Index was designed by the United Nations Development Program (UNDP) in 1990 to be a simple measure of the availability of the essential choices needed for human development (Engineer, Roy, & Fink, 2010). In the first annual Human Development report, human development was considered as a way to reach greater human well-being (Stanton, 2007). The term capability refers to "a person or group's freedom to promote or achieve valuable functionings" (Alkire, 2005, p. 121). A capability reflects a person's ability to achieve a given functioning or what a person is able to do or be (Sen, 2005). Therefore, a real wealth and development of a nation would imply the expansion of individuals' capabilities or freedoms (Sen, 2003).

The formulation of the capability approach has two central parts: functioning (valuable beings and doings), and freedom (Alkire, 2005). The term functioning covers the different activities and situations people recognize to be important for them. The term freedom is used to refer to the extent to which the person is free to choose particular levels of functionings (Sen, 2005). The objective of development is then to expand the capabilities set of each individual (Stewart, 2013). Seeing human development under this approach helps to identify the possibility that two persons can have very different substantial opportunities to reach their desired goals even when they have exactly the same set of means. Ends like reaching a decent standard of living is emphasized over means (e.g. income per capita) (Stanton, 2007).

2.3.2. Enhancing Capabilities: The Role of Organizations

Institutions have to help people enhance their dignity by providing them with the opportunity to develop their capabilities freely (Nussbaum, 2000). As such, the capabilities approach has been studied in the organizational arena by, for instance, re-examining workplace equality (Cornelius & Gagnon, 2004; Gagnon & Cornelius, 2006), proposing a 72

new view of talent management (Downs & Swailes, 2013), understanding participative governance (Collier & Esteban, 1999), linking business and human development issues through CSR (Cornelius, Todres, Janjuha-Jivraj, Woods, & Wallace, 2008; Lompo & Trani, 2013; Parra, 2008; Renouard, 2011; Thompson, 2008), and analyzing how companies promote employees' capabilities to use family-friendly policies (Den Dulk et al., 2011; B. Hobson & Fahlen, 2009; Barbara Hobson, Fahlén, & Takács, 2011). A relatively common aspect of this research is that organizations have a significant impact on enabling workers' ability to exercise choice over their work environment.

The capabilities approach holds the potential of specific applicability to the field of organizations. Therefore, as it is possible to analyse the country-level of human development by studying the capabilities of their citizens, it would be also possible to analyse whether a company has organized the work environment in such ways that allows workers to develop a variety of human capabilities (Vogt, 2005). From this perspective, the enabling role of organizational efforts would be particularly related with the notion of instrumental freedoms as proposed by Sen (1999) such as political and civil freedoms, economic facilities, social opportunities enabling education and self-development, accountable and transparent political and economic processes and freedom of information, and protective security enabling personal safety.

A person's capability is determined by conversion factors, which include not only personal characteristics, such as mental and physical conditions, but also social characteristics, including social norms and institutions. In this sense, organizations' policies are a social conversion factor enabling or constraining people's freedom to achieve valuable funtionings (Fagan and Walthery, 2011). This means that ethical companies are able to provide employees with the proper work environment, so that they could develop talents in a way that would give them a sense of dignity.

2.3.3. Living a healthy life: Psychosocial hazards as conversion factors at work

Several efforts have been carried out to list a set of fundamental capabilities (i.e. Nussbaum, 1995, 1999, 2000; Robeyns, 2003). Particularly, the Human Development Index itself infers capability development by identifying health (life expectancy at birth), education (years of education and expected years of schooling), and material well-being (per capita Gross National Income) as achieved functionings (Herrero, Martínez, & Villar, 2012).

Main critics to HDI have been to provide poor quality of data, involving serious problems of noncomparability over time and space, measurement errors (e.g., lack of complete coverage within countries, the possibility of inaccurate reporting), redundancy to the information provided by GDP, election of wrong indicators (e.g., measuring material well-being as gross national income is problematic since ignore the distribution of income within the society; lack of important indicators, such as distribution of income, access to health care and to further education, the extent of civil and political liberties, environmental impacts on well-being, other variables of human well-being) (Stanton, 2007). However, HDI has evolved over the time, improving indices and formula used. In sum, HDI has had the value to popularize human development as a new understanding of well-being, and to provide an alternative to GDP per capite in order to measure levels of development across countries (Stanton, 2007).

As the others efforts to list fundamental capabilities, health is a key element in the HDI and, as such, it has been used in by several authors in relation to heath conditions such as chronic pain (Elzahaf, Tashani, Unsworth, & Johnson, 2012), depression (Cifuentes, Sembajwe, & Tak, 2008), happiness (Blanchflower & Oswald, 2005), or physical activity (Dumith, Hallal, Reis, & Kohl, 2011). The present doctoral research analyses the influence of the country-level of human development in the impact on health of psychosocial risks (Study 3), but also provides a CSR framework (Chapter 4.2) that could be used to reduce these hazards and, therefore, promote workers' health and human development.

2.4. Work-place interventions to reduce psychosocial hazards and improve working conditions

There are different levels in which strategies to prevent and manage psychosocial hazards, work-related stress and its associated health effects can be addressed, as explained in Leka et al. (2008). A common distinction of workplace interventions has been between organisational and individual orientations, or between primary, secondary and tertiary prevention. Primary interventions, also referred to as 'organisational-level' interventions or as 'stress prevention', aim to reduce risks at source (organizational level) in order to reduce their negative impact on the individual, promoting organizational healthiness, work and environmental design, organizational development and ergonomics (Leka et al., 2004; Leka et al., 2008). For instance, the development of a clear organizational structure and practices, appropriate selection, training and development, clear job descriptions, consistent communication, healthy social environment and relationships, accurate equipment and physical working conditions, and supportive organizational culture (Leka et al., 2004). These interventions are proactive strategies (LaMontagne, Keegel, Louie, Ostry, & Landsbergis 2007) which address the root causes of work-related stres.

Secondary-level interventions have been described as 'ameliorative strategies' (LaMontagne et al., 2007). They focus at individual level (i.e., modifying an individual's response to psychosocial risks), improving the perception and management of psychosocial risks and work-related stress for psychosocial hazards 'at-risk' exposed groups within the workplace (Tetrick & Quick, 2003). These interventions can include information, training, time management and interpersonal relationships (Leka et al., 2008), providing awareness, knowledge, skills and coping resources to effectively manage stressful situations.

Tertiary-level interventions are tackling the consequences of a physical or psychological harm after exposure to psychosocial hazards, and have been described as a 'curative

approach' for individuals already suffering from ill health (Sutherland & Cooper, 2000). It can include the management and treatment of symptoms of ill-health in order to minimize these stress-related problems, by offering counselling, therapy or return-to-work and rehabilitation programmes (LaMontagne et al., 2007; Leka et al., 2008). For instance, return-to-work programmes have been demanded by the OECD (2012) in order to reduce higher abseenteism of workers with mental health problems, and have been proved to be effective in Sweden, especially with respect to musculoskeletal health problems (Leka et al., 2014).

Work-related interventions pretend to reduce work-related stress and psychosocial hazards have proved their economic effectiveness. Matrix (2013) reviewed workplace interventions and found that every €1 of expenditure in prevention and intervention programmes at workplace generated economic benefits over a one-year period of up to €13.62. Similar results were found in the 90 studies review conducted by LaMontagne et al. (2007) and in the review conducted by Hamberg-van Reenen, Proper and van den Berg (2012) in the USA.

Leka et al. (2014) included a meta-review of several studies about economic effectiveness. According to this review, the Health and Safety Executive in the UK found positive findings at county council level in the evaluation of the Council's "People Strategy" in 2005, and a 'quality of working' life initiative was able to reduce absence levels from 10.75 days to 8.29 days. Additionally, Mills, Kessler, Cooper and Sullivan (2007) defended a return on investment of \$9 for every \$1 invested, and the UK Foresight study on Mental Capital and Wellbeing suggested in 2008 that extension of flexible working arrangements could save \$394 million, a better integration of occupational and primary health-care systems would save \$513 million and implementing stress and wellbeing audits could lead to save \$434 million. However, most interventions have been conducted at individual rather than at organizational level, due to the lack of data, needs of a more complex approach and reluctance of employees' representatives to involve in this kind of evaluations assessing performance (Leka et al., 2014). In any case, according to existing reviews, economic

returns (e.g., benefits to health and social welfare systems, reduction in absenteeism or presenteeism, staff retention, public image, better innovation, less physical and psychological health problems, etc...) seems to be greater than the costs of investment (Leka et al., 2014).

Despite this evidence, companies in developing countries often lack the resources and infrastructure to perform interventions to tackle work-related stress, while there is not always national policies, national data and surveillance systems or occupational health services put in place in this area (Dollard et al., 2007; WHO, 2007). Diseases caused by psychosocial risks are not included in the definition of easily preventable diseases, and in this context, it is not strange that psychosocial risks issues are not often a priority for companies and governments, since many decision-makers still perceive occupational health as a luxury (Kortum et al., 2010).

Summaryzing, economic costs of work-related stress have been documented worldwide. Psychosocial hazards and work-related stress provoke both direct impacts on health (e.g., depression, MSDs, etc...) that increase sickness absenteeism and health costs, and indirect impacts on productivity. Additionally, mental health diseases are associated to a higher sick leave and higher costs than general diseases. Workplace interventions have been also shown to be cost-effective in reducing health and productivity costs.

3. Working conditions and health and safety: Hard and soft policies

This chapter reviews the literature on OHS, working conditions, psychosocial risks and CSR. The sources of information include the scientific literature as well as relevant information from public and private reports, international standards and conventions, grey literature, and webpages of international organizations. This approach allowed the identification of the main theoretical approaches and the examination of the state-of-art in the area of OHS. The policy literature reviews also included ILO Conventions and recommendations, to identify the relevant policies for managing psychosocial risks at work and for promoting occupational health and safety. This review is used as the basis for Study 1.

3.1. Introduction: Hard and soft policy

Psychosocial risk management and promotion of workers' health can include several policy level interventions, including development of policy and legislation, best practice standards, the signing of stakeholder agreements and declarations, or the promotion of social dialogue and CSR initiatives (Jain, 2011). If a policy maker decides to implement an intervention to address an issue, such as psychosocial risks at work, a number of policy instruments may be used. Vedung (1998) proposed three classes of instruments to implement an intervention: regulation, economic means and information. According to him, government may either force us with regulations (stick), pay us or have us pay with economic means (carrots) or persuade us with information (sermons). While regulations are considered 'hard law' and information 'soft law', he also included economic means which could be categorised both hard and soft law.

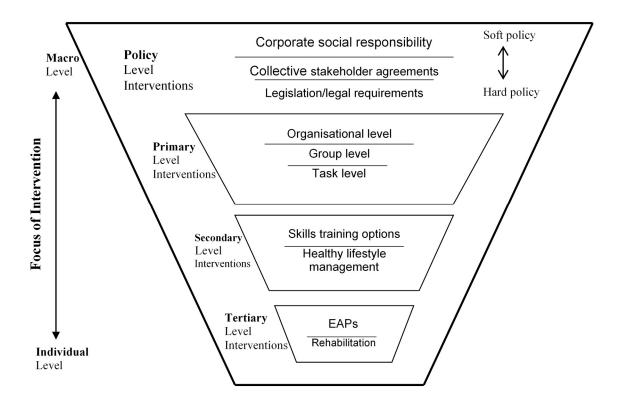


Figure 3.1. Multi-level model of interventions for psychosocial risk management. Adapted from Jain (2011).

A number of policies and approaches have been developed and implemented by various stakeholders at the international, national, regional, sectoral and enterprise level, aiming to manage and promote better working conditions. These policies and approaches include 'hard' or 'regulatory' standards as well as 'soft' or 'non-binding and voluntary' standards (Leka, Jain, Iavacoli, & Ertel, 2011). Hard law refers to precise legally binding obligations, as statutes or regulations in national legal systems or international legally binding treaties, conventions and directives (e.g., ILO Conventions, EU directives), and they usually have legitimacy, strong surveillance and enforcement mechanisms. On the other hand, soft law refers to policies where participants are free to adhere or not and whose development depends on the participation and resources of non-governmental actors, which can add additional legitimacy, timely solutions, bottom up initiatives and actions when national governments are not having a role in regulating working conditions, as guidance, voluntary resolutions, collective agreements, voluntary resolutions, or CSR initiatives, etc. (Andreou & Leka, 2012).

3.2. International legislation: ILO Conventions and Recommendations and EU Directives and Agreements

3.2.1. ILO Conventions and Recommendations

The Seoul Declaration on Safety and Health at Work in 2008 (ILO, 2009) considered the right to a safe and healthy work environment as a fundamental human right. Under this consideration of health and safety as a basic labour right, several ILO Conventions and Recommendations have been developed. A key regulation is the Convention 155 of Occupational Safety and Health (1981). It requires ratifying countries to formulate a national policy on OHS that takes into account "relationships between the material elements of work and the persons who carry out or supervise the work, and adaptation of machinery, equipment, working time, organisation of work and work processes to the physical and mental capacities of the workers" (ILO, 1981). Another more recent ILO Convention, C187 Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187), states that principles that should be promoted included to assess occupational risks or hazards, combate occupational risks or hazards at source; and finally develope a national preventative safety and health culture that considers information, consultation and training. In addition to specific ILO conventions on OHS, there are eight fundamental ILO Conventions to address the core international labour rights about non-discrimination, freedom of association and collective bargaining, child labour and forced labour. The main work-related aspects shown in the Universal Declaration of Human Rights (art. 2-5, 20, 22-25) have also an exceptional relevance in this field. As expected, most country ratifications of ILO Conventions are related to these fundamental conventions (between 153 and 180 countries had ratified each of these conventions up to October 1, 2015), which have been included in national legislations. On the other hand, number of ratifications of other ILO Conventions are far less than the level of ratification of fundamental Conventions, which means that an important number of countries around the world have not still ratified a substantial part of the ILO Conventions related to working conditions. On the other side, some countries have developed legislation covering the aspects that have been included in the ILO Conventions.

However, most countries have not equivalent legislation, especially in developing countries. For instance, in the area of industrial relations, 85 States (up to October 1, 2015) ratified C135 Workers' Representatives Convention, 1971 (No. 135), but only 46 the C154 Collective Bargaining Convention, 1981 (No. 154). In non-discrimination, just 44 States ratified C156 Workers with Family Responsibilities Convention, 1981 (No. 156) and 29 the C183 Maternity Protection Convention, 2000 (No. 183), while 49 States ratified the C097 Migration for Employment Convention (Revised), 1949 (No. 97). In the area of work schedules, just 52 States ratified the first Convention ILO approved, the C001 Hours of work Convention, 1919 (No. 1), and 15 the follow-up C047 Forty-Hour Week Convention, 1935 (No. 47), while 36 did the C132 Holidays with Pay Convention (Revised), 1970 (No. 132), 13 the C171 Night Work Convention, 1990 (No. 171) and 14 the C175 Part-Time Work Convention, 1994 (No. 175). Related to training and development, while 68 States ratified C142 Human Resources Development Convention, 1975 (No. 142), only 35 did it with the C140 Paid Educational Leave Convention, 1974 (No. 140). In the area of occupational health and safety, a basic convention as the C155 Occupational Safety and Health Convention, 1981 (No. 155) has been ratified by 64 States (although its associated Protocol of 2002 only by 10 States), but C161 Occupational Health Services Convention, 1985 (No. 161) just by 32 States and the C187 Promotional Framework for Occupational Safety and Health Convention, 2006 (No. 187) by 35 States.

Ratification of ILO Conventions is increasing in the last years (see table 1.1.), although translation into national laws is far from reality, and an 'implementation gap' has been identified (Böhning, 2003). Furthermore, in certain countries, enforcement of ratified Conventions is not as accurate as it should be; then, ILO has several mechanisms to report

non-compliances and request information to the states when a claim has been raised (ILO, 2015a). It has a regular system of supervision and special procedures. The regular system the Committee of includes Experts on the Application of Recommendations, which has been involved in 2,300 cases to date, and the International Labour Conference's Tripartite Committee on the Application of Conventions and Recommendations. The special procedures are based on the articles 24 to 34 of the ILO Constitution and include procedures to submit representations and/or complaints, as well as a special procedure for complaints regarding freedom of association. The representations allow to present to any employer's or workers' organization a representation to the ILO Governing Body against any member state that has failed to secure the effective observance of any Convention to which it is a party. A complaint can be filed by the ILO Goberning body, by a delegate in the ILO Conference or by another member state against a member state which is not complying with a ratified convention and can lead to a Commission of Inquiry if there are serious violations of a Convention.

Another ILO standard to promote better working conditions are the ILO Recommendations. They sometimes develop adopted Conventions as accompanying Recommendations. They serve as non-binding guidelines, although they can be incorporated into national regulatory framework. Some examples are R143 Workers' Representatives Recommendation, 1971 (No. 143), R191 Maternity protection Recommendation (No. 191), R111 Discrimination (Employment and Occupation) (No. 191). Furthermore, some Recommendations at also aimed at developing concepts that do not appear in ILO Conventions. For instance, R135 Recommendation supports lifelong learning and employability (No. 195), while other key recommendations are R130 Examination of Grievances Recommendation, 1967 (No. 130), or R129 Communications within the Undertaking Recommendation, 1967 (No. 129), R192, concerning Voluntary Conciliation and Arbitration, 1951 (No. 192), or R194 Recommendation (revised) about the list of occupational diseases.

Fundamental ILO Conventions have also been the basis to build non-binding initiatives, such as CSR standards. CSR standards adapt and include legal requirements and issues relating to working conditions, which are covered in ILO Conventions or ILO non-binding Recommendations, as shown in Study 1.

The inclusion of other Conventions as well as fundamental ones in CSR standards is valuable, particularly since ratification of non-fundamental ILO Conventions is poor in many cases. Inclusion of the issues and principles contained in these conventions in CSR standards, therefore provides an avenue through which these issues can be incorporated in business policies and at the workplace. This is a key issue because, even in developed countries, organizations do not always follow ILO Conventions. For instance, Republic of Korea did not ratify the C47 Forty-Hour Week Convention, 1935 (No. 47), till 2011. Effects on working conditions have been obvious. In 2010, according to the Korean Working Conditions Survey (KWCS) (Eurofund, 2012c), Koreans worked on average, 47.6 hours per week, and 49.5 per cent of employees worked over six days per week. A similar problem was found in Canada, where it has been claimed that 65% of workers were working over 45 hour a week (Duxbury & Higgins, 2012) and where Convention No. 47 has not been yet ratified. Discrimination in salaries is also a reality around the world, despite the existence of international or national laws. For instance, despite the ratification of ILO Conventions by many EU countries, according to the ILO (2007), women earn less than men. The difference between average gross hourly earnings of male and female employees remained still over 15% in 2012 (Eurostat, April 15, 2015). CSR standards, altogether with company-level CSR initiatives can accelerate a reduction in working hours and also guide implementation at company-level of monitoring and policies to ensure 'equal pay for equal work' principle

3.2.2. European legal framework: EU Directives

At the European level, several relevant initiatives to occupational health and safety have been approved, following the implementation of the significant 1989 European Framework 84 Directive on Safety and Health at Work (89/391/EEC), which defined employers' responsibility to provide protective and preventive services; information, training, prevention and protection concerning safety and health risks; consultation and participation of workers; and health surveillance. It states that employers have "a duty to ensure the safety and health of workers in every aspect related to work", which should include an OHS prevention policy and combating risks at source (Leka et al., 2011). This directive was transposed to national legislation in all EU member countries, in accordance with provisions of EU law. This Directive covers the assessment of all types of risks and risk factors, but does not include specific references to mental health in the workplace, as well as work-related stress and psychosocial risks.

A recent study, which carried out a Delphi study with stakeholders, found that there was limited awareness of this provision (assess all risks) by employers and other stakeholders, and that this was exacerbated by the lack of specific references to psychosocial risks in the Directive (Leka et al., 2014). Currently, there is no guidance specifying legal employer's responsibilities in this area and how to fulfil them by implementing risk assessments and preventive measures (Leka et al., 2014). These authors recommend to revisit the coverage and terminology of the Directive, including clear reference to psychosocial risks and mental health in the workplace, by developing an interpretative document to clarify legal requirements for employers and stakeholders and a guidance document to implement in the workplace, promoting regulatory and non-binding initiatives, strengthening existing monitoring systems, publicising lessons from good practices and increasing the support to SMEs (Leka et al., 2014). To solve the lack of awareness of how to relate this Directive to psychosocial risks at workplace, a specific campaign in 2012 for labour inspectorates to promote enforcement, was carried out by the EU Senior Labour Inspectors Committee (SLIC, 2012).

Directive 89/391/EEC was evaluated in the report from the European Commission on the practical implementation of the provisions of the Health and Safety at Work Directive (EC,

2004c). This report found a positive influence on the development of safety measures at workplace and of national policies where there were no appropriate legislation, especially in Greece, Ireland, Portugal, Spain, Italy, and Luxembourg, meanwhile in Austria, France, Germany, the UK, the Netherlands and Belgium the Directive served to complete or refine existing legislation; furthermore, this Directive was in the negotiation agenda for the 13 countries that join European Union after 2004 and they had to adapt their national legislation prior to accession (Leka et al., 2014). Other countries as Denmark, Finland and Sweden already had equivalent legislation (EC, 2004c). Although the evaluation pointed out that implementation led to a higher focus on OHS policies, risk assessments, obligations for the employers to inform and train workers or increasing workers' rights, there were difficulties due to lack of participation of workers, absence of evaluation from national labour inspectorates, lack of statistical information, problems to implement in SMEs, lack of universalization of risk assessments (EC, 2004c, Leka et al., 2014). However the biggest challenge was that, schematic procedures and risk assessment were hardly considering long-term effects and less obvious risks as psychosocial risks, resulting in a limited national view of health risks (Leka et al., 2014).

Other Directive relevant for health and safety is Directive 89/654/EEC concerning the minimum safety and health requirements for the workplace that sets physical requirements at the workplace, while other directives set requirements for display screen equipment, handling of loads, working time and rest, part-time work, fixed-term work, maternity protection and parental leave, or non-discrimination and equal opportunities. Workers' participation in OHS is a key point in ILO Conventions and Recomendations, and Directive 2002/14/EC states the right to information and consultation of employees when are expected substantial changes in work organization. Other relevant international legislation is included in Table 3.1.

Table 3.1. Main international legislation about OHS and psychosocial risks

Focus	Document
General occupational safety and	Directive 89/391/EEC the European Framework Directive on
health at work	Safety and Health at Work
	C155 Occupational Safety and Health Convention (ILO), 1981
	C187 Promotional Framework for Occupational Safety and
	Health Convention (ILO), 2006
Workplace requirements	Directive 89/654/EEC concerning the minimum safety and
	health requirements for the workplace
	Directive 2009/104/EC concerning the minimum safety and
	health requirements for the use of work equipment by workers
	at work (second individual Directive within the meaning of
	Article 16(1) of Directive 89/391/EEC) [replacing Directive
	89/655/EEC]
	Directive 89/656/EEC on the minimum health and safety
	requirements for the use by workers of personal protective
	equipment at the workplace
Display screen equipment	Directive 90/270/EEC on the minimum safety and health
	requirements for work with display screen equipment
Manual handling of loads (back	Directive 90/269/EEC on the minimum health and safety
injury)	requirements for the manual handling of loads where there is
	a risk particularly of back injury to workers
Working time	Directive 93/104/EC concerning certain aspects of the
	organisation of working time Amended by Directive
	2003/88/EC
	C175 Part-time Work Convention (ILO), 1994
	Directive 97/81/EC concerning the framework agreement on
	part-time work
	Directive 99/70/EC concerning the framework agreement on
	fixed-term work
Discrimination	Directive 2000/43/EC prohibiting direct or indirect
	discrimination on grounds of racial or ethnic origin
	Directive 2000/78/EC prohibiting direct or indirect
	discrimination on grounds of religion or belief, disability, age
	or sexual orientation
Equal treatment for men and	Directive 76/207/EEC on equal treatment for men and women
women	as regards access to employment, vocational training and
	promotion, and working conditions Amended by Directive

2002/73/EC

Directive 2006/54/EC on the implementation of the principle of equal opportunities and equal treatment of men and women in

matters of employment and occupation

Maternity and related issues C 183 Maternity Protection Convention (ILO), 2000

Directive 92/85/EC on pregnant workers, women who have

recently given birth, or are breast-feeding

Directive 2010/18/EU implementing the revised Framework

Agreement on parental leave

Young workers Directive 94/33/EC on the protection of young people at work

Temporary workers Directive 91/383/EEC supplementing the measures to

encourage improvements in the safety and health at work of workers with a fixed duration employment relationship or a

temporary employment relationship

Informing and consulting employees

and restructuring and collective

redundancies

Directive 2002/14/EC establishing a general framework for informing and consulting employees in the European Community

Directive 2009/38/EC on the establishment of a European Works Council or a procedure in Community-scale undertakings and Community-scale groups of undertakings for the purposes of informing and consulting employees (recast)

Directive 98/59/EC on the approximation of the laws of the Member States relating to collective redundancies

Directive 2001/23/EC on the approximation of the laws of the Member States relating to the safeguarding of employees' rights in the event of transfers of undertakings, businesses or parts of undertakings or businesses

Directive 2008/94/EC on the protection of employees in the event of the insolvency of their employer (repealing Directive 2002/74/EC and Council Directive 80/987/EEC)

Note: Adapted from Leka et al. (2014).

Following the results of the review of key European policies and guidance instruments and followed up by a Delphi survey with stakeholders, it has been suggested that there was a lack of clarity and specificity on the terminology used and few specific guidance on managing and prevention of psychosocial risks at workplace and in SMEs (Leka et al., 2014). In relation to the actions needed, stakeholders prefer, especially in Southern Europe,

UK and Ireland and experts and professionals, the development of more non-binding EU initiatives in the first place. This should be followed by the development of technical update of existing legislation and finally combining or consolidating existing EU Directives. On the other hand, in new member states and Northern EU countries, employee representatives and policy makers the preferred scenario is related to the development of new EU legislation (Leka et al., 2014). Stakeholders also demanded further awareness raising campaigns, national strategies on mental health and the introduction of management standards (Leka et al., 2014).

3.2.3. Occupational diseases: National and international legislation

Occupational diseases are one of the main causes of disability around the world. More than 2 million people die each year because of them. Main occupational diseases are cardiovascular diseases, musculoskeletal disorders (MSDs) and mental disorders, and all can be prevented by improving working environment and reducing psychosocial risk factors (Chapter 2.2. and 2.3). Consequently, prevention of occupational diseases has been on the global research and institutional agenda in recent years. For instance, the ILO promoted a global Safeday on Occupational Diseases in 2013, including a specific focus on psychosocial risks (ILO, 2013). The ILO report for that global Safeday demanded a further collaboration of OSH and social security institutions in dealing with prevention, early detection, treatment and compensation, the integration of prevention of occupational diseases into labour inspection programmes, the strength of employement compensation schemes and the recognition of occupational diseases. They also recommend to improve health surveillance, monitoring and preventive measures from occupational health services, as well as updating national lists of occupational diseases taking into account the ILO lists (ILO, 2013). However, one of the most interesting advances came when the ILO revised in 2010 the ILO

R194 Recommendation concerning the List of Occupational Diseases and the Recording and Notification of Occupational Accidents and Diseases, 2002 (No. 194), to include psychosocial risks. The section 2.4. states:

"2.4. Mental and behavioural disorders: 2.4.1. Post-traumatic stress disorder; 2.4.2. Other mental or behavioural disorders not mentioned in the preceding item where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to risk factors arising from work activities and the mental and behavioural disorder(s) contracted by the worker" (ILO, 2010c).

For the first time, this recommendation advocates for recognizing mental and behavioural diseases as occupational if a direct link is established scientifically, or determined by methods appropriate to national conditions and practice between the exposure to risk factors at the workplace and mental disorders. Hygienists, occupational health psychologists, employers, workers and government authorities can contribute to provide new evidence to recognize new psychological diseases. However, R194 had a controversial approval as it is shown by the minutes of its meetings (ILO, 2010b).

Afterwards, the scope of psychosocial risk definition was more limited due to negotiations among countries and employers' and workers' organizations. Employers' representatives opposed to psychosomatic psychiatric syndromes caused by mobbing were included as occupational diseases because they believed that "the subject was still ill-defined and that it would be very hard to distinguish between occupational, non-occupational and personal causes of the symptoms associated with mobbing" (ILO, 2010b, p. 31). After publication of this recommendation, Mexico and China used this list to update their own national lists of occupational diseases, although this did not lead to the recognition of mental and behavioural diseases in their national lists (ILO, 2013). Despite this, several countries around the world have incorporated national legislation to include updated consideration of psychosocial risks, while ILO is providing assistance to governments and employers' and workers' organizations to adapt national legislation related to psychosocial risks. For

instance, Paraguay adapted R194 including ILO definition of mental and behavioural disorders in its Decree N°5.649/2010. On the other hand, Uruguay incorporated to its legislation the Recommendation 194, although excluding mental and behavioural disorders because they did not consider proven the scientific link between psychosocial hazards and occupational diseases.

Although most countries still do not have specific legislation for psychosocial risks, there have been significant advancements in recent years at national and regional level, especially in Europe, Canada, Australia or Latin America, according to ILO LEGOSH database specialized occupational health and safety (http://www.ilo.org/dyn/legosh/en/f?p=LEGPOL:1000). Labour and laws Venezuela, Nicaragua, Ecuador, Colombia, Chile, Costa Rica or Brazil included psychosocial risks and work-related stress as an occupational disease which can lead to mental and behavioural disorders. However, this legal recognition does not always lead to an actual recognition in the field, as it happens in Mexico, where Federal Labour Law include several occupational mental disorders since 1970, but it has not led to recognition when psychosocial causes are claimed.

In Europe, the EU Commission Recommendation of 2003 concerning the European schedule of occupational diseases, did not include psychosocial risks. However, several countries include recognition of psychosocial risks. For instance, Italy recognizes post-traumatic stress disorder and chronic adjustment disorder (anxiety, depression, behaviour or affective disorders, others) as occupational diseases (EC, 2013). In the Decree of the Ministry of Labour of 2009, several psychosocial risk factors related to work organization, training, control and social support at work are linked to these disorders. Previously, between 2005 and 2009, almost 500 work-related mental disorders were compensated as occupational diseases (EC, 2013). Romania, Hungary, Latvia, Finland and Denmark also have some recognition of mental disorders caused by psychosocial factors in their legislation or disability registers (EC, 2013). Some countries, as Sweden, do not have a list of

occupational diseases; instead they have an open system where occupational disease and harmful factors at work must be linked. Nevertheless, Swedish open system is recognizing work-related mental disorders (EC, 2013). At European level, a recent review about mental health in the workplace in Europe proposed to include mental health disorders in the list of occupational diseases at European level (Leka et al., 2014). This conclusion was reached also in the Milieu Consulting (2013) report for the European Parliament.

Finally, several states of Canada and Australia also consider mental disorders as occupational diseases. However, although several countries recognize compensation for mental health problems caused by work-related stress, acceptance rate of these claims usually is lower than other occupational diseases. In Australia, the acceptance rate of mental stress was 68% in 2010-11, lower than the over 90% average acceptance rate for all other claims (Safe Work Australia, 2013). In addition, only 40 per cent of injuries involving work-related stress were claimed (Safe Work Australia, 2013).

3.3. Soft law: Social dialogue and collective agreements and CSR

Soft law includes non-binding treaties, voluntary resolutions, codes of conduct developed by international or national organizations, guidance, social partner agreements, standardisation and certification, establishment of networks/partnerships and voluntary standards adopted by business and civil society (Leka et al., 2011). At the enterprise level, such voluntary standards are categorised under corporate governance and corporate social responsibility (CSR) initiatives (EU-OSHA, 2004, Jain et al., 2011). Soft law can be expressed with the development of social dialogue and collective agreements, which can be developed either after a bipartite dialogue between employers and workers or after a tripartite dialogue involving social partners and public authorities (Jain, 2011). Guidance documents have also an importance to increase the knowledge about how to prevent work related stress.

Nordestgaard and Kirton-Darling (2004, in Jain, 2011, p. 55) suggested a relation among legislation, collective agreements and CSR, as ways of soft law:

Occupational health and safety legislation traditionally covers legal minimum requirements that companies are obliged to meet in relation to working conditions, environmental conditions and employment relations. Collective agreements ideally should improve on these minimum standards and specifically regulate the working conditions and employment relations of a specific work force, whether European, national, sectoral or company based. CSR has the merit of providing a broad space for the development of innovative approaches to a whole variety of issues, according to economic and market circumstances, but also as a means of preparing or 'softening up' areas of consensus. The dynamic interaction (...) would exist at the interface, as issues become the subject of discussion between the social partners and if consensus develops through the evolution and joint-application of CSR policies (...), it may be possible to integrate long-established aspects into collective agreements. Through the integration of areas of consensus the relevant collective agreement would act as a legal ratchet ensuring that a company or sector's CSR policy could constantly develop above and beyond the legal norms.

Among main voluntary OHS standards, the ILO also elaborated its ILO-OSH 2001 guidelines on occupational safety and health management systems, which have influenced national laws and CSR standards. It proposes that health and safety management systems should include a policy developed in consultation with workers, which organizes, plans, implements, and evaluates actions for improvement. After the assessment and identification of hazards, preventive measures to eliminate, control at source or minimise the risk should be put in place (Jain, 2011).

Table 3.2. Main international voluntary OHS and psychosocial risks standards and guidance documents

Focus	Document
Psychosocial	Guidance: ILO, 1986 Psychosocial factors at work: Recognition and control
Hazards	R194 revised annex, ILO 2010 Recommendation concerning the List of
	Occupational Diseases and the Recording and Notification of Occupational
	Accidents and Diseases
	WHO Healthy Workplaces Framework, 2010 Healthy workplaces: a model for
	action: for employers, workers, policymakers and practitioners
Work-related	EN ISO 10075-1: 1991 Ergonomic principles related to work-load – General
stress	terms and definitions
	EN ISO 10075-2: 1996 Ergonomic principles related to work-load – Design
	principles
	Guidance: EC, 1999 Guidance on work-related stress – Spice of life or kiss of
	death?
	Council of the European Union Conclusions, 2002 on combating stress and
	depression-related problems
	Guidance: EU-OSHA, 2002 How to Tackle Psychosocial Issues and Reduce Work-
	Related Stress
	Guidance: WHO, 2003 Work Organization and Stress
	Guidance: WHO, 2007 Raising awareness of stress at work in developing
	countries: a modern hazard in a traditional working environment: advice to
	employers and worker representatives
	Guidance: WHO, 2008 PRIMA-EF: Guidance on the European Framework for
	Psychosocial Risk Management: A Resource for Employers and Worker
	Representatives
	Guidance: ILO, 2012 Stress Prevention at Work Checkpoints - Practical
	improvements for stress prevention in the workplace
	Framework Agreement on Work-related Stress, 2004 European social partners -
	ETUC, UNICE(BUSINESSEUROPE), UEAPME and CEEP
	European Pact for Mental Health and Wellbeing, 2008 Together for mental health
	and wellbeing
	European Parliament resolution T6-0063/2009 on Mental Health, Reference
	2008/2209(INI), non-legislative resolution
Violence and	Guidance: WHO, 2003 Raising awareness to psychological harassment at work
Harassment	Guidance: ILO, 2006 Violence at Work
	Guidance: EU-OSHA, 2011 Workplace Violence and Harassment: a European
	Picture
	Framework Agreement on Harassment and Violence at Work, 2007 European
	social partners - ETUC, BUSINESSEUROPE, UEAPME and CEEP

Note: Adapted from Leka et al. (2014).

OHSAS 18001 and 18004 (Occupational Health and Safety Assessment Series) are another international OHS management system, which can be certified after being implemented in an organization (Jain, 2011). Furthermore, a number of OHS standards and guidance documents have also addressed psychosocial risks and violence and harassment at work (Table 3.2).

Regarding international guidance reports, the ILO elaborated its 1986 pioneer report "Psychosocial factors at work: Recognition and control" defining psychosocial hazards at work. This was followed by a report about Violence at Work (2006), which examined bullying, mobbing and verbal abuse as well as evidence about prevalence and economic costs of violence at work around the world and initiatives to reduce its impact. Similar guidance documents to educate employers, workers and unions were developed by the WHO in 2003 about work-related stress (Work organization and Stress) and harassment (Raising awareness to psychological harassment at work), while in 2007 the WHO developed a guidance specifically addressed to developing countries (Raising awareness of stress at work in developing countries: a modern hazard in a traditional working environment: advice to employers and worker representatives). The WHO Healthy Workplaces Framework (2010) included a broad conception of psychosocial work environment which considered organizational culture, values, daily practices affecting psychological and physical health, as well as a hierarchy of controls to address hazards. Several ergonomic principles by the International Organization for Standardization (ISO) address work-load, fatigue, mental stress and mental strain, which consider aspects of task ambiguity, job content, working time arrangements, etc...

At regional level, the European Commission developed a guidance document in 1999 called "Guidance on work-related stress – Spice of life or kiss of death?", which analysed main causes and consequences of work-related stress, and included advice for primary prevention and identification of risks, followed by the document "How to tackle psychosocial issues and reduce work-related stress" developed by the EU-OSHA in 2002.

In relation to social dialogue and collective agreements, several European social partners have engaged in cross-sectoral dialogue, including ETUC (trade unions), BUSINESSEUROPE (private sector employers), UEAPME (small businesses), and CEEP (public employers), and signing several legally-binding collective agreements afterwards ratified by the Council of Ministers (e.g., parental leave, part-time work, fixed-term contracts) and voluntary collective agreements (e.g., telework, work-related stress and harassment and violence at work), which create a contractual obligation for the affiliated organizations of the signatory parties (Jain, 2011).

Two European Framework Agreements approved about work-related stress (2004) and harassment and violence at work (2007) have had special relevance to tackle psychosocial risks at work, helping to clarify the European Framework Directive 89/391/EEC on Safety and Health at Work. Regarding work-related stress, the European Framework was signed by the European social partners - ETUC, UNICE BUSINESSEUROPE, UEAPME and CEEP, and stated that work-related stress involved objective (e.g., work organization, working conditions, and communication) and subjective factors. It pointed out that employers had the responsibility to prevent, eliminate or reduce work-related stress (Jain, 2011). It involved workers and workers' representatives and introduced preventive and responsive measures to address at identified stress factors (Leka et al., 2014).

This Framework Agreement was evaluated by the final joint report on the implementation of the European social partners' Framework Agreement on Work-related Stress (EC, 2011b; European Social Partners, 2008). According to the evaluation, in several countries (the Netherlands, Finland, Sweden, Belgium, Denmark, UK, France, Iceland and Norway) there were substantial joint efforts of social partners to implement national collective agreements or social partner actions based on explicit legal framework, while social partners in Bulgaria, Estonia, Greece, Italy, Lithuania, and Malta did not report on the implementation of the agreement (EC, 2011b, Leka et al., 2014). Main activities developed after the signing of the agreement were its use as an awareness raising tool or as a part of the social dialogue in

each country, meanwhile, more emphasis was put in place in the countries which already had more comprehensive policies related to work-related stress (Leka et al., 2014).

The Framework Agreement on Harassment and Violence at work (2007) was signed by the European social partners - ETUC, BUSINESSEUROPE, UEAPME and CEEP. It recognized that work environment can influence harassment and violence. Therefore, training and awareness and preventive policies must be put in place. It intended to increase awareness and provide a framework to prevent and manage harassment and violence at work, including a clear statement of companies in this issue (Jain, 2011, Leka et al., 2014). According to the evaluation of this framework agreement, main activities developed after signing the framework agreement in most countries were translation in national languages and the use of the agreement as an awareness raising tool and to further existing initiatives and to promote sectoral initiatives (European Social Partners, 2011, Leka et al., 2014). It contributed to the development of new or revised policies and legislation in countries as Portugal, Spain, Slovenia and Norway, although other countries (Germany, Belgium, and Iceland) already had existing legislation (Leka et al., 2014).

Finally, the European Pact for Mental Health and Wellbeing in 2008 recognized that actions were necessary to tackle the mental and physical health problems at work, while the following European Parliament resolution T6-0063/2009 on Mental Health urged the Member States to promote research on working conditions increasing mental illness and to promote a work environment that tackles causes of work-related stress and mental disorders. It also suggested businesses to report annually their actions and data in relation to workers' mental health (Jain, 2011).

3.4. Psychosocial risk management and policies

OHS and psychosocial risk management implies a comprehensive approach to prevent ill-health (see chapter 2.4). Therefore, risk management in OSH is an evidence-based and systematic problem solving strategy (Cox et al., 2005). It starts with the identification of problems and an assessment of the risks, using the information to suggest an action plan to reduce that risk at source, implementing risk management actions. These actions are finally evaluated and they inform the whole process, leading to re-assessment and to organizational learning (Cox et al., 2005; Jain, 2011; Leka et al., 2004). Thus, psychosocial risk management always should include an assessment of risks to understand the causes, nature and severity of the risks and psychosocial hazards (including impact on individual and organizational health, such as abseenteism or organizational commitment), audits to recognize and critically evaluate existing management practices, an action plan intended to remove or reduce these risks on the basis of risk assessment and audit, and a continuous and final monitoring and evaluation to give feedback to the whole process and promote organizational learning (Leka & Cox, 2008).

Action plan should include information about "what is being targeted, how and by whom, who else needs to be involved, what the time schedule will be, what resources will be required, what will be the expected (...), and how the action plan will be evaluated" (Jain, 2011, pp. 16). Its main focus should be to reduce risk factors at source, redesigning the work environment within the organization. Therefore, a regular risk assessment and the identification of causes of sickness leads to the implementation of a documented OSH policy which involves both high-level management as well as line-management and supervisors. In relation to psychosocial risk management, specific measures to deal with work-related stress, bullying and harassment, violence at work, or promoting organizational changes in the work is organized, working time arrangements and provision of training can reduce psychosocial hazards and improve workers' well-being (Leka & Jain, 2010). The current

development of these initiatives in European companies and their link to corporate image have been analysed in ESENER survey and are evaluated in Study 2.

In 2008, the PRIMA-EF psychosocial risk management system model was launched, which brings together principles and best practice from the extensive evidence base in the area. This European model identifies both the steps to be followed and key indicators (Figure 3.2).

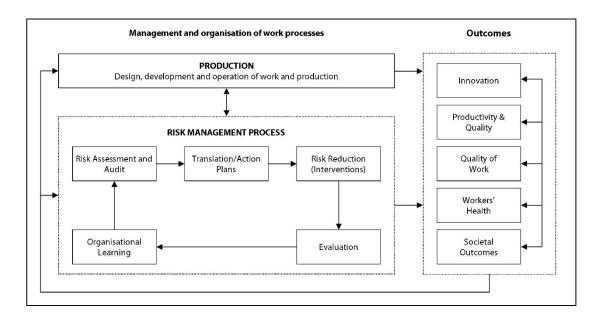


Figure 3.2. Processess and outcomes of PRIMA-EF model. Adapted from Jain (2011).

Evaluation of OHS and psychosocial risk management interventions is still rare, but several interesting attempts have been developed. Leka et al. (2014) meta-reviewed studies about several workplace intervention reviews, including Jenny et al. (2015), Montano, Hoven and Siegrist (2014), and Nielsen, Randall and Christensen (2010). Jenny et al. (2015) after studying 8 interventions found that interventions had a positive impact on participants' demands and resources related to mental health; Montano et al. (2014) analysed 39 studies and found that better results were linked to multiple organisational level modifications instead of a single intervention. Employee participation or management support and communication were finally related to the success of the organizational interventions, while

a combination of individual and organizational approaches also got better results (Nielsen et al., 2010).

3.5. The need for a 'CSR inspired' approach to promote working conditions

Prevention of psychosocial hazards has not been on the policy making agenda and only in recent years there has been a growing movement to develop policies, measures and programmes, both regulatory and voluntary, to this aim (Leka et al., 2010). Policy-level interventions have included the development of legislation, the specification of best practice standards at national or stakeholder levels, the signing of stakeholder agreements towards a common strategy, the signing of declarations, and the promotion of social dialogue and corporate social responsibility initiatives (CSR) (Leka et al., 2011). Traditionally, formal regulatory requirements have been the dominant pressure on organizations to manage the work environment (Burton, 2010; EU-OSHA, 2010). These include: international laws (e.g. ILO Conventions); regional legislation (e.g. European Directives); and national legislation (Leka & Andreou, 2012).

Regulatory policies outline the minimum requirements for working conditions and employee protection at the workplace that must be adopted by enterprises. However, such an approach is only effective where an adequate enforcement framework is available to effectively translate policy into practice. Furthermore, there are very few specific regulations to address psychosocial hazards at work and, where they exist, they are often limited in scope (Leka et al., 2011). Therefore, the need for implementing supplementary strategies to prevent the potential negative effect of psychosocial hazards and manage associated risks in the workplace using a 'CSR inspired' approach, is being increasingly debated and propagated (EU-OSHA, 2004; HSE, 2005; Jain et al., 2011; Montero et al., 2009).

A regulatory approach is most likely to be effective in developed countries. These countries often have a more advanced framework related to working conditions and a higher number

of policies are developed and enforced. However, the situation can be different in developing countries. Informality in labour markets, legal frameworks that do not meet international standards (Nyam, 2006) and more limited enforcement can characterize low and middle income countries. In the late 90s informal economy ranged from 55 per cent in Latin America to 45-85 per cent in Asia and 80 per cent in Africa (Benach et al., 2007), while only 10% of workers in developing countries are covered by law (La Dou, 2003). A supplementary strategy to approach to working conditions and OHS can then accelerate improvements. A further issue is that nations might choose not to make use of legislative policy initiatives where available. ILO conventions only have legal force if ratified by ILO member states; however ratification of several labour conventions by countries (both developed and developing) remains low and many countries hesitate to ratify (Leka & Andreou, 2012), again suggesting that a supplementary approach would be beneficial. Furthermore, in many countries, there is a desire to minimise the regulatory burden placed on organisations, especially SMEs (HSE, 2005). Furthermore, even in developed countries there is room for significative improvements, as early in this chapter is shown, as a consequence of the limited legally binding regulations, the flexibility in working conditions and cuts in enforcement agencies, especially in relation to psychosocial risks.

At the organisational level, the primary challenge with a regulatory approach is that legislative requirements can be circumvented in a number of ways. Large multinational enterprises can strategically select countries of operation in order to avoid jurisdictions with demanding legal environments (McBarnet, 2009). Additionally, if dissatisfied with the state of legislation, business can often lobby for changes in legislation, or even adhering to legislation only superficially and not in 'spirit' (Gold & Duncan, 1993). A further, and perhaps more fundamental, issue is that regulation is designed to target minimum requirements rather than ambitious goals (EU-OSHA, 2012e; Nordestgaard & Kirton-Darling, 2004). Thus, even if one envisioned a scenario where organisations were compliant with these requirements, it is unlikely that the goals established by the WHO and ILO for OHS, and more broadly working conditions in general, could be achieved. Thus, bearing in

mind these issues, legislation, as a regulatory tool operating in isolation, has several limitations. These arguments highlight the need for a framework which can reinforce the legal argument and even encourage organisations to go beyond legal requirements, acting voluntarily and responsibly in the interests of employees and society (HSE, 2005; Montero et al., 2009). Therefore, momentum has been gathering around a responsibility inspired approach to managing the working environment (Zwetsloot & Ripa, 2010; EU-OSHA, 2004). The concept of business responsibility of corporate social responsibility can apply internally or externally. In the latter, ethical considerations are targeted outside the group (e.g. the environment), while internally, CSR endeavours revolve around employees (HSE, 2005). As CSR involves social concerns, this includes working conditions and OHS. This conceptual link is reflected in tools and instruments relating to responsible business (Segal, Sobczak, & Triomphe, 2003) at the international as well as national level. On the negative side, some approaches to CSR are focused on individual rather than structural changes at workplace. Then, in areas such as diversity and equality this can provoke that systemic discrimination and inherent workplace hazards were maintained instead of implementing structural remedies (Hart, 2010). Nevertheless, efforts to highlight the benefits of the responsibility agenda to organizations both conceptual and empirical, have placed it in a strong position to supplement existing initiatives and efforts in the regulatory arena. Recent surveys of management have illustrated that this perspective is permeating into practice (KPGM, 2011).

The motivation behind the creation of CSR guidance is to affect organizational practice. It has long been argued that CSR practice progresses through stages with a number of models proposed. Maon et al. (2010) consolidated several existing theories into a single model encompassing three cultural phases and seven stages of development. The authors argue that CSR progresses from a CSR reluctant culture through a CSR cultural grasp phase to a final CSR Culture embedment phase. Alongside this, organisations move from a dismissing stage of development through to a transforming stage. The authors suggest that CSR development takes place through organizational change processes, which depend on an

organization's situation. Adopting these ideas of CSR development, stakeholder initiatives can be seen as facilitating the progress along these stages.

A CSR-inspired approach to the management of psychosocial issues at work can be characterized by five key components (Jain et al., 2011):

- 1. Making sure that the strategic importance of the management of psychosocial issues is recognized.
- 2. Integrating psychosocial issues in strategies, plans and processes for organizational development.
- 3. Organizing a good balance between implementation of systems, internalization of values, and organizational learning processes.
- 4. Being aware of the societal impacts of psychosocial risks in the workplace, but also of the business impact of psychosocial issues in society.
- 5. Engaging with stakeholders, including non-traditional stakeholders.

To facilitate the spread of CSR practices a number of instruments and tools have been created, by various stakeholders, at the international, regional and national level (Montero, et al., 2009; Segal et. al, 2003). These have sought to assist organizations "integrate CSR values into their strategy and operations, either by setting out principles for responsible behaviour, providing a set of procedures and implementation steps, or offering indicators and measurement methodologies to evaluate and report on performance" (EC, 2004a, p.7). There exist over 300 CSR guidelines and instruments, initiated by stakeholders including national or supranational institutions, NGOs, trade unions, enterprises or business associations (McKague & Cragg, 2007). Glinski (2009) notes that one of the aims of such self-regulatory tools, is to help to bridge the legal gap public law leaves. These tools include several elements related to the internal working environment.

3.6. Different contexts, different CSR priorities and working conditions needs

Another relevant issue about CSR is that different contexts are linked to different CSR priorities. Both standards and enterprises prioritise different issues according their context (Ripa & Herrero, 2012). Although the European Commission (2011) claims to promote a 'global CSR', ethical priorities change depending on region, national, community (urban, countryside), or business contexts. Cultural values, political framework and economic situation will affect citizens' expectations about corporate behaviour. Government action may also vary as may cooperation between enterprise, government and society, which may differ among countries (Albareda et al., 2007). Sector will also determine how companies define their commitment, decide how many and what instruments are used, choose their priorities, or assess impact (Barth & Wolff, 2009). Several industries are more focused on workers' rights and working conditions (food firms), others in workplace health and safety (chemicals, construction, and mining corporations) or provision of services to the poor (financial services, utilities etc.) (Blowfield & Murray, 2008).

A significant challenge to implementation of responsible business practices is that although many CSR standards target international multi-stakeholder organizations, most research and public initiatives on CSR come mainly from European and American countries. This may lead to a potential mismatch between 'priorities', which can worsen implementation (Waddock, 2008). Blowfield & Murray (2008) go further: "Western priorities for Africa might be to combat corruption, improve governance and transparency, and improve infrastructure, while local priorities might be to improve the terms of trading, create good jobs, and transfer technology" (p. 178). In Latin America, "advocates in the west may focus on rainforest conservation and biodiversity, while local people may be more concerned about poverty, poor education, bad housing, and scarce healthcare" (p. 178). The authors

argue that in general, the creation of social stability, the rule of law and a favourable business environment are concerns for business com-munities in developing countries. Some previous studies (PWC, Ethical Corporation, as cited in Blowfield & Murray, 2008) have analysed the most important CSR issues relative to each region. The EU prioritises sustaining welfare, health, and labour standards in a global economy. The USA defends public health accessibility, social security or corporate governance. Latin America focuses on the rich-poor divide, infrastructure or fighting corruption. Companies also focused on different themes depending on their country of origin. While US firms were focused on external issues including globalization, Japan and EU companies were more linked to consumers (Tate et al., 2010).

These problems transfer to the development and implementation of standards and instruments, which could be biased according to the geographical area in which each one has been created. Werhane (2010) has warned about the consequences of 'universal definitions of CSR': 'Individualistic' Western approaches (diversity, equal opportunities...) sometimes challenge community, cultural or religious tradition in non-Western settings, making it difficult for companies to follow them. The author suggests taking into account diverse settings and conditions. Consequently, Werhane (2010) demands global collaboration in "the implementation of the CSR agenda: what has to be done [...], how to be done [...], and how to measure progress" (p. 6) to create a "global commonly accepted CSR framework" (p. 6).

Rasche (2010) points out a deeper problem: It is neither possible nor desirable to create a standard which includes all the possible situations. As an example, the author refers to SA8000, an instrument which recognises the need of "demanding local adaptations according to the respective geographical, societal, political and economic circumstances" (p. 285)". For this reason, Rasche (2010) recommends understanding not just their content, but also the process of context specific adoption that must be done in practice. There is a need for further research surrounding this issue. Frederick (2008), a pioneer of CSR,

highlights several research needs: analysing the marginal CSR focus in developing nations, the North-South prosperity-poverty gap, the East-West religious-politico tensions or the development pressures on resources. These themes are also expressed by the CSR Platform project (EC, 2009b), which suggests that emerging economies and societies, and sector specific implementation will be the focus for future CSR research.

4. Development of CSR: CSR Standards and psychosocial risks

4. 1. Corporate Social Responsibility Instruments and Standards

To develop this chapter, an extensive literature review of CSR theories, tools and instruments was conducted using CSR monographs, international and institutional CSR reports, international organization webpages, and articles in academic journals. This has allowed the identification and classification of main CSR instruments and standards, analyzing both key and weak points and limitations. Finally, a sub-sample from Study 1 (28 CSR standards) was identified from literature review and used in last section of this chapter.

4.1.1 Kind of CSR standards

During last decade, scholars and CSR institutions have made strong efforts to rationalise these initiatives: Some CSR standards and instruments have created international governing bodies which govern them in collaboration with stakeholders, and old initiatives have been updated, standardised, made more comprehensive, and linked to other standards (Ripa & Herrero, 2012). Finally, CSR instruments are now stricter and more comprehensive than a decade ago (Ripa & Herrero, 2012). Some of them aim to make the connection to community development indicators (Instituto Ethos de Empresas e Responsabilidade Social, 2009; ISO, 2010; WBCSD & IFC, 2008). International organizations including the ILO, WHO, OECD, United Nations have created and updated

their ethics frameworks for companies in recent years, and the analysis of work satisfaction is becoming more prevalent (ILO, 2012a, 2012b). CSR instruments will continue to play a key role in the future; however they will be fewer, more global and stricter. Table 4.1. explain main characteristics of each category of standard.

Table 4.1. Description of the types of CSR standards and main characteristics

	Kind of CSR standard and instrument					
	Codes of Behaviour and Ethics Principles	Auditing and Management systems	Sustainability and Social Reporting	Social and Environmental Investment Indexes	CSR Reputation and Social Rankings	Multi- method Self- Improveme nt Instrument s
What are they?	A group of broadly agreed principles which business can sign. They define standards for company responsible behaviour, but do not provide external assurance. They usually include mechanisms to inform stakeholders about the company's follow-up of implementatio n. Some of them are written specifically for a company or a sector.	CSR management systems or frameworks aiming to integrate values into daily practices, processes and activities. They can be certified against a standard, after external assurance. They can be applied in organizations (EMAS) or facilities of the company (SA8000). These certifications include CSR labels to be placed on the packaging of products in order to influence purchasing decisions by consumers (Fair Trade Label-FLO, Ecolabel). These are governed by certification companies or by organizations managing the whole supply chain (e.g., buying directly from small producers).	Guides to standardize social and environmental reporting, according to stakeholders' expectations (GRI). By promoting transparency, social accountability improves. Initially, based on triple bottomline, today these are more focused on stakeholders and in the development process (AA1000). These can include external verification, or an assurance process by stakeholders or external partners.	Used by investment agencies or socially responsible investors to recognize responsible business. These measure companies' performance. Companies must be previously part of financial indexes to appear in social ones. There are inclusion and exclusion criteria, according to company activities. Focus is given to risk management. Sometimes supported by shareholder activism or institutional pension funds.	A rating of companies according to several economic, social or environmen tal practices, creating a ranking showing the leaders by areas, which increases corporate reputation.	A set of tools to promote self-improveme nt. They can also be manageme nt systems or guidelines, although they are not audited. They work as a benchmarking tool, and are implemented using guidance from governing organizations.
Key adva ntage s	 Broad consensus about principles; and dissemination. Easy to 	1. Multi-methods methodology: They get information to audit from different agents (managers, workers, NGOs).	 Broad coverage. Specific data which is publicly available. There are 	1. Higher profitability of companies in responsible indexes is claimed, although	1. Corporate reputation improves brand and company	1. Benchmarki ng and self- assessment help to evolve

	accept and to apply by the company. 3. CSR Self-development by companies (good for CSR culture). 4. Great legitimacy of some Ethics Principles.	2. It solves the problem of managers' biased information, increasing the reliability 3. Labelling and certification initiatives raise consumers' awareness.	reporting levels with stricter requirements (external verification) 4. Easier comparability among companies 5. Increasing of public perception of company's transparency.	still debated. 2. They can promote new investments and increase CSR interest. 3. Information available about excellent companies.	value. 2. They guide self- improveme nt to advance positions in the ranking. 3. Excellent companies are shown.	CSR. 2. An easy option for companies new to CSR. 3. They can lead to the use of other CSR initiatives.
Key probl ems	1. Principles are too broad. 2. No hard requirements to ensure compliance. 3. Non-external evaluation, reducing credibility. 4. Not adapted to specific company vision.	1. Complexity of the process, with evaluations facility by facility, which makes difficult its extension. 2. They no consider all CSR areas. 3.In many cases, no publicly available data 4. Labeling is many times focused just on specific market niches or on imported products (EC, 2004a, 2011). 5. Sometimes, there is confusion regarding multiple labels, or not enough information provided. 6. Costs are usually transferred to the consumers.	1. Social impacts not always comprehensively evaluated. 2. Level of detail is insufficient: gaps in certain areas 3. No minimum level of performance required. 4. Indicators to measure impacts not always common, so comparability is often not possible. 5. Time consuming.	1. Incomplete information. 2. Not applicable to companies that are not in the general stock indexes. 3. CSR requirements lower than other tools. 4. Specific responses by companies are not made public. 5. Controversial reliability: Some companies regarded as excellent by these indexes have been involved in unethical behaviours	1.No comprehen sive view of CSR 2. Focus on short-term, which can lead to 'green- washing'	1.No certification of improveme nt 2. Initiatives and information kept private
Main instru ment s	Global Compact (for some authors, a self- improvement instrument), OECD Guidelines, ILO Guidelines for MNE, Global Sullivan Principles, ETI Base Code	SA8000, Good Corporation Standard, SGE 21, Fair-trade Labelling Organization FLO, IFC Performance Standards.	Global Reporting Initiative, , AA1000.	FTSE4 Good Index Series; Dow Jones Sustainability Index, SOCRATES KLD Ratings, Ethibel-VIGEO	Fortune, Social Index (Denmark), Great Place to Work.	Ethos Institute Indicators, European CSR awareness questionnai re, ISO 26000, HRCA Checklist, WBCSD- Measuring Impact Framework.

Note: Adapted from Ripa & Herrero (2012).

4.1.2. Main CSR standards

The process of extension, legitimization and global governance has created several leading standards, which have been readily accepted by companies, increasing dramatically their relevance. Some of these international principles are being advocated for implementation by the European Union (EC, 2011a): the Global Compact, ISO 26000, OECD Guiçdelines for Multinational Enterprises, ILO Tripartite Declaration of Principles Concerning Multinational Enterprises and Social Policy, UN Guiding Principles on Business and Human Rights, etc. The Global Compact is a compilation of ten voluntary principles that organizations can adhere to (UN, 2000). Developed by the United Nations in 2000, the Compact's labour and human rights principles are based, similar to most CSR instruments, on the Universal Declaration of Human Rights and the International Labour Organization's Declaration on Fundamental Principles and Rights at Work. It is partly a self-improvement instrument, without external assurance systems. However, a Communica-tion of Progress explaining how principles are being applied must be done annually.

The Global Compact has been criticised (Rasche, 2009) due to its 'vague and thus hard to implement' principles and while its value is derived from the high credibility and perceived legitimacy of the UN, it has also been accused of representing a 'capture of United Nations legitimacy' by big business (Rasche, 2009). On the other hand, it is easy to apply; organizations have autonomy to develop policies, actions and evaluation. As such the Global Compact facilitates further involvement in CSR every year, after discussing, learning, empowering, and changing through its underlying principles (Rasche, 2009). Moreover, the Global Compact is the most widespread CSR instrument with more than 10,000 participants (7000 business) around the world in October, 2012. It has also a strong presence in developing and emerging countries, which allows "the possibility to really address global governance issues" (Rasche, 2009, p. 202). Conversely, their pres-ence in the United States is quite limited, representing just a small percentage of partici-pants, probably due to a culture of no collaboration with international organizations (Bremer, 2008) or to a higher

fear to be accused of 'bluewashing' by media – due to unethical use of the UN 'blue' flag (Rasche, 2009).

SA 8000 (SAI, 2008) is a labour auditing instrument, developed in 2000 (third version was released in 2008), by the NGO Social Accountability International, located in New York. Based on UN and ILO Conventions, it provides nine labour standards which should be verified through an evidence-based process (sourcing different company-stakeholders), conducted by an auditing organization. As a consequence, it certifies employees' working conditions, but not the entire company. It ensures the compliance with international, national or sectorial legislation, however, advocates adopting the strictest (and most favourable to workers) requirements in the case of conflicts. It takes into account the following nine labour-risk practices: child labour; forced and compulsory labour; health and safety; freedom of association and collective bargaining; discrimination; disciplinary practices; working hours; remuneration; and management systems. It is useful for auditing supply chains or facilities in countries with weak labour legislation.

The Global Reporting Initiative (GRI, 2006e) is a reporting instrument launched in 1999 (the fourth version will be available in 2013) by CERES, based in Amsterdam. It aims to create a common social and sustainability reporting framework for organizations, similar to financial reporting, in order to increase corporate transparency. Based on the triple bottom line, the third version introduced new areas and stakeholders (multiple bottom-line) to be considered, including: labour, human rights, society and product responsibility. Each of these considers key indicators which provide qualitative and quantitative data. It has become the main CSR reporting framework. During 2010, almost 2000 companies made a social report on the basis of the GRI methodology and there are most than 3000 reports in GRI database corresponding to 2011. According to International Survey of Corporate Responsibility Reporting (KPMG, 2011), 80 percent of the 250 largest companies in the world (G250 companies) and 69 percent of N100 companies now report on their corporate responsibility (CR) activities according to GRI Sustainability Reporting Guidelines.

Another mainstream reporting initiative is AA1000, developed by ISEA in 2003 (AccountAbility & KPGM, 2005; ISEA, 2003). It explains the process to interact and engage with stakeholders and to maintain an accurate level of credibility and quality in sustainable reporting. An important note is that this tool does not consider the level of performance regarding a CSR issue, but the way in which it is managed. It includes five phases: planning; accounting (stakeholder consultation, identification of issues and indicators, and collection of information); auditing by an external group, feedback and reporting; implementation; and stakeholder engagement.

Table 4.2. Summary of key CSR standards

CSR standard	Description of main characteristics
Global compact	Ten voluntary principles developed by the United Nations in 2000, which
·	organizations can sign up to without external assurance systems. To
	promote self-improvement, a Communication of Progress explaining how
	principles are being applied must be conducted annually.
Social	A labour auditing instrument, developed in 2000 (third version in 2008),
Accountability	by the NGO Social Accountability International, sited in New York. Based
8000 (SA8000)	on UN and ILO Conventions, it provides 9 standards which should be
	verifiable through an evidence-based process. They certify facilities, not
	companies.
Global	A reporting instrument launched in 1999 (fourth version in 2013) by the
Reporting	Global Reporting Initiative, in Amsterdam. It aims to create a common
Initiative (GRI-	social and sustainability reporting framework for organizations, similar
G3)	to financial reporting, in order to increase corporate transparency. Originally based on the triple bottom line, today it includes alternative
	areas and stakeholders.
ISO 26000	A guide regarding CSR launched in 2010 by International Organization
	for Standardization. However, it is not a certificate or standard, but a
	series of proposals to enterprises about what CSR is, and which applies
	to them. It recognizes a responsibility to exercise due diligence in
	preventing and addressing direct and indirect company's impacts.
UN Guiding	These include 31 principles -14 specific to business- adopted by the UN
Principles on	Human Rights Council in 2011. They aim to address the risk of business
Business and	activities on human rights. They operationalize the UN Protect, Respect
Human Rights	and Remedy Framework (State Duty to Protect, CSR to Respect, and
	Remedy for victims). It includes operationalization of these principles
OECD	and an interpretative guide. Based on the OECD Guidelines in 1976, updated in 2000 and 2011.
Guidelines for	These guidelines include voluntary good practices, relevant to OECD
Multinational	member countries. National Contact Points (NCP) monitor
Enterprises	implementation. In theory, trade unions could raise concerns about
, , , , , , , , , , , , , , , , , , ,	infractions if the NCP is not adhering to its responsibilities. However,
	NCPs have been underdeveloped and are not supported through
	regulation.
IFC	The International Finance Corporation Performance Standards are 8
Performance	Standards adopted in 2006 and updated in 2012 (IFC, 2012). All
Standard	companies financed by the IFC, as well as those financed by other
114	

institutions (e.g. some banks under the Equator Principles), are required to adhere to these standards. They cover social and environmental management and assessment systems; labour and working conditions; resource efficiency and pollution; biodiversity; community health, safety and security; land acquisitions; cultural heritage and indigenous peoples. Comprehensive guidance aids risk assessment for the lifecycle of projects, protecting local communities –who can raise grievances to IFC- and ensuring responsible performance.

ILO Guidelines for MNE

The ILO Declaration of MNEs, compiled by the International Labor Organization, the referent UN Agency in labour issues, that is jointly governed by business, unions and governments. They were created in 1977, but updated in 2000 and 2006. They are based on Fundamental Principles and Rights at work and several recent ILO recommendations, and apply globally. The ILO monitors their implementation with periodic surveys on. They promote collaboration between government and enterprise, linking CSR to this tripartite social dialogue and promoting government policies.

Fair-trade Labeling Organization FLO A worldwide fair-trade and certification organization, created in 1997, which develops international fair-trade criteria for products and processes originating from developing countries, monitoring their compliance.

DJSI: Dow Jones Sustainability Indexes These are 5 indexes which aim to track CSR performance. They exclude controversial business and include the top 10% of companies in the Dow Jones Global Index. SAM's Corporate Sustainability Assessment assesses opportunities and risks in economic, social and environmental dimensions, monitoring them continuously. Human Resources policies are a key area.

FTSE4 Good Index

Launched in 2001, by the FTSE group, an English company owned by the Financial Times and the London Stock Exchange. It is a benchmark index for investors seeking to measure the performance of responsible businesses, but it is also useful for other stakeholders. For inclusion, companies must be within the universe of the FTSE Share Index (UK) or FTSE Developed Index (Global), general economic indexes. Revised every 6 months, data collection is based on annual reports, company websites or public material, written questionnaires and liaising with companies. Global and regional (UK, US, Europe & Japan) Indexes exist with additional information sought for sectors, countries or operations with higher risks. There are also exclusion criteria and an engagement program to help companies meet the criteria.

HRCA Checklist

HRCA is a self-diagnostic tool to detect potential Human Rights violations, helping to improve enterprise awareness and to make remediate harmful incidents. It was developed by the Danish Institute for Human Rights (DIHR) in 1999. It is updated annually based on international agreements. The checklist includes 28 questions and 240 indicators. These were compiled following a consultation process with MNEs and human rights groups.

Ethos Institute indicators

Launched by Brazilian Instituto Ethos de Empresas e Responsabilidade Social, which is a group of over 1,350 companies. This is an external evaluation of the company, based on a set of indicators (often comprehensive in labour and community issues), oriented to their CSR self-improvement and evolution of corporate ethical culture. It includes benchmarking results against the best ten companies.

Note: Adapted from Ripa, & Herrero (2012).

The ISO 26000 guide created by the International Organization for Standardization (ISO, 2010) was one of the most anticipated CSR instruments, and the outcome of several years of discussion. It is a comprehensive guide considering social, civil, cultural, and political rights. While it lacks certification mechanisms, its broad coverage, manage-ment system and extensive and inclusive stakeholder-process in its development, make it a very useful tool to devise a global common framework regarding what CSR initiatives should be.

The UN Guiding Principles on Business and Human Rights (UN, 2011) has been anoth-er key development in the challenge of creating a global CSR compromise, and goes further than the Global Compact in United Nations' involvement. OECD Guidelines for Multinational Enterprises (OECD, 2011), ILO MNE Guidelines (ILO, 2006a) Fair-Trade mark of the Fair-Trade Labelling Organization (2011), Dow Jones Sustainability Indexes (SAM Research, 2009), and FTSE4Good Index (FTSE, 2006) are other global leaders in creating worldwide responsible principles, fair-trade labels, and sustainable investing indexes, respectively. Two self-improvement instruments: the Ethos Institute Indicators (Instituto Ethos de Empresas e Responsabilidade Social, 2009) and the HRCA Checklist (Danish Institute for Human Rights, 2006) are also relevant. These CSR standards are summarised in Table 4.2

4.2. Corporate Social Responsibility Standards: how psychosocial risk factors are covered

Despite the comprehensive coverage of labour issues in CSR instruments, employees' well-being in relation to CSR initiatives has not always received adequate interest from research. In this section we examine the coverage of psychosocial hazards in CSR instruments and standards, following a recent study conducted by Jain, Ripa and Herrero (2014) (see also Ripa & Jain, 2014; Ripa, Jain, Herrero & Leka). In addition, a literature review about the

impacts and prevalence of psychosocial risks at work was carried out using sources such as scientific journals as well institutional reports. This review also formed the basis for Study 3

Table 4.3. CSR tools and instruments included in the analysis

Amnesty International Human Rights Principles for Companies (1998)	1
Business Leaders Initiative on Human Rights (2009)	2
Caux Round Table Principles for Responsible Business (including the Stakeholder management guidelines, and the People, Performance, Well-Being Guidelines) (2008, 2010)	3
CSR-SC Project (2006)	4
Dow Jones Sustainability Indexes (SAM Research, 2009, 2011)	5
Ethos Institute Indicators (2009)	6
Ethical Trading Initiative Base Code (2010)	7
European Union Questionnaire to raise SME awareness of CSR (2007)	8
Fair Labor Association: Workplace Code of Conduct (1997, 2011)	9
Fairtrade Mark -Fairtrade Standards: FLO-CERT Public Criteria List - Hired Labour (2011)	10
FTSE4 Good Index Inclusion Criteria (2006, 2011)	11
Global Reporting Initiative GRI - 3.0,3.1 and 4.0 (2006e, 2011, 2012, 2013)	12
Global Sullivan Principles (1999)	13
Good Corporation Standard (2010)	14
Human Rights Compliance Assessment Checklist (HRCA) (2006)	15
IFC Performance Standard (World Bank group) (2010, 2012)	16
ILO Tripartite declaration of principles concerning multinational enterprises and social policy (2006)	17
IndicaRSE (Indicators for Central America) (2008)	18
ISO 26000 (2010)	19
Environmental, Social and Governance Ratings Criteria SOCRATES: KLD Ratings (2007)	20
OECD Guidelines for Multinational Enterprises (2008, 2011)	21
Social Accountability 8000 SA8000(2008) and Guidance Document (2004)	22
SGE 21 2008: Ethical and CSR Management System Forética (2008)	23
Sigma: Sigma guide to sustainability issues (2006)	24
United Nations Global Compact (2000)	25
United Nations Guiding Principles on Business and Human Rights (2011)	26
WBCSD- Measuring Impact Framework (2008)	27
XERTATU (2007)	28

On the basis of the review of CSR standards conducted in chapter 4.1., the authors conducted a framework analysis following the key stages reported by Ritchie and Spencer

(1994). A list of psychosocial hazards outlined by the WHO (2003) was used as the analytical framework. At the end of this process, the 28 CSR instruments and standards were selected and thematically analyzed using a top down approach based on this framework (see Braun & Clarke, 2006 for a discussion of this technique). Any relevant information was coded under these themes and as a results, the authors categorized them under the following ten psychosocial hazards: job content, workload and work pace, work schedule, control, environment and equipment, organizational culture and function, interpersonal relationships at work, role in organization, career development, and homework interface (Jain et al., 2014). Table 4.3 presents the list of selected instruments. The sections below present the themes and identify the instruments which include them (identified by the number assigned to each instrument in Table 4.3.).

4.2.1. Job Content

Psychosocial hazards related to job content have been characterized as lack of variety, repetitive and monotonous work or short work cycles, fragmented or meaningless work, under use of skills, high uncertainty, conflicting demands and insufficient resources, and continuous exposure to people through work (WHO, 2003, Cox, et al., 2000). According to the data of 2010 European Working Conditions Survey, jobs involving monotonous tasks are reported by 46% of EU workers, an increase from 43% in 2005 (Eurofound & EU-OSHA, 2014). This ranges from 64% in Croatia to 22% in Malta. Emotional pressures can also be a source of work-related stress. For instance, jobs which require to deal with angry clients are reported by 7% of EU workers, with a higher prevalence reported by younger and older women, and around a quarter of workers are required to hide their feelings at job, a figure that increases up 38 per cent in health care workers (Eurofund & EU-OSHA, 2014). These emotional demands are related to work-related stress and burnout (WHO, 2010). Lack of variety, repetitive and monotonous work have been associated with anxiety and depression, poor psychological health (Cox, 1985), health behaviours as smoking and drinking (Cox et

al., 2000) disorders of the digestive system and increased MSD (Cox et al., 2000; Fernandes et al., 2010; Norman, Floderus, Hagman, Toomingas, & Wigaeus-Tornqvist, 2008). Finally, several professions have been linked to higher levels of stress and burnout (e.g., teachers, nurses) (Gil-Monte, Carlotto & Gonçalves, 2011) and an increased risk of coronary heart disease (Hemingway & Marmot, 1999).

The analysis indicated that the coverage of such issues in CSR instruments was mainly limited to continuous exposure to people through work, as presented in Table 4.4.

Table 4.4. Job Content

Sub-themes	Issues in CSR standards	CSR
		standard
Continuous exposure to	Measures to protect workers against harassment, violence and	15
people through work	threats from external persons	
	Prevention of stress in specific sectors, with high exposure to	6, 12, 15
	clients or in dangerous activities and processes	
Job rotation	Rotation among different job positions at the same	18
	hierarchical level	

Only three instruments included indicators which required companies to monitor the exposure of employees to people through their work, which could lead to stress, violence or harassment from customers. For instance, indicator A.6.1.7 of the Human Rights Compliance Assessment Checklist seeks information of whether companies take 'special measures to protect workers from the harassing, violent and threatening conduct of outsiders, such as customers, vendors and clients'. In addition to exposure to people at work, job enrichment appears in only one instrument (IndicaRSE), in terms of job rotation.

4.2.2. Workload and work pace

The workload and work pace group of psychosocial hazards includes high levels of time pressure, work underload, high work pace or machinepace, and being continually subjected to deadlines and not having enough time to get everything done in job (Leka & Jain, 2010;

WHO, 2003), involving both the amount and the difficulty of the work. Work intensity has also increased between 1991 and 2005, but remained stable since then. According to the data from the 5th European Working Conditions Survey (Eurofund, 2012a), in 2010, 62 per cent of workers reported to work to tight deadlines at least a quarter of their working time, while 59 per cent worked at high speed at least a quarter of the time. Countries such as Cyprus, Germany, Greece and Slovenia showed higher levels of work intensity, whereas Bulgaria, Latvia, Lithuania and Portugal had the lowest levels (Eurofund & EU-OSHA, 2014). Economic crisis and job insecurity is increasing the workload, and higher number of workers feel coping with too much work or working very fast and feel overwhelmed (EU-OSHA, 2007; INSHT, 2012). Work intensification, high time pressures and the introduction of new information and communication technologies (ICT) at the workplace are emerging risks that may lead to poor communication at work, less respect for and trust with colleagues and, consequently, increasing work conflicts and worse work environment (EU-OSHA, 2007). Rydstedt, Johansson and Evans (1998) found in an 18-month longitudinal study that changes in workload increased fatigue out of the work (leisure time), perceived effort at work, and psychosomatic symptoms.

Table 4.5. Workload and work pace

Sub-themes	Issues in CSR standards	CSR
		standard
	Review of workload and need for extra workforce	4, 6, 10, 15,
Workload planning		19, 22, 28
	Analysis of accidents and worker turnover related to work overload	6, 15,19, 22

High job demands, expressed as high work pace or work overload, have been associated with work-related stress, work-life balance and MSDs, as well as psychological (e.g., depressive symptoms, psychiatric disorders), physical (eg., heart diseases), behavioural (e.g., smoking) and organizational problems (e.g., job dissatisfaction, intention to leave,

increased absenteeism and accidents at work) (e.g., Allesøe, Hundrup, Thomsen, & Osler, 2010; Caro-Villamil, 2007; Cortese, Colombo & Ghislieri, 2010; Kaliniene, Ustinaviciene, Skemiene, & Januskevicius, 2013; Rydstedt, et al., 1998; Saijo, 2008; Slany et al., 2014; Stansfeld, Fuhrer, Shipley, & Marmot 1999). Working to tight deadlines is also related to high levels of stress and health problems (Leka & Jain, 2010). As presented in Table 4.5, the analysis indicated that CSR instruments included two themes: workload planning, and breaks and days off.

Some CSR instruments inquire whether organizations review workload and take necessary measures to prevent peaks of work during the year rather than making workers work overtime. These include analysis of level of accidents that are related to work overload and fatigue in comparison to company industry/sector or activity (e.g. SA8000, HRCA, A.6.5.11). For example, Fair Trade Mark, indicator 1.5.1.13.2, requests the company 'to prepare an annual overview of the company's need for workforce indicating the periods when non-permanent workers will be needed'. CSR instruments also include indicators on working hours within the context of workload, for example Ethos Institute, indicators I.16.13 – 16.17, compare the average of extra hours per year worked by employee with the average of workers' accident per year to ascertain the impact of workload on accidents.

4.2.3. Work Schedule

Psychosocial hazards related to work schedule include shift working, night shifts, inflexible work schedules, unpredictable hours, long or unsociable hours or job tasks that require interruption to sleep patterns (WHO, 2003). Control over work schedules can reduce negative effects on workers' health. Long working journeys are still an issue although working hours have decreased from 40.5 hours in EU12 in 1991 to 37.5 hours in the EU28 in 2010, ranging from the 31.9 hours per week in the Netherlands to the 45.2 hours per week in Greece. In the EU, 21 per cent of workers still work longer than 48 hours per week (Eurofound & EU-OSHA, 2014), despite of the EU Working Time Directive that sets a 48

hour-maximum weekly working time. The length of the working journey presents some differences across sexes: women spend on the average 64 hours a week working, commuting to work, and in caring activities, while men spend 53 hours in the same tasks (Eurofund, 2013b). Women in sales, hospitality, management, agriculture and service are also commonly working long hours (Eurofund, 2013b). Work-life balance causes health problems for 18 per cent of workers in Europe (21 per cent of men and 16 per cent of women) (Eurofound & EU-OSHA, 2014). Long working hours is still a problem in other countries around the world. In Korea, workers worked on average, 47.6 hours per week, and 49.5 per cent of employees worked over six days per week (Eurofund, 2012a), meanwhile in Canada, 65% of workers were working over 45 hour a week (Duxbury & Higgins, 2012), and in the USA, 18.7% of workers were working 48 hours or more per week, according to the NIOSH occupational health supplement to the National Health Interview Survey (Alterman et al., 2013a).

Dembe, Erickson, Delbos and Banks (2005) found that working in jobs with overtime schedules was associated with a 61% higher injury hazard rate, while working more than 12 hours per day increased a 37% the hazard rate and working. A meta-analyses from Sparks, Cooper, Fried and Shirom (1997) found a small but significant positive relation between overall health, physiological and psychological health symptoms and hours of work. In the USA, 28.7% of workers were working in non-standard shifts (Alterman et al., 2013a, 2013b). Long work schedules and shifts can reduce length and quality of sleep, provoke conflicting between work and home demands, increase conflicts at work and work-related stress. Literature associated shift work and long working hours with disruption of circadian rhythms, which is linked to peptic ulcer disease and coronary heart disease (Harrington, 2001; Knutsson, 2003). Performance, sleep patterns, accident rates, mental health (e.g., anxiety, depression), and reproductive outcome effects also can be found (Harrington, 2001). A review conducted by Vyas et al. (2012) of 34 primary data samples from studies reporting risk ratios for vascular morbidity and mortality, or all cause mortality in relation to shift work found that shift work was associated with vascular events, such as myocardial infarction, ischaemic stroke and coronary events. Similar results were found by Virtanen et 122

al. (2012), which concluded around 40% excess risk of cardiovascular heart diseases related to long working hours. Higher self-reported hypertension was found on workers working over 40 hours per week (14% more than workers under 40 hours per week, which increases up 29% higher risks for workers over 50 hours per week) (Yang et al., 2006). Working longer than 55 hours was associated with type 2 diabetes but only in individuals in the low socioeconomic status groups, after conducting a meta-analysis with data from 222.120 individuals (Kivimäki et al., 2015). Other authors found suggestive but not conclusive results for the relation between night and shift work and breast cancer, cardiovascular disease, metabolic syndrome and diabetes (Wang, Amstrong, Cairns, Key & Travis, 2011). Shift work can increase additional risk factors, such as physiological, behavioural (e.g., diet, smoking, exercise, diet), and psychosocial factors (e.g., less worklife balance, poor recovery, less control) (Puttonen, Härmä & Hublin, 2010). In this sense, increased risk of cardiovascular morbidity caused by long working hours and shift work has been linked to insufficient or poor sleep, related to insufficient recovery (Härmä, 2006).

An increase in stress level was associated with working long or unsociable hours and nights (Smith, 2000), evening shifts (Shields, 2002), and long working hours (Grosch, Caruso, Rosa & Sauter, 2006), while with irregular working hours with low predictability impacted on work-life balance and caused sleep disturbances and fatigue (Bohle, Quinlan, Kennedy, & Williamson 2004). Furthermore, working long hours was associated with higher job demands and lower job control (Umehara, Ohya, Kawakami, Tsutsumi & Fujimura, 2008). Long term sickness absence is also higher for shift workers (Slany et al., 2014). Specifically, fixed night workers had lower job control and support from leaders, suffer more violence, and had higher physical demands, but are less exposed to psychosocial demands (Nabe-Nielsen, Tüchsen, Christensen, Garde & Diderichsen, 2009).

Two themes emerged from the analysis which included issues relating to information and clarity about work schedules, and long working hours including overtime. Themes are presented in Table 4.6.

Table 4.6. Work Schedule

Sub-themes	Issues in CSR standards	CSR
		standard
Information and clarity	Fair and legally compliant work schedules clearly	2, 10, 16,
about work schedules	communicated to workers (e.g. through written contracts,	19, 22, 24,
	collective agreements)	28
	Paid holidays	2, 10, 15,
		19, 22, 24
	Non-standard schedules (shift working, night shifts etc.)	4, 22, 24
Working hours	Maximum weekly hours - schedules, requirements, days off	2, 4, 7, 9,
		10, 11, 15,
		19, 21, 22,
		24, 28
	Provision of breaks during work hours	10, 15
	Recording incidence of over-time	4, 6, 7, 9,
		10, 15, 19,
		22, 24, 28

Themes emerging under information of working conditions in relation to schedule included providing employees access to written contracts, collective agreements and information about their rights and working conditions in a fair and transparent manner. Several CSR instruments emphasize that enterprises adhere to fair, favourable and legally recognized (either in national laws and international standards) working conditions. This includes decent conditions of work with regard to hours of work (e.g. Fair Trade Mark, indicator 1.5.1.7.1.), weekly rest, and holidays (e.g. ISO 26000, section 6.4.4 Labour practices issue 2), including access to written contracts or collective agreements (e.g. BLIHR, 15.a.; SA8000, standard 7). Recommendations on the analysis and reporting of non-standard schedules are also included in some CSR instruments (e.g. Sigma Guide to Sustainability Issues: Flexible working). Setting limits on extra hours, linked to long schedules, appears in several CSR instruments. Maximum hours will be lower if industry norms or national laws

require so; for example, HRCA Checklist indicator A.6.5.1 states 'company work hours are limited to 48 per week by both company policy and in practice (or fewer hours if provided by national law or industry standards'. While some instruments recommend that overtime should be compensated for, and not required on, a regular basis; for instance the Ethical Trading Initiative Base Code notes '...workers shall be provided with at least one day off for every 7 day period on average. Overtime shall be voluntary (...) and shall not be demanded on a regular basis'.

4.2.4. Control

Psychosocial hazards related to control include low participation in decision making, lack of control over workload, pacing, and work organization (Leka & Jain, 2010; WHO, 2003) including aspects such as involvement of workers in decision-making committes (e.g., health and safety committees, meetings about organizational changes), employee grievances and communication with management, or industrial relations system (e.g., employee representation and collective bargaining). Workers' involvement in decision making which can improve workers' health, job satisfaction and self-esteem while reducing work-related stress (Cox et al., 2000). In the EU-27, over 30% of workers reported that they have not autonomy to choose their method, order or speed of work or not being able to take a break (Eurofund, 2012a). For instance, 70 per cent reported the ability to change the order of tasks, 67 per cent can change the method of work, 70 per cent the work pace, or 65 per cent can take a break when desired (Eurofund & EU-OSHA, 2014). However, lack of control over working hours and irregular schedules is still problematic in Europe, impacting on work-life balance. For instance, 35 per cent of workers state that their working time changes regularly, including working a different number of hours every day and having variable starting and finishing times. Half of them are warmed of these changes during the same work day or the day before. Autonomy is higer in Nordic countries and the Netherlands, and lower in Austria, Bulgaria, Germany and Slovakia (Eurofund & EU-OSHA,

2014). For instance, workers in Nordic countries report a high level of irregular working hours, but also more influence of working time, thus reducing the negative impact on health. This does not apply to countries such as Czech Republic with high level of irregular schedules and low level of control over their schedules (Eurofund & EU-OSHA, 2014).

It is commonly argued that more job control would reduce stress and improve health, although if greater decision authority requires higher demands could be also stressing or provoke distress (Marchand, Demers & Durand, 2005). Furthermore, the perception of low control at work or of loss of control – low decision latitude – is consistently associated with the level of stress, specifically when there are also high job demands, and with several ill-health impacts (e.g., psychological disorders as anxiety or depression, cardiovascular symptoms, coronary heart disease, burnout, apathy and exhaustion, MSDs symptoms, as lower back pain, upper limb and neck pain), less healthier behaviours (eg., eating, lower physical activity) and poor self-reported health, depressive symptoms and sickness absence (Amick et al., 1998; Leka & Jain, 2010).

Specifically, longitudinal studies show how coronary heart disease has been linked to low job control and skill discretion (Bosma et al, 1997; Bosma, Stansfeld & Marmot, 1998; Marmot, Bosma, Hemingway, Brunner, & Stansfeld, 1997), while keeping job control over the time had accumulative effects (Bosma et al, 1997) or can protect from the risk of mental disorders (Joensuu et al, 2010). Marmmot et al. (1997) in a longitudinal study found that occupations charactised by low control had an increased coronary heart disease risks. Other health effects such as hypertension, back pain, and gastro-intestinal problems pains after work, physical symptoms and a higher incidence of long-term sick leave (Oxenstierna, Ferrie, Hyde, Westerlund, & Theorell, 2005), and poor mental health (anxiety, psychiatric morbidity, depressive symptoms) (Rugulies, Bültmann, Aust, & Burr, 2006) have been related to low control.

The analysis indicated that there was broad coverage of these hazards in CSR instruments (Table 4.7), with detailed coverage of issues relating to industrial relations systems and involuntary or forced work.

Table 4.7. Control

Sub-themes	Issues in CSR standards	CSR standard
Communication	Communication and suggestions: upwards communication	3, 6, 10, 14, 18, 19,
and involvement	from employees	22, 23, 27, 28
	Workers' participation in decision making part of corporate	4, 6, 8, 17, 18, 20,
	governance	21, 28
	Involvement of workers (or representatives) in health and	2, 6, 7, 10, 12, 15-
	safety committees, joint labour management programmes	17, 19, 21, 22, 24
	and professional development (internal mobility)	
	Communication, dialogue or negotiation with trade unions	3, 5, 6, 12, 15, 17-
	and employees prior to organizational changes	19, 21, 23
Employee	Grievance system: provision of information and accessibility	2, 3, 5, 10, 11, 12,
grievances	to employees	14-17, 19, 21-23,
		25- 27
	Grievance system which ensures transparency of the	10, 15-17, 19, 21,
	process and includes feedback from management and	26
	workers' representatives	
Industrial	Freedom for workers' organization and collective bargaining	1, 2, 4, 7, 9-25, 27
relations system	including non- interference from the company	
	Employee representation and collective bargaining: Well-	2, 6, 7, 11, 14, 15,
	functioning system and recognition by the company	17-22, 25
	Penetration of representation system within the company	4- 6, 10, 11, 12, 18,
		22, 28
	Actions and guarantees when no existence of trade unions	1, 4, 7, 10, 11, 15-
	in the area or company	17, 19, 21, 22, 24
	Negotiation and adherence to collective bargaining	5, 6, 10, 12, 15-17,
	agreements – at company and at sector level	21, 22, 25
	Support to trade union functioning to improve	6, 10, 15, 17-19,
	representation and collaboration with the company	21, 22
Control over	Fair and transparent conditions regarding termination of	2, 7, 10, 15, 22, 25
involuntary/forced	employment	
work	Elimination of compulsory or involuntary overtime	7, 10, 15, 19, 22

CSR instruments emphasize the importance of employee involvement and communication and the existence of effective grievance systems. These include mechanisms which stimulate upward communication, follow-up employees' suggestions or complaints and allow

remediation for any human right impacts. While some instruments promote a broader approach in decision making processes and structures, establishing two-way communication processes with company stakeholders (ISO 26000 section 6.2.3.), others are more directive on requirements. For instance, SGE 21 2008: Ethical and CSR Management System Forética (2008) notes: "Organisations will make available to all personnel the appropriate channels through which to direct their suggestions, complaints or grievances regarding aspects related to the Ethical and Socially Responsible Management System of their organisation. A record will be kept with the entries and the measures adopted for the resolution of grievances, as well as their effectiveness".

Control at work is also included in several CSR instruments as a feature of an industrial relations system which includes freedom of workers to organize and engage in collective bargaining and their rights to: strike, assemble, elect representatives, bargain, and express their view directly or through their representative. For example, the Tripartite Declaration of Principles concerning Multinational Enterprises and Social Policy (ILO, 2006a) states that: 'Enterprises should (...) Respect the right of their employees to be represented by trade unions and other bona fide representatives of employees, and engage in constructive negotiations, either individually or through employers' associations, with such representatives with a view to reaching agreements on employment conditions".

Finally, also linked to control at work, some CSR instruments require companies to prohibit involuntary or forced work. This includes employee lack of control about the decision of leaving the work, involuntary overtime and lack of control over an employee's own work schedules. For example, the Human Rights Compliance Assessment (HRCA) Quick Check (indicator A.1.1.9) assesses whether a 'company (or its recruiting agencies) does not charge workers recruiting or hiring fees that require the worker to be indebted to the company (...), or to work for the company (...) to pay off the debt (....)The company pays a living wage and does not compel workers to engage in a cycle of salary advancements in order to meet living expenses (....) The company does not coerce or compel employees to work involuntary (overtime) hours (or work itself) by the use of threat or force'.

4.2.5. Environment and Equipment

Physical work environment and equipment may become a risk factor if there is not an adequate equipment availability, suitability or maintenance; poor environmental conditions such as lack of space, poor lighting, and excessive noise (WHO, 2003), which lead workers to report more likely that their health is at risk at work (Eurofund, 2007). Physical risk factors and ergonomic conditions can impair employees' health and provoke burnout (Nahrgang, Morgeson & Hofmann, 2011), long term sickness-related absence (Laaksonen, Martikainen, Rahkonen, & Lahelma, 2008) and occupational illnesses (Lu, 2008). For instance, excesive noise can provoke psychological reactions (e.g., stress, anxiety, fatigue) and physiological responses that affect workers health (Leka & Jain, 2010). The analysis indicated that these hazards are broadly addressed in CSR instruments, as presented in Table 4.8.

Table 4.8. Environment and Equipment

Sub-themes	Issues in CSR standards	CSR standard
Equipment: availability,	Safe protective equipment and machinery	2, 10, 12, 15, 16,
suitability and		18, 19, 21, 22
maintenance	Employees' access to instructions about equipment and	2, 5, 6, 10, 11, 15,
	protective measures	17, 18, 22, 23, 25,
		28
Physical work	Optimal environment: noise, light, heat, ventilation, air	2, 10, 15, 16, 19, 22
environment	Safe facilities and services	2, 7, 10, 15-17, 19,
		22, 27
	Safe processes and protection against dangerous	2, 10, 15, 16, 19,
	substances and techniques	21, 22
	Emergency action plans	2, 5, 10, 12, 15, 16,
		19, 21, 22

CSR instruments were found to include indicators which require companies to ensure the provision of safe equipment and machinery, such provision of free protective equipment; regular inspection, maintenance and repair of machinery; provision of tools to deal with

risks and emergencies. Regarding the theme holistically, Principle 5 of the Global Sullivan Principles for Corporate Social Responsibility (1999) asks enterprises to: 'Provide a safe and healthy workplace; protect human health and the environment; and promote sustainable development'. Some indicators require companies to provide employees access to health and safety instructions about equipment and protective measures (e.g. through on-site training, training in a language known by the worker, training for new workers, new training in the case of accidents or reassignment). For instance, FLO-CERT Public Criteria List - Hired Labour - Fair Trade Mark Standard (2011) recommends that: 'Annually workers (including new and reassigned workers) and their representatives are trained in the basic requirements of occupational health and safety, relevant health protection and first aid'.

CSR instruments also require companies to provide optimal environmental conditions, safe facilities and services to enable workers to safety and effectively perform their role. These include adherence to safe processes which include ensuring adequate protection (physical and psychological) against dangerous substances and processes through regular tests, records, cautionary measures and presence of emergency action plans which include worker rights to refuse or leave work when posed with imminent and serious danger. For example SA8000 states: 'All personnel shall have the right to remove themselves from imminent serious danger without seeking permission from the company'.

4.2.6. Organizational culture and function

Psychosocial hazards related to organizational culture and function include poor communication, low levels of support for problem solving and personal development, and lack of definition of, or agreement on, organizational objectives (WHO, 2003). Discrimination can be a consequence of an unfair organizational culture. For instance, women are still paid 17.4% less for their work than men in the EU-27, either because they remain in less valued jobs or are paid relatively less for equivalent work (Eurofound, 2011b). Self-perceived discrimination can impact on workers' health, as it was found for women after controlling for emotional and physical health and job characteristics (Pavalko, 130).

Mossakowski & Hamilton, 2003). Workplace injusticies against demographic minorities can impact on their health, suffering more adverse results, while also influencing their health through effects on their family life, unhealthy behaviours and job-related outcomes (Okechukwu, Souza, Davis, & de Castro, 2014). Workers who experience any workplace injustice reported an increased risk for physical and mental health problems (i.e., backaches, muscular pain, stomach pain, overall fatigue, headaches, anxiety/depression, sleeping problems, and injury) and absenteeism (Min, Park, Kim & Min, 2014).

The analysis indicated that while these hazards were covered in some instruments, the focus was on non-discrimination. Table 4.9 presents the key themes that emerged in this area.

Table 4.9. Organizational culture and function

Sub-themes	Issues in CSR standards	CSR standard
Organizational	Regular downwards communication	3, 4, 14, 18, 19, 27
climate	Measuring work climate and job satisfaction and promoting	4- 6, 18, 23, 27, 28
	a positive work environment	
	Organizational justice and addressing salary inequalities	3, 6, 12, 20, 24, 28
	Sharing of profits and corporate performance-based	5, 6, 20, 28
	compensation	
Conflict	Level of conflicts within the company and disciplinary	4, 10, 18, 22, 27, 28
resolution	dismissals	
	Avoidance of disciplinary deductions from wages	2, 4, 7, 10, 15, 19, 22,
		24
	Provision of conciliation machinery	3, 10, 17, 19, 22
Continual	Health and safety compliance in all countries, certifications,	1, 3-7, 9-23, 25, 28
improvement	excellence and budget	
in health and	Implementation of health and safety policies	1- 3, 5, 6, 8-11, 13-23,
safety		25
performance	Implementation of health and safety management systems	2, 4- 6, 10, 11, 15-17,
		19- 23
	Minimization of hazards and impact assessment of health	2, 4, 5, 7, 10, 16, 17,
	and safety risks	19, 21, 22, 24, 25
	Investigation, documentation and evaluation of work-related	2, 4- 6, 10-12, 15, 16,
	injuries, diseases and accidents	19, 22, 25, 27, 28

	Training in health and safety	2, 6, 7,10-12, 14-19, 21, 22, 27, 28
	Awareness raising and educational campaigns in health promotion	2, 6, 12, 18, 19, 21
	Monitoring worker satisfaction on health and safety	6, 15, 22, 24, 27
Equal opportunities	Non-discrimination against any group or person	All instruments
and non-	Policies and mechanisms to avoid discrimination against vulnerable groups and to monitor diversity in the workforce	All instruments
discrimination	Affirmative policies to promote development of vulnerable groups	2, 4, 6, 10, 16-21
	Promotion of diversity and culturally sensitive environments	2, 6, 15, 19, 20, 22, 24, 28
	Policies to avoid discrimination due to marriage, pregnancy	2, 6, 10, 12, 15, 19, 21,
	or parenthood	22
Ethics and	Promoting an ethical and human rights culture including	All instruments
Human Rights	respect for workers' civil and human rights and ILO	
	fundamental principles and rights at work	
	Fair and legally compliant working conditions clearly	1-3, 7, 9,10, 14-16, 18,
	communicated to workers	19, 22, 24
	Monitoring working conditions and human rights for staff	1, 2, 5, 10-12, 14, 16,
	and agency workers	19, 21-23, 25, 26
	Elimination of forced or compulsory labour	1- 7, 9-27
	Elimination of child labour	1, 2, 4-7, 9- 27
	No limitations of movements after work and freedom of	10, 15, 16, 22
	accommodation	

CSR instruments include several indicators aimed at improving organizational climate. These include, ensuring regular downwards communication about the company's initiatives and policies, mechanisms to assess the work climate within the company which can be used to detect structural problems and the presence of other psychosocial hazards and in turn promote employees' job satisfaction and well-being. Another theme that appears in several CSR instruments is the sharing of profits and organizational justice. Instruments take into account the percentage and kind of compensation of these mechanisms. For example, the Sigma Guidelines on Sustainability Issues state: 'The payment to directors and other senior employees of salary, bonuses, compensation and other payments out of keeping with organizational performance or misaligned to remuneration of the full range of employees

(...) can have a destabilizing effect on the workforce and other stakeholders, such as investors'. Assessing the level of conflicts within the company, monitoring information regarding disciplinary measures, legal actions by workers, impact of strikes and prevention of such industrial disputes through provision conciliation mechanisms was also found to be included in CSR instruments as a means of promoting organizational culture.

CSR instruments also recommend that companies monitor health and safety performance (including workers' perceptions of their health, safety climate etc.) by having effective monitoring and evaluation mechanisms in place. For example, item LA6- of the GRI 4.0 assesses whether companies record 'type of injury and rates of injury, occupational diseases, lost days, and absenteeism, and total number of work-related fatalities, by region and by gender'. Provision of training in health and safety was also a recurring theme. This relates to companies providing managers, employees and their representatives' access to occupational health and safety training and instructions, and educational campaigns and awareness-raising in health and safety. Ensuring compliance with set legislation/standards, and having in place relevant policies and actions plans (including preventative ones), is also recommended by most CSR instruments, which should be consistent for all workers regardless of the company location, age, gender and ethnicity, to ensure workers' health and safety, where adequate provisions are made for vulnerable workers.

The existence of equal opportunity and non-discrimination policies were one of the key areas included in most CSR instruments in relation to organizational culture and function. These instruments require companies to avoid any kind of discrimination to any group or person, even when national laws in the operating country are silent or even promote discrimination. CSR instruments also mention several areas where there may be a need to implement affirmative policies and also ensure non-discrimination. For instance, International Finance Corporation's Performance Standard (2010), states that: '(...) Special measures of protection or assistance to remedy past discrimination or selection for a particular job based on the inherent requirements of the job or promoting local

employment, particularly those individuals or communities that are directly affected, will not be deemed discrimination, provided they are consistent with national law'.

CSR instruments often encourage the promotion of an ethical organizational culture and also emphasize respect for workers' and community civil and human rights, often requiring the monitoring of working conditions (e.g. due diligence to identify, prevent and mitigate direct or indirect impacts on individuals) and a remediation of human right impacts (e.g. GRI 4.0 indicators HR 9 and12; UN Guiding Principles). For instance, the FTSE 4 GOOD index (2006, pp. 5-6) takes into consideration: 'Human Rights Criteria for Companies with Significant Involvement in Countries of Concern or for companies in the global resource sector (...) Management. Employee Human Rights training. Training for employees globally in its human rights policy Human Rights Criteria'. Another topic that appears in CSR instruments is forced labour. This includes aspects such as elimination of forced and child labour, limitation of movements after work (e.g. freedom to leave company facilities after work), freedom of accommodation to workers (e.g. possibility to choose own accommodation, freedom to leave the company's accommodation after work), which is a key issue if workers are migrants (or irregular migrants) or isolated from their families and social networks.

4.2.7. Interpersonal relationships at work

Interpersonal relationships at work social or physical isolation, poor relationships with superiors, lack of co-workers or superiors support, interpersonal conflict, harassment, bullying and violence (WHO, 2003). Social support from co-workers and managers is increasing in the last years in the EU-27, and only 10 per cent of workers reported lack of social support from colleagues in 2010, with higher levels of social support in Italy and lower levels in Denmark, Ireland or Portugal (Eurofund & EU-OSHA, 2014). According to abuse, bullying and harassment, verbal abuse at the workplace was pointed out by 11 per

cent and suffering humiliating behaviour by 5 per cent (in the previous month), 4.1 per cent of all respondents had been subjected to bullying or harassment at work, 2 per cent to physical violence, 1 per cent to sexual harassment in the last year, and 6 per cent to some form of discrimination at workplace (Eurofund, 2012a). In sum, 14 per cent of EU workers reported in 2010 any type of adverse social behaviour, with higher exposure in Austria and Finland and lower in souther countries (Italy, Portugal and Spain) (Eurofound & EU-OSHA, 2014). Impact of bullying is increasing in Europe in recent years, especially in the UK, Denmark and Czech Republic (Van Gyes & Szekér, 2013).

In other regions of the world, bullying, violence and harassment also show a significant impact. For instance, 7.8 per cent of workers reported have suffered bullying, threats or harassment in the previous year in the USA (Alterman et al, 2013b). In Australia, bullying in the previous 6 months was reported in 2010 in the Australian Workplace Barometer (n=5,743) by 6.8 per cent of workers, while 3.5 per cent reported that bullying took place for longer than 6 months (Dollard et al., 2012). In Japan, according to the MHLW Survey (Workplace Power Harassment Survey) in 2012, more than 25 per cent of workers had experienced workplace bullying in the last three years (Naito, 2013). Violence also comes from clients and customers, especially in professions with high exposure to them. In Central America, 8.7 per cent reported that had suffered violence caused by criminals (Benavides et al., 2014).

However, it has been demanded a more reliable epidemiological data and reliable tools to assess violence and bullying, as well as global models focused on the contextual and organizational antecedents and organizational and individual consequences of these psychosocial risks (EU-OSHA, 2007). More interpersonal conflicts can be caused by work intensification (e.g., more pressures and telework, less direct contact, more isolation) and higher job insecurity (e.g., higher competitivity) (EU-OSHA, 2007). Several terms are used to explain the same phenomena: workplace bullying, harassment or mobbing (Lippel, 2010). Bullying at work means:

"Harassing, offending, socially excluding someone or negatively affecting someone's work tasks. In order for the label bullying (or mobbing) to be applied to a particular activity, interaction or process it has to occur repeatedly and regularly (e.g. weekly) and over a period of time (e.g. about six months). Bullying is an escalating process in the course of which the person confronted ends up in an inferior position and becomes the target of systematic negative social acts. A conflict cannot be called bullying if the incident is an isolated event or if two parties of approximately equal 'strength' are in conflict" (Einarsen, Hoel & Cooper, 2003, p. 15).

Violence at work is "any action, incident or behaviour that departs from reasonable conduct in which a person is assaulted, threatened, harmed, injured in the course of, or as a direct result of, his or her work" (ILO, 2006b, p.10). Physical and psychological violence can come from a third party (clients, patients, pupils, customers) or internal (co-workers, supervisors), and include threats of violence (Di Martino, Hoel, & Cooper, 2003). Suffering or being exposed to bullying, mobbing or violence at work could provoke severe health effects (e.g., post-traumatic stress disorder, anxiety, depression, somatic pathologies, physical damage, suicide) (ILO, 2012b). Specifically, it has been associated with anxiety, depression, sleep problems and stress (Hoel, Sparks & Cooper, 2001), with longer absenteeism (Slany et al., 2014), with higher risk of burnout and intention to quit (Estryin-Behar et al., 2008).

Low social support at work can also affect immune system and facilitate higher rates of diseases and stress levels and predict poor self-reported health, occupational injuries and long sickness absence (Bourbonnais & Mondor, 2001; Niedhammer, Chastang & David, 2008; Slany et al., 2014), burnout (Sundin, Hochwälder, Bildt, & Lisspers, 2007) and presenteeism (Hansen & Andersen, 2008), while perceived organizational support and caring could be related to job satisfaction, performance and intention to quit (Rhoades & Eisenberger, 2002). Low co-workers support has been associated with psychological

problems (e.g., high anxiety, depression, psychiatric morbidity), MSDs, increased risk of cardiovascular disease and low job satisfaction (e.g., Feveile, Jensen & Burr, 2002; Kopp, Stauder, Purebl, Janszky, & Skrabski, 2008; Simmons & Swanberg, 2009; Stansfeld et al, 1999). Meanwhile, co-worker support was associated with a reduced risk of non-depressive mental disorders and lower distress (Joensuu et al., 2010) and lower ill-health symptoms and long-term sick leave (Oxenstierna et al., 2005).

Table 4.10. Interpersonal relationships at work

Sub-themes	Issues in CSR standards	CSR standard
Poor relationships with	Written policies, training and procedures to avoid physical,	1-3, 6, 7, 9-16,
superiors: Harassment	psychological or verbal abuse, violence or harassment from	18, 19, 22, 24-
and violence from	superiors	26
superiors	Monitoring of abuses, violence and harassment	10, 12, 15, 22,
		23, 26
	Complaint and appeal system about disciplinary procedures	1, 6, 10, 15,
	or bad treatment to workers	18, 25
	Investigation of incidents and remedial action taken	1, 12, 15, 26
Bullying, harassment	Written policies to avoid physical, psychological or verbal	1-3, 6, 7, 9,
and violence from	abuse, violence, bullying and harassment (among staff)	10, 12, 14-16,
colleagues		18, 19, 22, 24,
		25
	Monitoring of abuses, violence, bullying and harassment	10, 12, 22, 23
	from colleagues	
	Complaint and appeal system about bullying and	6, 10, 15, 18,
	harassment from colleagues	25
	Prevention of interpersonal conflicts and tensions leading to	12, 15
	violence	
	Investigation of incidents and remedial action taken	1, 12, 15

For many researchers, social support (in and out of the job) can play a moderating role on the other psychosocial hazards: the lower is the social support, the more pronounced are the effects of psychosocial risks. After conducting a meta-analysis on 68 studies, Viswesvaran, Sanchez, and Fisher (1999) concluded that social support had a threefold effect by reducing the strain experience, mitigating perceived stressors and moderating the stressor-strain relationship. The findings indicated that most indicators from CSR

instruments were limited to harassment, bullying and violence at work and to some extent social or physical isolation (Table 4.10).

Employees can be subject to bullying, harassment and violence from their superiors (managers, supervisors), work colleagues and even company security personnel. Some CSR instruments require company and managers to avoid the use –or acceptance- of corporal disciplinary punishment, mental, verbal, sexual or physical coercion or harassment. These include provision of training to management to not use any corporal, mental or moral abuse; clear codes of conduct and written policies about treating employees with dignity; the existence of clear and proportional disciplinary procedures, which should be communicated, monitored, publicly reported and remedial action taken. For example, the Human Rights Compliance Assessment (HRCA) Quick Check (2006) which states: 'Does the company take measures to protect workers from acts of physical, verbal, sexual, or psychological harassment, abuse, or threats in the workplace, including when determining and implementing disciplinary measures?'.

4.2.8. Role in organization

Psychosocial hazards related to role in the organization have been characterized as role ambiguity, role conflict, and responsibility for people (WHO, 2003). Around 9% of EU-27 workers reported in 2010 that their work 'always' or 'most of the time' involved tasks that conflicted with their personal values (Eurofund, 2012a). For instance, in a national survey in Colombian (Caro-Villamil, 2007), was found that over 33% per cent of workers identified as psychosocial hazards the lack of clear definition of responsibilities and over 18% the constantly changing expectations at work.

Role ambiguity occurs when there is a lack of clarity about expected objectives and expections and an uncertainty about the scope and responsibilities of the job. Role conflict takes place when a workers is required to play a role which conflicts with their values, or various roles incompatible with one another. Both role ambiguity and role conflict have been

related to physical, physiological and mental health problems, and intention to quit (Leka & Jain, 2010). Role ambiguity and role conflict were associated with higher depressive symptoms and lower job satisfaction (Saijo, 2008) and sickness absence due to depressive disorders (Inoue et al., 2010). Finally, several studies suggest increased health problems (Leka & Jain, 2010) and sickness preseenteism (Hansen & Andersen, 2008) when a worker has a supervisore role for other people or a managerial role.

The analysis indicated that the coverage of these hazards in CSR instruments was mainly limited to reduction of role ambiguity, as presented in Table 4.11.

Table 4.11. Role in organization

Sub-themes	Issues in CSR standards	CSR
		standard
Reduction of role	Job analysis and role reviews	3, 5, 8, 10,
ambiguity		12, 14, 18,
		23
	Induction training	2, 10,18
	Description of responsibilities within the company	2, 10, 23,
		27

Three themes relate to the reduction of role ambiguity. While three CSR instruments cover the initial training to recently hired workers (e.g. IndicaRSE, section Dialogue and participation, indicator 6; Fair Trade Mark, indicator 1.1.2.5.2., BLIHR 15.c), job analysis and review of job roles (often as part of performance reviews) appears in several instruments. For instance, SGE21 (section 6.4.6) states: 'Organizations are to keep-up-to-date records, available to all personnel, on the job descriptions. Said descriptions will include requirements for the post, responsibilities, hierarchical and functional relationships, as well as the systems and parameters for performance evaluation'. Some CSR instruments also inquire of the availability of a statement or written document which describes the responsibilities of managers and employees within the company.

4.2.9. Career development

The career development group of psychosocial hazards includes career stagnation and uncertainty, under promotion or over promotion (status incongruity), poor pay, job insecurity, and low social value to work (WHO, 2003). Workers' needs for further training is reported by 13 per cent of workers in the EU-27, ranging from 24 per cent in Austria to 7 per cent in Ireland; nevertheless, 34 per cent of workers had been offered employer-paid training in the year before (Eurofund & EU-OSHA, 2014). Status incongruity can provoke negative psychosocial, health and organizational effects (e.g., performance, satisfaction) (Cox et al., 2000), as well as when high efforts are followed by low rewards (effort-reward imbalance), which can lead to worse health (Niedhammer, Sultan-Taïeb, Chastang, Vermeylen, & Parent-Thirion, 2014; Niedhammer, Tek, Starke & Siegrist, 2004), low back and neck injuries (Rugulies & Krause, 2008), more frequent and longer sickness absence (Derycke, Vlerick, Van de Ven, Rots, & Clays, 2013), depressive symptoms, anxiety disorders and increased psychiatric morbidity and mental disorders (Niedhamer, et al., 2015; Stansfeld et al, 1999) and intention to leave the job (Li et al., 2013).

Poor pay can influence health and coronary problems and when is accompanied with extrinsic effort is significantly correlated to high job strain (Leka & Jain, 2010). Moreover, effort-reward imbalance is related to organizational justice, and increase when workers involve are overcommitted or suffer emotional demands. It has been linked to depressive symptoms in females (Park, Min, Chang, Kim, & Min, 2009), to chronic pain (Saastamoinen, Laaksonen, Leino-Arjas, & Lahelma, 2009) and to poorer self-rated health in a study using epidemiologic data from five European countries (Siegrist et al., 2004). A poor pay and career uncertainty can lead to financial insecurity and economic stress, defined as the "risk or uncertainty regarding one's financial situation" (ILO, 2012b). Workers can suffer from economic stress if they feel that their salary does not meet their financial needs, if there is a risk of becoming unemployed, or in cases when the company could become downsizing, restructuring, or merging with another company (ILO, 2012b). Financial insecurity and

economic stress could contribute to self-rated, health longstanding illness and depression, poor job attitudes and performance (Ferrie, Shipley, Stansfeld, Smith, & Marmot, 2003), higher turnover intentions and presenteeism (e.g., Aronsson & Gustafsson, 2005; Cheng & Chan, 2008; McKee-Ryan, Song, Wanberg, & Kinicki, 2005).

Job insecurity (e.g., the fear of being dismissed and of losing the benefits associated with the job) is affecting an increasing number of workers. In the USA, 31.7% of workers felt worried about becoming unemployed, while 14.8% thought that their job security was not good (Alterman et al., 2013b). Lack of job security can impact on physical, mental and organizational health (Ferrie, Shipley, Smith, Stansfeld, & Marmot, 2002; Leka & Jain, 2010; Park, Nakata, Swanson, & Chun, 2013; Virtanen, Vahtera, Kivimäki, Pentti, & Ferrie, 2002). Lászlóa and coalleagues (2010), after analysing 23.245 workers from 16 European countries, found that in 9 countries, they found an effect of job insecurity on self-rated health. Strongest effects on health were found in Denmark by workers over 50 years of age and younger workers with poor labour chances (Rugulies, Aust, Burr, & Bültmann, 2008). In relation to psychological health, job insecurity has been associated with high stress (Smith, 2000), distress (Virtanen et al., 2002), psychiatric morbidity and mental disorders (Ferrie et al., 2002; Niedhammer et al., 2014).

Job insecurity is also related to the kind of workers' contract, and usually worse results are for permanent workers suffering job insecurity, rather than fixed-term or temporary workers (De Cuyper, & De Witte, 2006, 2007). Thus, fixed term employees had better self-rated health and less chronic disease than permanent employees (Virtanen et al., 2002). Permanent workers usually have a higher need of perceived security and could perceive the existence of a psychological contract, then kind of arrangement contract can impact on job insecurity, leading workers to a higher level of psychological distress (Bernhard-Oettel, Sverke, & De Witte, 2005; De Cuyper & De Witte, 2007). However, temporary workers have worse psychological morbidity and higher risk of occupational injuries (Virtanen et al., 2005). Fear of redundancy due to organizational instability (e.g., restructuring, expansion,

and downsizing) also can affect individual and organizational health and increase anxiety and stress. More stable organizations had the lowest level of job strain and health risks, comparing to 'changing/growing' companies (Westerlund, Theorell & Alfredsson, 2004). Decreases in job satisfaction, professional efficacy, physical and emotional health, and increases in turnover have been found as consequence of restructuring (Cummings & Estabrooks, 2003), as well a decrease in the levels of organizational creativity (Amabile & Conti, 1999).

The analysis indicated that the coverage of these hazards in CSR instruments included six themes related to career development: training and development, employee retention and promotions, reducing job insecurity, support to retiring employees, pay and benefits, and promoting diversity and non-discrimination in career development, as presented in Table 4.12.

Table 4.12. Career development and pay

Sub-themes	Issues in CSR standards	CSR standard
Training and	Promoting employability and professional development of	3-6, 8, 10-15, 17-19,
development	employees	21, 23, 24, 27, 28
•	Measurement of training provision and assessment of	4-6, 10-12, 14, 18,
	outcomes	27, 28
	Support for continuing and finishing formal education	5, 6, 18, 24, 27
	Provision of training and guidance in apprenticeship,	4, 6, 8, 15, 19, 20,
	internship programmes	22, 28
	Avoidance of discrimination in the provision of training and	3, 4, 6, 10, 7, 12, 15,
	development opportunities for all staff	17, 19, 21, 23, 27
	Skill mapping and assessment of development needs	4-6, 10, 12, 14, 18,
		23
Employee	Internal promotion and recognition	4, 6, 18, 27, 28
retention and	Advancement from an internship, apprenticeship or learning	4, 6, 7, 19, 28
promotions	contract	
	Objective and fair job performance reviews	3, 5, 8, 12, 14,18
Reducing job	Impact assessment of company actions in relation to	3-6, 10, 12, 16-20,
insecurity	employee retrenchment and turnover	22, 27, 28
	Mitigation of adverse effects of -mergers, take overs,	3, 5, 6, 12, 15-19, 21,
	transfers- causing major effects on employees	23

	Promotion of stable employment and job security for workers	1, 3, 7, 10, 12, 17,
		19, 22, 28
Support to	Support and guidance for retiring employees	3, 6, 12, 14, 18
retiring	Provision of financial support, company pension in addition to	6, 10, 12, 14, 17-20,
employees	social security benefits	28
Pay and	Payment of adequate living wages	1-4, 6, 7, 9, 10, 12-
benefits		15, 17, 19, 21, 22,
		24, 27, 28
	Payment of extra hours and premium rate	2, 6, 7, 9, 10, 15, 18,
		19, 22, 28
	Health insurance, sick leave and social security benefits which	2, 6, 7, 10, 12, 15-19,
	covers compensation for accidents, maternity	22, 28
	Assessment of economic benefits: impact, value, kind of	3-6, 10, 12, 14, 18,
	benefits, link of company's services to their actual costs	27, 28
	Remuneration based on production, quotas or piecework	5, 6, 10, 15, 18, 22
	Satisfaction about salary	6, 22
Non-	Non-discrimination of temporary/subcontracted staff	1, 4, 6, 10, 12, 14,
discrimination		16, 18, 19, 22, 28
in career	Non-discrimination on pay and benefits	1, 2, 4-7, 9, 10, 12,
development		15-17, 21, 23, 28
	Monitoring of non-discrimination in career advancement and	3-6, 10-12, 18-20, 27,
	promotion	28

CSR instruments include several indicators which recommend or require companies to provide training and development to employees as well as assess its quality and impact. For instance, the Good Corporation Standard notes that 'Employees have appropriate training, learning and development opportunities to support their work and career progression". Employee retention and promotion includes ensuring the implementation of a fair and transparent performance management system and the analysis of internal promotion and the retention of employees, including interns, apprentices and people with learning contracts. For instance, the Instituto Ethos guidance (2009) states that after internships, a company tries to hire workers within the company and if not possible, gives them opportunities within company's allies.

CSR instruments also include indicators which encourage companies to take measures to reduce job insecurity. This includes analyzing the impact of company actions of employee layoffs and mitigating the adverse effects of restructuring while taking into consideration the needs of vulnerable groups, including temporary workers. Initiatives to support to retiring employees are also included. For instance, the Global Reporting Initiative includes: "Programs for skills management and lifelong learning that support the continued employability of employees and assist them in managing career endings.[...] Pre-retirement planning for intended retirees; Retraining for those intending to continue working; Severance pay; (...) Job placement services; and • Assistance (e.g., training, counselling) on transitioning to a non-working life'.

Provisions of adequate pay and benefits are also included in several CSR instruments. These relate to assessing whether organizations provide living wages, assessing employee satisfaction about salary, limiting variable remuneration and providing fair pay and benefits, ensuring non-discrimination among all staff in relation pay, benefits specifically and non-discrimination in career development more broadly.

4.2.10. Home-work interface

Psychosocial hazards related to home-work interface have been characterized as conflicting demands of work and home, low support at home, problems arising out of dual careers (WHO, 2003), but also for the quality and events of life outside of work (Cox, Griffiths & Rial-González, 2000). The increasing of households with 'dual careers', with less family support and more dependent older relatives, as well irregular working hours is an emerging risk for health (EU-OSHA, 2007). In the EU-27, 18% of workers were dissatisfied with their work-life balance in 2010 (Eurofund, 2012a). There is still a deep gender gap in work-life balance, both in working time and in perceived work-home conflict, and having children increase the odds of poor self-rated health for women (Floderus, Hagman, Aronsson, Marklund, & Wikman, 2009). This gender gap in work-home conflict could take place especially in countries with weaker policy support to work-life balance and traditional 144

gender norms (Fahlén, 2014), although other authors conclude that there are inconclusive results (Niedhammer et al., 2012). According to the 5th EWCS (Eurofund, 2012a, 2013b) women work, on average, 64 hours a week compared to the 53 hours worked by men, if we consider paid working hours, hours spent in commuting to and from work, and unpaid work time, including caring activities. Duxbury & Higgins (2012a, 2012b) in a large study in Canada found that 30% of respondents stated that work interfered with their families (30%), and their time for social activities (30%), while 54% of surveyed employees took work home. Work-home interface have been considered both a stressor, a stress reaction (e.g., indicator of strain) or a mediator between job stressors and physical and psychological health (Leka & Jain, 2010).

Work-home conflict could provoke impaired psychological health, such as psychosomatic complaints, depressive symptoms, mental health problems, and burnout (Demerouti, Bakker & Bulters, 2004; Frone, 2000), and sleep problems (Park et al., 2013). Furthermore, work and family domains are related and influence each other. For instance, in USA, the NIOSH Quality of Worklife Survey (QWL) in 2002-2006 found that 40,7% of workers stated that job demands interfered in their family life, while 29,5% of workers reported that family demands interfered in their job (Alterman et al, 2013b). Eby, Casper, Lockwood, Bordeaux, & Brinley (2005), after conducting a review of 190 studies, concluded that both domains were provoking work and family outcomes although domain-specific (i.e., work to work, family to family) effects seemed to be stronger. Work-to-family conflict occurs when efforts to fulfil the role demands of the employee role interfere with the ability to fulfil the demands of the roles as a spouse, parent, or caregiver, thus defaulting to meet family-related demands and to keep a positive family-related self-image and identity (Leka & Jain, 2010). Demerouti et al. (2004) named a 'loss spiral' the evidence that work pressure increased work-home conflicts and exhaustion, but exhaustion increased also work-home conflicts and work pressures, provoking a spill over and reciprocal effect (Fedáková & Dobeš, 2014). Work-family conflict can produce stress-related consequences, as an increase psychological strain, anxiety and depression, somatic complaints, blood pressure, and alcohol abuse

(Allen, Herst, Bruck, & Sutton 2000), health symptoms (Hammer, Saksvik, Nytrø, Torvatn, & Bayazit, 2004; Tunlid, 2014). On the other side, family to work facilitation improves mental health and it acts a family protective factor that offset and buffered the deleterious effects of work-family conflict on mental health (Grzywacz & Bass, 2003). Inability to stop worrying about work during free time has been reported to be a link in the relation between work-related stress and sleep (Åkerstedt et al., 2002).

The analysis indicated that the coverage of these hazards in CSR instruments was focused on provisions of support made by the employers to deal with issues related to the homework interface, as presented in Table 4.13.

Table 4.13. Home-work interface

Sub-themes	Issues in CSR standards	CSR standard
Provision of support	Benefits for work-life balance	2, 4, 6, 10, 11, 12,
		15, 18-20, 23, 24,
		27, 28
	Flexible arrangements in working patterns and	4, 6, 8, 10, 11,
	transportation	18-20, 23, 24, 28
	Support to workers' parenthood	2, 4, 6, 10-12, 15,
		18-20, 24, 27, 28

Several instruments, such as the FTSE4Good Index and ISO 26000, included indicators which required companies to provide support to employees for managing conflicting demands of work and home. These included providing benefits which help employees to manage their work-life balance, such as accommodation, flexible arrangements in working patterns, transportation, educational and leisure opportunities. CSR instruments also cover provision of support for parenthood and family demands which includes parental leave and breastfeeding breaks, childcare facilities, parenting guidance programmes, as well as supporting child development and education. Some instruments recommend organizations to monitor the number of employees with children responsibilities, to ensure adequate support is provided.

PART II: EMPIRICAL RESEARCH

5. Objectives and Hypothesis

5.2. Objectives

5.1.1. General objective

The general objective of the present research is the analysis of the influence of Corporate Social Responsibility (CSR) initiatives undertaken by enterprises to promote the psychosocial well-being of workers. The present research is based on a multi-methods approach using multiple data sources. In doing so, it aims to empirically connect the Occupational Health Psychology and Corporate Social Responsibility fields of research.

5.1.2. Specific objectives

To achieve this general objective, several specific objetives are proposed:

Objective 1. To analyze how working conditions, especially those related to well-being and health and safety, are covered in the CSR standards and which areas receive more emphasis both conceptually and in practice, comparing these areas with relevant International Labour Organization (ILO) standards. On the basis of this review a further objective is to create an evaluation framework to conduct analysis on CSR reports and casestudies of companies implementing CSR policies, guiding interventions, development of new standards and good practices. This specific objective is further divided into two more specific objectives:

Objective 1a: To identify the most relevant areas and themes related to working conditions covered in the main CSR standards and to relate these results to the ILO standards. This objective will allow the analysis of the extent to which the main CSR standards comply with the ILO Conventions and Recommendations. The general idea behind

this specific objective is to arrive at an evaluation framework to apply to CSR reports and to evaluate how companies implement CSR policies, thus guiding interventions and helping to develop new standards and good practices. This objective guides Study 1 (part 1) of the present research.

Objective 1b: To analyze the extent to which areas and themes included in the evaluation framework are currently present in CSR reports of large global companies and if so, which areas and themes receive more emphasis. This will allow to ascertain how CSR and working conditions are being followed in practice in companies around the world. This objective guides Study 1 (part 2) of the present research.

Objective 2: To explore the role of CSR as driver for the implementation of Occupational Health and Safety (OHS) and psychosocial risk management policies in European companies. To achieve this goal, using data from the ESENER survey, an analysis of the influence of requirements from clients or concern about the organization's reputation as a driver for the implementation of OHS and psychosocial risk management policies is undertaken. This objective guides Study 2 of the present research.

Objective 3: To study the influence of the most prominent psychosocial risks at work on the health of workers in Europe. To achieve this goal, the consideration of both individual-level characteristics of workers and country-level characteristics are taken into account, using data from the European Social Survey. This objective guides Study 3 of the present research.

5.2. Hypotheses

5.2.1. General Hypothesis

The general hypothesis that guides the present research is that Corporate Social Responsibility (CSR) initiatives undertaken by enterprises do indeed positively influence the development of a fair working environment, including health and safety and psychosocial

risk management policies, and, consequently, driving to a higher psychosocial well-being of workers. Thus, we expect to find better psychosocial well-being outcomes under working conditions characterized by greater Social Responsibility. Several specific hypotheses stem from this general hypothesis in accordance with the general and specific research objectives.

5.2.2. Specific hypotheses

Hypothesis 1. If the main CSR standards have been developed on the basis of ILO standards and international legislation, then CSR standards will include a broad coverage of working conditions and health and safety issues and these issues might be regarded under an evaluation framework built on the basis of a thematic analysis of CSR standards.

Hypothesis 2. If fair working conditions and health and safety are CSR practices commonly present in the CSR reports published on the basis of ILO standards and international legislation by the largest companies around the world, then a higher reporting level in more regulated developed countries, in issues more strictly regulated and in sectors with a greater number of hard and soft law initiatives would be expected.

Hypothesis 3. If there are requirements from clients related to health and safety and psychosocial risk management and health and safety managers have concerns about the organization's reputation related to health and safety, then enterprises will undertake to a greater extent occupational health and safety and psychosocial risk management policies, even after controlling by company-level and country-level characteristics.

Hypothesis 4. If workers report psychosocial risks at their work, then the subjective well-being of workers will be negatively affected, even after controlling by individual-level characteristics of workers and country-level characteristics.

STUDY 1

6. CSR in the business arena: how working conditions are covered in 27 CSR Standards and in 100 CSR reports

Part 1

How corporate social responsibility contributes to managing working conditions: Part 1: An analysis of 27 CSR standards

Part 2

How corporate social responsibility contributes to managing working conditions: Part 2: An analysis of 100 FT500 company corporate social responsibility reports.

6.1. Introduction

A number of policies and approaches have been developed to manage and promote better working conditions, which include 'hard' or 'regulatory' standards such as national legislation, ILO conventions, and EU directives, as well as 'soft' or 'non-binding/voluntary' standards which may take the form of guidance, social partner agreements, standardisation and certification. They are widely analysed in chapter 3 and 4. In light of this diverse policy landscape on working conditions, and recognising the increasingly important role of voluntary initiatives for promoting responsible business practices in this area, the present study has two parts.

In the first part, the extent to which aspects of working conditions are included in 27 CSR tools and instruments, selected after review conducted in Chapter 4 is analysed. While a number of tools and instruments have been developed to promote CSR initiatives, the high number of existing standards has also led to considerable overlap and a possible dilution of practice. We analyse twenty-seven key CSR instruments using a normative framework of working conditions.

In the second part, with the momentum behind CSR reaching a peak, there is now a need to understand what corporate practice looks like in the area of managing working conditions. The goal of the research was to assess whether and how managing the working environment was reflected in companies' CSR practices. Therefore, 100 FT 500 CSR reports have been analysed across world regions and occupational sectors by using a working conditions evaluation framework elaborated in part 1 of this study. There are two major reasons for doing so. Firstly, one can assess whether corporate practice matches levels of practices envisioned in these CSR tools and instruments. This would allow stakeholders a source of feedback regarding the implementation of their instruments and tools. Secondly, one can assess how far CSR development in this area has progressed relative to theories of development of CSR practice. This gap analysis would be critical to moving the area forward by identifying what elements are required to progress to subsequent stages of development. Indeed, while empirical studies have analysed other areas of CSR (especially environment, governance, and community development), work environment issues have lagged in this regard.

Relatively few studies have considered organizational practices in this area (Andreou & Leka, 2012; Andreou, Leka, Jain & Ripa, 2012; GRI, 2008; Jones, Marshall, & Mitchell, 2006; Segal et al., 2003; Vuontisjärvi, 2006). As such only broad conclusions can be inferred. For example, it is clear that broadly speaking working conditions features on CSR agendas. The primary motivation behind this research was to supplement early research with a detailed understanding of the nature of CSR practice in relation to the working environment, building on some of the methodological and conceptual issues identified in previous research. As described by Chen and Bouvain (2008) previous "findings are inconclusive or contradictory and it is often difficult to compare previous studies owing to the idiosyncratic methods used in each study" (p. 299). They try to explain these results on the basis that this research has relied "mainly on simple measures, such as word counts and page counts of reports, to compare the extent of reporting that may not capture significant differences in the content of the reports" (p. 299). Also, studies rarely consider a broad and comprehensive framework regarding the working environment, across a number of 158

countries which include different regions as well as developing and developed countries. Instead the focus tends to be on a particular area (e.g. human rights), in a country or region. This makes it challenging to arrive at well-informed conclusions about how organizations have operationalised CSR and managing the work environment in a holistic sense. In light of the limited previous research several authors have called for further empirical research in this area (Prieto-Carrón, Lund-Thomsen, Chan, Muro, & Bhushan, 2006). To address some of the aforementioned issues, it was used a comprehensive framework of key areas of managing the work environment developed in part 1 of this study.

Overall, the general objective of this study is to analyze how working conditions, especially those related to well-being and health and safety, are covered in the CSR standards and which areas receive more emphasis both conceptually and in practice, comparing these areas with relevant International Labour Organization (ILO) standards. This could be used as a framework to conduct analysis in CSR reports and case-studies of companies implementing CSR policies, guiding interventions, development of new standards and good practices. In order to achieve this goal, this objective was further separated inwo two different while complementary specific objetives. Firstly, it pretends to identify the most relevant areas and themes related to working conditions covered in the main CSR standards and to relate these results to the ILO standards. This objective will allow to analyse the extent to which the main CSR standards comply with the ILO Conventions and Recommendations. The general idea behind this specific objective is to arrive at an evaluation framework to apply to CSR reports and to evaluate how companies implement CSR policies, thus guiding interventions and helping to develop new standards and good practices. This objective guides part 1 of the present research. Therefore, we hypothesize that if the main CSR standards have been developed on the basis of ILO standards and international legislation, then CSR standards will include a broad coverage of working conditions and health and safety issues and these issues might be regarded under an evaluation framework built on the basis of a thematic analysis of CSR standards.

Secondly, this study aims to analyze the extent to which areas and themes included in the evaluation framework are currently present in CSR reports of main global companies and if so, which areas and themes receive more emphasis. This will allow to ascertain how CSR and working conditions are being followed in practice in companies around the world. This objective guides part 2 of the present research. Given the literature review conducted in this PhD and the part 1 of this study, we hypothesize that if fair working conditions and health and safety are CSR practices commonly present in the CSR reports published on the basis of ILO standards and international legislation by the largest companies around the world, then a higher reporting level in more regulated developed countries, in issues more strictly regulated and in sectors with a greater number of hard and soft law initiatives would be expected.

6.2. Methods

6.2.1. Sample

The sample for this research consists of 27 measurement instruments and standards of Corporate Social Responsibility (CSR) that show an extensive use by companies and scholars in the evaluations of CSR in the present.

6.2.2. Procedure

In the first part of this study, an extensive literature review of CSR tools and instruments using CSR monographs, international and institutional CSR reports, and articles in academic journals were conducted. More than 200 instruments were identified, many of them cited in McKague and Cragg's (2007) compendium of ethics codes and instruments of CSR. Instruments were selected and further analysed from this population if they met the following inclusion criteria: recent (developed or updated post 2000); publicly available; universally applicable across regions and sectors; published either in English or Spanish; 160

and included an labour dimension, as ascertained following a review of key publications on CSR tools and instruments. Instruments were considered in the analysis until themes became saturated, that is the addition of further instruments did not yield new any new or relevant information the analysis (Morse, 1998). Table 6.1 presents the list of selected instruments and the studies citing them. On the basis of the criteria applied, 27 instruments were selected for the pilot study (Ripa et al., 2010, Ripa, Jain, Herrero & Leka, 2012), and included for the final research.

Table 6.1. Studies citing selected CSR standards and instruments

CSR standard	Studies which review the standard
Amnesty International Human Rights Principles for Companies (Amnesty International, 1998)	Abrahams (2004), EC (2003, 2004), ISO (2010), McKague & Cragg (2007), Montero et al.(2009), OECD (2009), Vilanova, Lozano & Linares (2006), Waddock (2008)
Business Leaders Initiative on Human Rights (BLIHR, 2009)	Linder, Sorell & Steinkellner (2010), OECD (2009)
Caux Round Table Principles for Responsible Business (including the Stakeholder management guidelines, and the People, Performance, Well-Being: Guidelines For Management and Employees) (Caux Round Table, 2008, 2010)	Abrahams (2004), Calder & Culverwell (2004), Carasco & Singh (2008), ISO (2010), McKague & Cragg (2007), OECD (2009), Paine et al. (2005), Waddock (2008)
CSR-SC Project (Perrini et al. 2006)	KPMG, UNEP, GRI & Unit for Corporate Governance in Africa (2010), Tencati, Perrini & Pogutz (2004)
Dow Jones Sustainability Indexes (SAM Research, 2009)	AccountAbility & WBCSD (2004), Barth & Wolff (2009), EC (2003, 2004), Fowler & Hope (2007), Gawel (2006), Hassel (2009), McKague & Cragg (2007), Montero et al. (2009), Vilanova et al. (2006), Waddock (2008)
Ethos Institute Indicators (Instituto Ethos de Empresas e Responsabilidade Social, 2009)	AVINA Foundation & Korin (2011), ISO (2010), KPMG et al. (2010), Louette (2007), BID (2009), Waddock (2008)
Ethical Trading Initiative Base Code (Ethical Trading Initiative, n.d., 2010)	Abrahams (2004), Barth & Wolff (2009), Calder & Culverwell (2004), EC (2003, 2004), ISO (2010), Leipziger (2003, 2010), McKague & Cragg (2007), Montero et al. (2009), OECD (2009), Rasche (2009), Tencati et al. (2004), Vilanova et al. (2006), Waddock (2008), Wick (2005)
European Union Questionnaire to raise SME awareness of CSR (EC, 2007b)	Linder et al. (2010)
Fair Labor Association: Workplace Code of Conduct (FLA, 1997, 2011)	Abrahams (2004), Calder & Culverwell (2004), ISO (2010), Leipziger (2003, 2010), Linder et al.(2010), McKague & Cragg (2007), OECD(2009), Rasche (2009), Tencati et al. (2004), UN (2007), Waddock (2008), Wick (2005),
Fairtrade Mark –Fairtrade Standards: FLO-CERT Public	Barth & Wolff (2009), EC (2004), ISO (2010), Linder et al.(2010), McKague & Cragg (2007), Vilanova et al. (2006), Waddock (2008),

Criteria List - Hired Labour (FLO-CERT, 2011)

FTSE4 Good Index (FTSE, 2006)

Global Reporting Initiative GRI – 3.0 and 3.1 (2006a, 2006b, 2006c, 2006d, 2006e, 2011, 2012, 2013)

Global Sullivan Principles (The Leon H. Sullivan Foundation, 1999)

Good Corporation Standard (Good Corporation, 2010) Human Rights Compliance Assessment Checklist (Danish Institute for Human Rights, 2006)

IFC Performance Standard (World Bank group) (IFC, 2010, 2012)

ILO Tripartite declaration of principles concerning multinational enterprises and social policy (ILO, 2006a)

IndicaRSE (Indicators for Central America) (Morataya-Ávila et al, 2008)

ISO 26000 (ISO, 2010)

Environmental, Social and Governance Ratings Criteria SOCRATES: KLD Ratings (KLD Research & Analytics, 2007) OECD Guidelines for Multinational Enterprises (OECD, 2008, 2011)

Social Accountability 8000 (SA8000) (SAI, 2004, 2008)

Wick (2005)

Barth & Wolff (2009), EC (2003, 2004), Fowler & Hope (2007), Gawel (2006), McKague & Cragg (2007), Montero et al. (2009), Vilanova et al. (2006), Waddock (2008)

Abrahams (2004), AccountAbility & WBCSD (2004), AVINA Foundation & Korin (2011), Barth & Wolff (2009), Behnam & MacLean (2011), Calder & Culverwell (2004), EC (2003, 2004), Gawel (2006), Goel & Cragg (2005), Hassel (2009), ISO (2010), Jamali (2010), KPMG et al. (2010), Leipziger (2003, 2010), Ligteringen & Zadek (2005), Louette (2007), McKague & Cragg (2007), Montero et al. (2009), OECD (2009), Paine et al (2005), Rasche (2009), Tencati et al. (2004), UN (2007), Vilanova et al. (2006), Waddock (2008)

Abrahams (2004), Calder & Culverwell (2004), Carasco & Singh (2008), EC (2003), Goel & Cragg (2005), ISO (2010), Leipziger (2003), McKague & Cragg (2007), Montero et al. (2009), OECD (2009), Vilanova et al. (2006), Waddock (2008)

Calder & Culverwell (2004), Louette (2007), McKague & Cragg (2007)

ISO (2010), Linder et al. (2010), McKague & Cragg (2007),

Bohman& Minter (2008), Hassel (2009), Leipziger (2010), McKague & Cragg (2007), OECD (2009), UN (2007),

Abrahams (2004), Barth & Wolff (2009), Calder & Culverwell (2004), Carasco & Singh (2008), EC (2004), ISO (2010), Leipziger (2003, 2010), Ligteringen & Zadek. (2005), Linder et al. (2010), Louette (2007), McKague & Cragg (2007), Miraglio, Hunter, Iucci, & Pinoargote (2007), OECD (2009), Oldenziel (2005), UN (2007), Waddock (2008), Wick (2005)

AVINA Foundation & Korin (2011), Louette (2007), BID (2009),

Abrahams (2004), AVINA Foundation & Korin (2011), Barth & Wolff (2009), Calder & Culverwell (2004), EC (2004), Gawel (2006), Hassel (2009), ISO (2010), KPMG et al. (2010), Leipziger (2010), Ligteringen & Zadek (2005), Louette (2007), McKague & Cragg (2007), Montero et al. (2009), OECD (2009), Vilanova et al. (2006), Waddock (2008), Wick (2005)

EC (2004), Fowler & Hope (2007), Gawel (2006), McKague & Cragg (2007), Waddock (2008),

Abrahams (2004), AccountAbility & WBCSD (2004), Barth & Wolff (2009), Bohman & Minter (2008), Calder & Culverwell (2004), Carasco & Singh (2008), EC (2003, 2004), Gawel (2006), Goel & Cragg (2005), Hassel (2009), ISO (2010), Jamali (2010), KPMG et al. (2010), Leipziger (2003, 2010), Ligteringen & Zadek (2005), Linder et al. (2010), Louette (2007), McKague & Cragg (2007), Miraglio et al. (2007), Montero et al. (2009), OECD (2009), Oldenziel (2005), Paine et al. (2005), Rasche (2009), UN (2007), Vilanova et al. (2006), Waddock (2008), Wick (2005)

Abrahams (2004), AccountAbility & WBCSD (2004), AVINA Foundation & Korin (2011), Barth & Wolff (2009), Behnam & MacLean (2011), EC (2003, 2004), Goel & Cragg (2005), ISO (2010), Jamali (2010), KPMG et al. (2010), Leipziger (2003, 2010), Ligteringen & Zadek (2005), Linder et al. (2010), Louette

(2007), McKague & Cragg (2007), Montero et al. (2009), OECD (2009), Rasche (2009), Tencati et al. (2004), UN (2007), Vilanova et al. (2006), Waddock (2008), Wick (2005)

ISO (2010), Linder et al. (2010), Louette (2007), Montero et al. (2009), Vilanova et al. (2006)

SGE 21 2008: Ethical and CSR Management System Forética (Forética, 2008)

Sigma: Sigma guide to sustainability issues (The Sigma

Project, 2006)

(UN, 2011)

United Nations Global Compact. (UN, 2000)

EC (2003, 2004), ISO (2010), Leipziger (2003), Ligteringen & Zadek (2005), Louette (2007), McKague & Cragg (2007), Tencati et al. (2004), Vilanova et al. (2006)

Abrahams (2004), AccountAbility & WBCSD (2004), AVINA Foundation & Korin (2011), Behnam & MacLean (2011), Bohman & Minter (2008), Calder & Culverwell (2004), Carasco & Singh (2008), EC (2003, 2004), Gawel (2006), Goel & Cragg (2005), Hassel (2009), ISO (2010), Jamali (2010), KPMG et al. (2010), Leipziger (2003, 2010), Ligteringen & Zadek (2005), Linder et al. (2010), Louette (2007), McKague and Cragg (2007), Miraglio et al. (2007), Montero et al. (2009), OECD (2009), Oldenziel (2005), Paine et al (2005), Rasche (2009), UN (2007), Vilanova et al. (2006), Waddock (2008), Wick (2005)

United Nations Guiding Principles on Business and Human Rights

WBCSD- Measuring Impact Framework

*Recently approved

ISO (2010), McKague & Cragg (2007) *They cite several instruments developed by WBCSD.

Among these instruments, the Global Reporting Initiative (GRI) was the most extensive tool (Casado, 2006; KPMG, 2011; Perrini et al, 2006), and the most complete instrument (European Commission, 2003). The GRI, given its nature and structure, also allowed a broad comparability among diverse companies, which yielded structured and comparable CSR information, a feature the other instruments did not necessarily have. For these reasons the GRI formed the thematic foundation used to analyse the selected instruments. Finally, ILO Conventions and recommendations, presented in chapter 2, were also used, after identifying the most relevant international standards for psychosocial risks at work and for occupational health and safety.

In the second part of the study, a source was required which captured companies' main CSR initiatives. Dedicated CSR reports are frequently used for this purpose (e.g. Kawashita et al., 2005) based on the premise that these are organizations' main communication of CSR progress to stakeholders (Chen & Bouvain, 2008). Previous research has also suggested that reporting is a good indicator of organizational practice (Ioannou & Serafeim, 2012). The FT 500, representing the 500 highest stock market value organizations, were taken as a

pool from which companies would be selected (Andreou, Leka, Jain & Ripa, 2012). A global sample was desired so that comparisons could be drawn across different regions, and policy developments targeted towards local contexts. The 500 companies were classified as such, using the World Health Organization (WHO) regions (Americas, Africa, Eastern Mediterranean, Europe, South East Asia, and Western Pacific) and the NACE sector classification system. As the organizations were often engaged in several sectors, they were classified by their main area of business. The primary aim was to ensure representation across WHO regions. However, the FT 500 resided mainly in the Americas, Europe, and the Western Pacific regions. Given the lack of companies falling under Africa (6), South East Asia (19), and the Eastern Mediterranean (7) regions all organizations from these regions were initially included. Tables 6.2 describes the number of companies included by WHO region.

Table 6.2. Number of companies included in the GRI or DJSI database, by WHO region (percentage of total companies in the region)

	Total	AFRO	AMRO	EMRO	EURO	SEARO	WPRO
GRI	164 (33%)	4 (67%)	55 (27%)	0	75 (52%)	9 (47%)	21 (18%)
DJSI	138 (28%)	1 (17%)	40 (19%)	0	73 (50%)	2 (11%)	22 (20%)

Due to uneven sample sizes, when considering trends across sectors, only sectors with roughly equal number of cases were considered. In other regions companies were randomly selected to maintain representation across sectors, where possible, and only if there was a suitable source to code information from. Tables 6.3 describes the number of companies included by NACE sector.

Table 6.3. Number of companies included in the GRI or DJSI database, by NACE sector (percentage of total companies in the sector)

	GRI	DJSI
Mining & quarrying	32 (47%)	18 (27%)
Manufacturing	51 (32%)	57 (36%)
Electricity gas & water supply	14(47%)	11 (37%)
Construction	1 (25%)	0
Wholesale & retail trade	5 (17%)	7 (24%)
Hotels & restaurants	0	2 (67%)
Transport storage & communication	18 (38%)	9 (19%)
Financial intermediation	33 (29%)	28 (25%)
Real estate, renting & other business activities	8 (30%)	5 (19%)
Health & social work	0	1 (25%)
Other	2 (17%)	0

After this selection, the total sample size was 100 FT500 company corporate social responsibility reports. Once the companies for analysis were selected, a random sample of these was examined to assess the validity of this argument. On the basis of this, it was decided that dedicated CSR reports would be suitable, as most organizations claimed comprehensive and exhaustive coverage. This pretended to consider the nature of related organizational practices reported in 100 Global Financial Times 500 (FT 500) CSR reports. CSR communications, particularly reports, have featured as a proxy for practice in previous studies. The aim was to understand whether and how managing the work environment is understood to be an element of corporations' responsibility agendas.

6.2.3. Variables

In the first part of the study, a thematic analysis is conducted in order to develop an evaluation framework detecting the variables that will be used in the second part of the

study. Tables 6.4 to 6.9 summarizes them. In the second part of the study, several outcome variables and covariates are presented.

Outcome variables

Outcome variables. Several variables measuring work-related conditions were used for this study: Employment Conditions; Organisational Development and Culture; Industrial Relations; Occupational Health and Safety (OHS) System; Diversity and Non-discrimination; and Human Rights. All variables are detailed in the results of part 1 of the study and are summarized in the table 6.10.

Employment Conditions. Employment conditions was measured with 5 items with two category responses (NO/YES): terms of contracting and work schedules; actions of company in relation to rotation; dismissals and retirements; labour market entrance support; and wages and benefits. The variable 'employment conditions' was coded '1' ('yes') if any of the above-mentioned issues were present in a company CSR report, and '0' ('no') if all of them were absent. Table 6.4., summarized in part 1 of the study, offers a detailed description of each item belonging to employment conditions. Each item was coded as 'yes' if a company in its CSR report mentioned any of the issues which are included in each item category (table 6.4), and as 'no' if the company did not mention it.

Organisational Development and Culture. Organisational development and culture was measured with 3 items with two category responses (NO/YES): training and development; performance management; and organisational climate and internal communication. The variable 'organisational development and culture' was coded '1' ('yes') if any of the previous issues were present in a company CSR report, and '0' ('no') if all of them were absent. Table 6.5., summarized in part 1 of the study, offers a detailed description of each item belonging to organisational development and culture. Each item was coded as 'yes' if a company in its CSR report mentioned any of the issues which are included in each item category (table 6.5), and as 'no' if the company did not mention it.

Industrial Relations. Industrial relations was measured with 2 items with two category responses (NO/YES): employee representation and collective bargaining; and dialogue with workers and stakeholders during corporate restructuring. The variable 'industrial relations' was coded '1' ('yes') if any of the aforementioned issues were present in a company CSR report, and '0' ('no') if all of them were absent. Table 6.6., summarized in part 1 of the study, offers a detailed description of each item belonging to industrial relations. Each item was coded as 'yes' if a company in its CSR report mentioned any of the issues which are included in each item category (table 6.6), and as 'no' if the company did not mention it.

Occupational Health and Safety (OHS) System. This variable takes into account the development of a comprehensive occupational health and safety approach within the company. Occupational Health and Safety (OHS) System was measured with 6 items with two category responses (NO/YES): workers' involvement in OHS system and culture; management of absenteeism, work fatalities and occupational diseases; OHS training; OHS prevention; OHS protection; and violence, bullying and harassment at work. The variable 'Occupational Health and Safety (OHS) System' was coded '1' ('yes') if any of the abovementioned issues were present in a company CSR report, and '0' ('no') if all of them were absent. Table 6.7., summarized in part 1 of the study, offers a detailed description of each item belonging to occupational health and safety (OHS). Each item was coded as 'yes' if a company in its CSR report mentioned any of the issues which are included in each item category (table 6.7), and as 'no' if the company did not mention it.

Diversity and Non-discrimination. This variable considers organizations' provisions to create inclusive environments with respect to several diversity issues. Diversity and non-discrimination was measured with 8 items with two category responses (NO/YES): equal opportunities; gender equality; equal opportunities and support for disabled people; equal opportunities and support for ethnic, racial or religious minorities; non-discrimination by age; non-discrimination to other vulnerable groups; relation with agency workers; labour insertion for economically disadvantaged people. The variable 'Diversity and Non-

discrimination' was coded '1' ('yes') if any of the previous issues were present in a company CSR report, and '0' ('no') if all of them were absent. Table 6.8., summarized in part 1 of the study, offers a detailed description of each item belonging to diversity and non-discrimination. Each item was coded as 'yes' if a company in its CSR report mentioned any of the issues which are included in each item category (table 6.8), and as 'no' if the company did not mention it.

Human Rights. This variable considers Human Rights protection within the working environment and firm's sphere of influence. Human Rights was measured with 7 items with two category responses (NO/YES): incorporation of human rights in risk and investment analysis; human rights compliance of suppliers; training in human rights; respect for workers' human rights, freedom of workers' organisation and collective bargaining; rejection of child labour; rejection of forced labour. The variable 'Human Rights' was coded '1' ('yes') if any of the previous issues were present in a company CSR report, and '0' ('no') if all of them were absent. Table 6.9., summarized in part 1 of the study, offers a detailed description of each item belonging to human rights. Each item was coded as 'yes' if a company in its CSR report mentioned any of the issues which are included in each item category (table 6.9), and as 'no' if the company did not mention it.

Covariates

Two covariates were included in the analysis for a closer inspection of levels of reporting: region and sector. *Region*. The variable was 'Region' and was assigned according to WHO classification of regions. Each company was classified according to the region its country of operations belongs. Companies were coded into the categories: Africa, Americas, Eastern Mediterranean, Europe, South East Asia and Western Pacific.

Enterprise sector. The variable was 'Enterprise sector', as assigned from NACE-Code. Companies selected were coded into the categories: Mining and Quarrying, Manufacturing, Electricity, Gas & Water Supply, Construction, Wholesale & Retail Trade, Transport, Storage & Communication. When companies were engaged in several sectors, they were classified in their main area of business.

6.2.4. Analytical strategy

In the first part of the study, a thematic analysis (Braun and Clarke, 2006) was conducted using the 27 CSR standards selected in the literature review. It should be noted that not all CSR standards are directly comparable, arising from the fact that CSR instruments are developed with different objectives in mind. For instance, comparing a standard which aims to establish acceptable organisational behaviour, with a system of indicators whose goal is to make measurement of results more structured, is challenging. To accommodate these differences, the thematic areas of the instruments were considered rather than specific indicators. Text fragments were coded by assigning themes and grouping them in areas (Braun & Clarke, 2006). The level of abstraction of the themes was gradually increased giving priority to the diversity of topics that appear in the CSR instruments rather than frequency. Instruments were considered in the analysis until themes became saturated, that is the addition of further instruments did not yield new any new or relevant information the analysis (Morse, 1998). As a result, it has been created a CSR template which identifies 6 main themes, 30 second order themes and 99 third order themes and that allows to know which areas related to well-being at work are covered by CSR instruments.

Thematic analysis (Braun & Clarke, 2006) was used within a general inductive approach to avoid influencing the data through the researchers' previous values. This method facilitates transforming varied raw text data into a brief summary format, establishing links with the research objectives in a transparent and reliable way and offers a rigorous and systematic way to analyse texts (Thomas, 2006). In line with the methods detailed by Braun and Clarke (2006) and Thomas (2006), the analysis was first based on several readings of the data. Following this, the process of building the themes began. Quotes representing the relevant issues were selected from the text. These items were then combined to establish specific themes in line with the GRI framework (where possible). These themes were then renamed, as conceptually they had expanded significantly compared to what was originally included in the GRI. New themes were created where the GRI framework could not

accommodate items from the text. These specific themes were then grouped together to create higher order themes. To ensure the reliability of the analysis, coding consistency checks proposed by Thomas (2006) were conducted. Four evaluators conducted an independent analysis by coding a selection of the data and checking on clarity of themes.

In the second part of the study, a thematic analysis was conducted using the sample of 100 FT 500 company CSR reports, and afterwards a framework analysis was conducted on the basis of the template generated in part 1 of this study. To conduct the thematic analysis, Braun & Clarke (2006) methodology was used. Text fragments in the CSR reports were coded using a thematic analysis software programme and afterwards matched to the 6 main themes and 30 second-level areas which constituted the framework used. Subsequently, it was calculated the percentage of companies that were covering each working conditions area and sub-area by sector and region. Data was also analysed quantitatively to explore how frequent each area appears among CSR reports. All companies in the Africa region published a dedicated CSR report. However, in the South East Asia region some companies included CSR information only in their annual review, and this was the case for all companies in the Eastern Mediterranean region. As the South East Asia region included 13 companies which published a dedicated report, only these 13 were included. In the Eastern Mediterranean region, due to the lack of dedicated CSR publications and the desire to have a global sample, data was coded from annual reports and websites, sources used in previous research (e.g. Gao, 2009). In these cases, information was only coded if it was explicit that initiatives were directed towards social responsibility. One company in the Eastern Mediterranean region did not publish English communications and was excluded. Finally, comparisons were made across world regions and occupational sectors as previous research has indicated that reporting fluctuates across these variables (Tate et al., 2010).

Thematic analyses was done using a top down approach (Braun & Clarke, 2006), namely using an existing conceptual framework to structure the analysis. The aforementioned framework developed by (Ripa & Herrero, 2012) (see figure 6.1) was used for this purpose as it is based on an analysis of the key issues in the interface between CSR and the working

environment as highlighted by key tools and instruments in the area. Specifically, the first two tiers of the framework served as the theme and subtheme levels of the thematic analysis structure.

Analysis of reports was performed using Nvivo 10. A node structure was created reflecting the theme and subtheme structure. The reports were then read by a member of the research team, whereby all instances of specific initiatives designed to improve the work environment (see Findings for qualitative examples) were coded under the relevant subtheme. The descriptions of the subthemes provided in part 1 (see also Ripa, Jain, Herrero, & Leka, 2012) served as guidance for extracting relevant material. Following a first iteration the extracts under each subtheme were reviewed to refine the thematic structure. Subthemes were modified if there was a mismatch between the scope of extracted text and the boundary of the theme as defined by part 1. Two additional researchers coded samples of the extracted data to ensure consistency and validity of the coding process.

6.3. Results

6.3.1. Results of part 1

The six main themes emerging from the thematic analysis were named: employment conditions; organizational development and culture; industrial relations; occupational health and safety system; diversity and non-discrimination; and human rights. These six first order themes included 30 second order themes, as presented in Figure 1, and 99 third order themes. Due to space limitations, the presented analysis focusses on the first and second-order themes. The third-order themes are presented for reference and to highlight the level of detail included in the CSR tools and instruments. The next sections discuss the extent to which working conditions and factors related to workers' health, safety and well-being are included in CSR instruments and standards within the context of existing international labour legislation and standards.

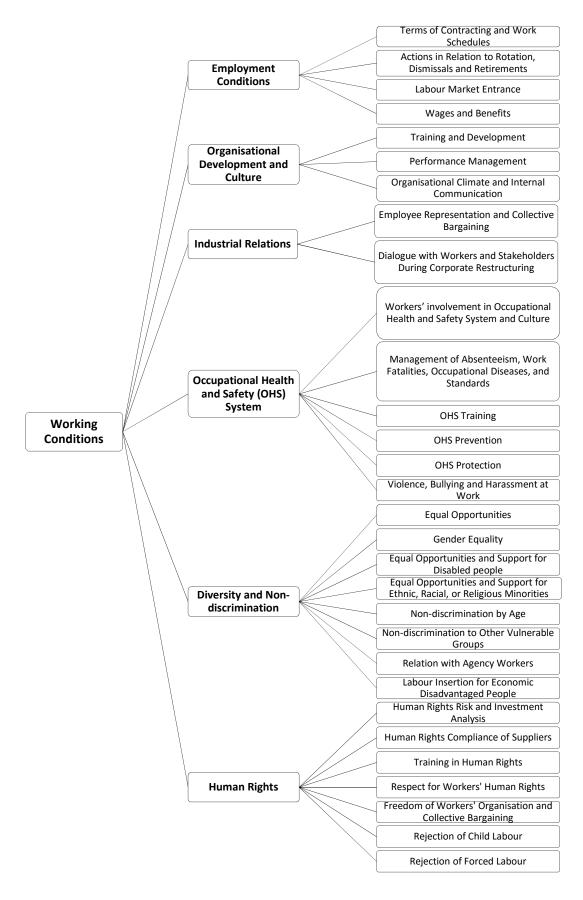


Figure 6.1. Thematic template used to organise the data emerging from the CSR reports. Six main themes related to working conditions that appear in CSR standards.

Employment conditions

The theme 'Employment Conditions', Table 6.4, was derived from four second order themes: terms of contracting and work schedules; actions of company in relation to dismissals and retirements; labour market entrance support; and wages and benefits.

Table 6.4. Employment Conditions

Sub-themes	Issues in CSR standards		
	Legal recognition of work and transparency of employees' working		
Terms of contracting and	conditions		
work schedules	Profile of existing contracts and promotion of new and stable employment		
	Work schedules, breaks and workload		
Actions of company in	Impact and consequences of worker rotation		
relation to rotation,	Company's actions in relation to dismissals		
dismissals, and	Support to retiring employees		
retirements	Support to retiring employees		
Labour market entrance	Initiatives to support entry to organisation		
	Non-discrimination in early career/initial employment		
	Transition/advancement from initial employment		
Wages and benefits	Wage management policies		
	Salary guarantees		
	Acceptable company salaries		
	Going above and beyond compliance with minimum wage legislation		
	Worker benefits		
	Social security		
	Work-life balance orientated benefits		

Each of these four second-order themes is well referenced in international legislation or global labour standards (Heintz, 2002). Regarding terms of contracting and work schedules, the ILO has issued a number of conventions including the C122 Employment Policy Convention, 1964 (No. 122); Hours of Work, 1919 (No. C001); Part-time Work Convention, 1994 (No. C175); Night Work Convention, 1990 (No. C171); Holidays with Pay Convention (Revised), 1970 (No.C132); and Recommendations No. 103, 116, and 182. These include provisions for the promotion of work which is productive, allowing for the fullest possible

opportunity to use skills; setting a limit of 8 hours of work a day and 48 hours of work a week; and offering part time workers the same protection as full time workers. Moreover the Universal Declaration of Human Rights (UDHR) states: "everyone has the right to rest and leisure, including reasonable limitation of working hours and periodic holidays with pay" (art. 24).

Table 6.4 illustrates that CSR tools and instruments refer to or include several of these issues. One example is that from the Fair Labour Association Workplace Code of Conduct (FLA, 2011, p.2) which notes 'Employers shall not require workers to work more than the regular and overtime hours allowed by the law of the country where the workers are employed. The regular work week shall not exceed 48 hours. Employers shall allow workers at least 24 consecutive hours of rest in every seven-day period. All overtime work shall be consensual'. Of the 28 tools and instruments analysed, 21 included provisions regarding this second-order theme, highlighting that there is scope for CSR tools and instruments to cover this area more ubiquitously.

Regarding actions of companies in relation to rotation, dismissals, and retirements, normative standards are set predominantly by convention on Termination of Employment, 1982 (No. C158) and recommendation on Termination of Employment, 1963 (No. R119). C158 relates to fair termination of work, as well as the process of termination and right to appeal, while R119 further elaborates on the articles defined in the Convention (e.g. the nature of notice periods). These principles were well represented in some of the tools and instruments analysed, which often extended beyond the principles set by the legislative framework. For example, tools and instruments referred to length of notice periods and economic protection, but also detailed activities to support employability of the dismissed (e.g. relocation, rotation, and training), and retiring workers (e.g. counselling and exit surveys). Indicator LA11 on the GRI (2011, p.17), for example, assessed the following: 'Do transition assistance programs to support employees who are retiring or who have been terminated provide any of the following: pre-retirement planning for intended retirees; retraining for those intending to continue working; severance pay [...]'. However, only 15 of

the 28 CSR tools and instruments referred to elements related to this second-order theme, suggesting that there is a need for further consideration and extension of coverage by some tools and instruments to these principles.

Principles in relation to labour market entrance are also covered in the international legislative framework. The Employment Policy Convention, 1964 (No. C122) puts forward the notion that there should be work for all who seek it, free from discrimination, while the Human Resources Development Convention, 1975 (No. C142) stipulates that employers should co-operate with the implementation of vocational guidance and training to promote employment. Table 6.4 illustrates that CSR tools and instruments relate to these principles, however, only 10 of the examined tools and instruments mention it explicitly. This suggests a need for greater representation of labour market entrance across tools and instruments, especially given the explicit recognition of this principle in international legislation. It is interesting to note that where guidance did exist in the tool and instruments, it tended to go above and beyond the principles laid out in conventions. For example the Instituto Ethos guidance (2011, pp.25-36) includes: 'After internships, a company will, if possible, hire workers within the company and if not possible, give them opportunities within company's associates' [translation from Spanish] thus not only facilitating labour market entrance but also sustaining employment.

Key ILO conventions on wages and benefits include the Minimum Wage Fixing Convention, 1970 (No. C131) which lays out principles to establish minimum wages for different categories of workers, on the basis of worker needs and the local context. The Protection of Wages Convention, 1949 (No. C095) details how wages shall be issued, as well as the freedom of employees to spend these wages as they like. Other relevant conventions include the Maternity Protection Convention, 2000 (No. C183); Holidays with Pay Convention, 1970 (Revised) (No. C132); and Workers with Family Responsibilities Convention, 1981 (No. C156). Moreover, the UDHR states that "everyone who works has the right to just and favourable remuneration ensuring for himself and his family an

existence worthy of human dignity, and supplemented, if necessary, by other means of social protection" (art. 23(3)). Finally the UN International Covenant on Economic, Social and Cultural Rights also states that workers should be remunerated fairly and provided adequate rest periods.

Table 6.4 illustrates that these broad principles are well represented in CSR tools and instruments, with 26 of the 27 instruments analysed including them. For example the ETI Base Code (Ethical Trading Initiative, n.d., p.2) describes: 'Wages and benefits paid for a standard working week meet, at a minimum, national legal standards or industry benchmark standards, whichever is higher. In any event wages should always be enough to meet basic needs and to provide some discretionary income'. The comprehensive coverage of this second-order theme may be down to the detailed attention of this area in global labour standards, and indicates that CSR instruments and standards can play a role in promoting good practice in this area.

Organisational Development and Culture

The theme 'Organisational Development and Culture' reflected three thematic areas: training and development; performance management; and organisational climate and internal communication, which included 12 third-order themes, as presented in Table 6.5.

The legal and normative framework for training and development are set broadly by the Human Resource Development Convention, 1975 (No. C142) and Paid Educational Leave Convention, 1974 (No. C140), and associated Recommendation R195. As noted above, C142 mainly calls on the employer to collaborate with initiatives providing vocational guidance and training. C140 lays out the principle that employees should be granted paid educational leave for the purposes of training, general education, or trade union education, while R195 supports lifelong learning and employability.

Table 6.5. Organisational Development and Culture

Sub-themes	Issues in CSR standards		
	Nature of training		
Training and development	Professional development and long-term careers		
	Support to continue and finish studies		
	Local cooperation in training and development		
	Job performance reviews		
Performance Management	Individual and corporate performance-based variable compensation		
	Internal promotion, recognition and retention of trained employees		
	Workers' job satisfaction and work climate		
Organisational Climate	Workers' wellbeing		
and Internal	Ethics training		
Communication	Communication systems		
	Grievance system		

As illustrated by Table 6.5, the emerging themes capture the relevant principles. Of the 27 tools and instruments considered, 21 referred to these concepts. An example is the Good Corporation Standard (2010, p.2) which notes: 'The organisation encourages employees to develop skills and progress in their careers [...] Employees have appropriate training, learning and development opportunities to support their work and career progression'. Furthermore, CSR tools and instruments tended to go further than ILO conventions by supporting the continuation and completion of on-going studies and including aspects such as funding graduate programs or monitoring employees' educational profiles.

While there is no explicit convention on performance management, certain principles from other conventions, such as the Minimum Wage Fixing Convention, 1970 (No. C131), apply. Of the 27 tools and instruments considered, 16 made reference to the importance of performance management. Table 6.5 reflects the main areas covered. For example Q52 of the SAM Research Corporate Sustainability Assessment Questionnaire (DJSI) (2009, p. 18-19) asks: 'What is the share of performance-related compensation for each employee category as a percentage of total compensation [...]?' While the level of representation is by no means poor, given that performance management is an inevitable aspect of employer employee interaction, it might be expected to be a more common feature of CSR tools and

instruments. However, this may be down to the relatively low representation of the issue in international legislation, and thus, it remains positive that CSR tools and instruments have looked to fill the gap between responsible management and legislative requirements.

As above, there are few references to organisational climate and internal communication as a broad concept in international legislation. Specific items are considered often under nonbinding recommendations, such as the recommendation on Examination of Grievances, 1967 (No. R130) which highlights that workers' should have the right to submit a grievance without being prejudiced. The Communications within the Undertaking Recommendation, 1967 (No. R129), also includes provisions for "appropriate measures to apply an effective policy of communication with the workers and their representatives". These could include meetings, journals and magazines, notice-boards, annual reports or media aimed at permitting workers to submit suggestions and to express their ideas relating to operations. As illustrated by Table 6.5, existing CSR tools and instruments include reference to these principles and include additional provisions. Moreover, recognising the importance of these issues to sustainability, 23 from the 27 considered tools and instruments referred to related issues. For example the standard, SGE 21 2008: Ethical and CSR Management System Forética (2008, p. 17) notes: 'Organisations will make available to all personnel the appropriate channels through which to direct their suggestions, complaints or grievances [...]. A record will be kept with the entries and the measures adopted for the resolution of grievances, as well as their effectiveness'.

Industrial relations

'Industrial Relations', as presented in Table 6.6, included two broad areas: employee representation and collective bargaining; and dialogue with workers during corporate restructuring, which could be further divided into eight third order themes.

Table 6.6. Industrial relations

Sub-themes	Issues in CSR standards
Employee representation and collective bargaining	Workers' representation system
	Actions when no existence of trade unions in the area or company
	Negotiation, and adherence to collective bargaining agreements
	Collaboration with and support to workers' representatives and trade union
	activities
	Level of conflicts within the company and conciliation machinery
Dialogue with workers	Policies enacted during changes in operations
and stakeholders	Dialogue and negotiation with trade unions and stakeholders prior to
during corporate	organisational changes
restructuring	Mitigation of adverse effects of corporate restructuring

Employee representation and collective bargaining is well represented in the international regulatory framework. Two of the eight fundamental ILO conventions cover this area: Freedom of Association and Protection of the Right to Organise Convention, 1948 (No. C087) and Right to Organise and Collective Bargaining Convention, 1949 (No. C098). C087 details the right for workers and employers "to join organisations of their own choosing without previous authorisation" while C098 specifies that workers must not be discriminated against for joining a union and that employers' should not dominate unions through "financial or other means". Other relevant conventions include the Workers' Representatives Convention, 1971 (No. C135) detailing the protection and facilities to be afforded to workers' representatives and the Collective Bargaining Convention, 1981 (No. C154) which highlights that collective bargaining should be promoted even when national legislative provisions are missing (its binding nature and prevalence over less favourable individual contracts is stated in Recommendation 91). Moreover, a number of other recommendations highlight the notion that industrial relations should be a protected element in the workplace (e.g. Collective Agreements Recommendation, 1951 (No. R91)). Other relevant institutions include the ILO Constitution (1919), the ILO Declaration of Philadelphia (1944), the ILO Declaration on Fundamental Principles and Rights at Work (1998) and the Universal Declaration of Human Rights (1948), which recognizes that "everyone has the right to form and to join trade unions for the protection of his interests" (art. 23).

As illustrated by Table 6.6 these principles are represented in CSR tools and instruments. For example the Guidance Document for Social Accountability 8000 (SA8000) (2004, pp. 63-64) requires companies adhering to the standard to provide: 'a) Testimony from workers that they know and/or can describe: i) the name of their union; ii) the identity of their union representative/s; iii) how the representatives are nominated and elected; and iv) the basic content of the collective bargaining agreement with management'. Of the 27 tools and instruments considered, 23 discussed employee representation and collective bargaining. Given the fundamental nature of this second-order theme to working conditions, as reflected by two fundamental conventions on the topic, it might be expected that its place in CSR tools and instruments should have been virtually guaranteed, however, this not note the case.

Principles in a number of conventions are relevant to dialogue with workers and stakeholders during corporate restructuring. For example, the Termination of Employment Convention, 1982 (No. C158) sets out the norms for the circumstances under which someone can be terminated. In relation to restructuring, that is when conditions (often outside of the organisation) necessitate elimination of a worker's post. Moreover, ILO recommendations (e.g. R129) recognize the dialogue between workers and employers on matters of mutual concerns. Despite being a sensitive issue with obvious implications for sustainability, only 12 of the 27 tools and instruments discussed dialogue with stakeholders during corporate restructuring. However, as illustrated by Table 6.6 the tools and instruments that did refer to such matters covered several of these important principles. For example, the International Finance Corporation state in their Performance Standard Labour and Working Conditions (2010, p.3): 'where the client proposes to implement collective dismissals, an analysis for alternatives to retrenchment will be conducted. If the analysis does not identify alternatives to retrenchment, a retrenchment plan will be developed and implemented to mitigate the adverse impacts of retrenchment on workers.'

Occupational Health and Safety System

'Occupational Health and Safety (OHS) System', as presented in Table 6.7, referred to five themes: workers' involvement in the OHS; monitoring of health and safety indicators; OHS training; OHS prevention; OHS protection; and violence, bullying and harassment at work. These included a further 19 third order themes.

Table 6.7. Occupational Health and Safety (OHS) System

Sub-themes	Issues in CSR standards				
Workers' involvement in	Involvement of workers on Health and Safety and in Health and Safety				
Occupational Health and	Committees				
Safety system and	Dissemination of OHS information to employees				
culture	Inclusion of OHS in collective agreements and strategic plans				
Management of	Recording and Incidence of work-related injuries/accidents and				
absenteeism, work	absenteeism				
fatalities and	Perceived safety				
occupational diseases	OHS compliance				
OUC Training	Employees' access to OHS training and instructions				
OHS Training	Awareness raising and educational campaigns in OHS				
	Safe facilities and processes				
	Prevention and assistance against serious work-related diseases,				
OHS Prevention	psychosocial hazards, and community health problems				
	OHS prevention for vulnerable groups				
	OHS management system				
	Safety protective equipment and machinery				
OHS Protection	Actions when incidents occur				
	Voluntary medical examinations for workers				
	Policies prohibiting, and establishing preventative cultures regarding,				
	violence, bullying and harassment				
Violence, bullying and	Prevalence and impact of violence, bullying and harassment				
Violence, bullying and harassment at work	Protection mechanisms to investigate and respond after accusations of				
	violence bullying and harassment				
	Not toleration of corporal punishment or verbal, mental or physical				
	coercion among disciplinary procedures –including security forces-				

Nearly half of the ILO instruments are directly or indirectly related to this area (ILO, 2009). These include 40 standards specifically dealing with OHS. Conventions such as the

Occupational Safety and Health Convention, 1981 (No. C155), Occupational Health Services Convention, 1985 (No. C161), and Promotional Framework for Occupational Safety and Health Convention, 2006 (No. C187) are relevant to most of the emerging second-order themes. C155 includes reference to: recording of work-related accidents and diseases, cooperation with workers and the appointment of joint safety and health committees, adequate protective measures against dangerous processes, measures to deal with emergencies and accidents, and the right to remove oneself from work when exposed to imminent and serious danger. C187 highlights a number of principles that should be upheld by organisations including: assessing occupational risks, combating these at the source, and developing a health and safety culture which includes information, consultation, and training. C161 promotes concepts including risk assessment, ongoing workplace monitoring, worker participation, the adaptation of work to the worker, and training and education in OHS. The UN International Covenant on Economic, Social and Cultural Rights also highlights a general right to a safe and healthy working environment.

As illustrated by Table 6.7 these principles are largely represented by the existing CSR tools and instruments, however coverage of issues is not consistent. For example Principle 5 of the Global Sullivan Principles for Corporate Social Responsibility (1999) asks enterprises to: 'Provide a safe and healthy workplace; protect human health and the environment; and promote sustainable development'. Another example is the ISO 26000 final draft (2010, p.39) which highlights the 'right of workers: (...) to participate in health and safety decisions and activities, including investigation of incidents and accidents'. As with the finding on collective bargaining and worker representation, a similar result was observed in relation to workers' involvement in occupational health and safety system and culture, which was only discussed by 8 tools and instruments. This clearly indicates that there is much room for improved coverage, particularly given the recognition that worker involvement is a recognised critical part of OHS (Walters & Nichols, 2007). Management of absenteeism, work fatalities and occupational diseases was discussed by 27, and OHS training by 19 indicating better coverage in CSR tools and instruments.

A number of conventions targeting specific risks are relevant to the OHS prevention and OHS protection second-order themes. Examples include the Chemicals Convention, 1990 (No. C170), Occupational Cancer Convention, 1974 (No.C139), Working Environment (Air Pollution, Noise and Vibration) Convention, 1977 (No. C148), and Guarding of Machinery Convention, 1963 (No. C119). Conventions such as the Medical Examination of Young Persons (Industry) Convention, 1946 (No. C077) also highlight general prevention and protective principles. The existence of an OHS management system was a major principle represented in several of these conventions. Of the 27 tools and instruments considered, 26 discussed issues relating to OHS prevention, while only 10 discussed OHS protection. The focus of CSR instruments OHS prevention rather that protection.

The convention on Discrimination (Employment and Occupation) Convention, 1958 (No. C111) also included a number of principles relevant to violence, bullying and harassment at work, such as the promotion of equality of opportunity and a view to eliminating discrimination in employment. The UDHR also states that "no one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment" (art. 5). While Table 6.7 indicates that some tools and instruments included the relevant principles, only 12 of the 27 tools and instruments analysed referred to these issues. For example, the Human Rights Compliance Assessment (HRCA) Quick Check (2006, pp. 46-47) includes an indicator which states: 'Does the company take measures to protect workers from acts of physical, verbal, sexual, or psychological harassment, abuse, or threats in the workplace, including when determining and implementing disciplinary measures?'. Given that C111 is a fundamental convention of the ILO and the importance of protecting workers from these incidents, there is a greater need for recognition of these issues in CSR tools and instruments.

Diversity and Non-discrimination

'Diversity and Non-discrimination', as presented in Table 6.8, included eight second-order themes and 21 third-order themes. The second-order themes gender equality; equal opportunities and support for disabled people; equal opportunities and support for ethnic, racial or religious minorities; non-discrimination by age; and non-discrimination to other vulnerable groups, represented themes for the existence of initiatives under the equal opportunities theme in specific areas.

On the basis of the UDHR (art. 2), the ILO has declared its two Conventions regarding non-discrimination as fundamental, and therefore binding for its Member States. The convention on Discrimination (Employment and Occupation) Convention, 1958 (No. C111) and the corresponding recommendation, (No. R111) lays out articles regarding discrimination on the basis of race, colour, sex, religion, political opinion, national extraction, or social origin. It also covers "such other distinction, exclusion, or preference, which has the effect of nullifying or impairing equality of opportunity". The convention targets the promotion of equality of opportunity at the workplace in and the elimination of discrimination on the basis of the above characteristics.

Other conventions outline more specific principles. For example, the second fundamental convention in this area, Equal Remuneration Convention, 1951 (No. C100) sets the principle of equal pay for comparable work by men and women at work, which is also professed by the UDHR. The Vocational Rehabilitation and Employment (Disabled Persons) Convention, 1983 (No. C159) targets equal access to employment opportunities regardless of physical or mental impairment. The Workers with Family Responsibilities Convention, 1981 (No. C156) states that family responsibilities must not constitute a valid reason for termination of employment, and calls for equal treatment of these workers. Finally, the Migration for Employment Convention (Revised), 1949 (No. C097), Migrant Workers (Supplementary Provisions) Convention, 1975 (No. C143), Relation with Agency Workers, 1997 (No. C181) and the Indigenous and Tribal Peoples Convention, 1989 (No. C169) are related to non-discrimination to migrants, agency and indigenous workers. The UN International Covenant

on Economic, Social and Cultural Rights also highlights a general principle that no worker should be barred from opportunities within work on the basis of the above characteristics.

Table 6.8. Diversity and non-discrimination

Sub-themes	Issues in CSR standards				
	Equality and diversity monitoring				
	Impact of discrimination				
	No tolerance policy regarding discrimination				
	Prevention: Specific strategies to prevent discrimination in Human				
	Resource policies and guidance and recommendations from institutions				
Equal Opportunities (EO)	Affirmative policies to achieve greater equality or remediate past				
	discrimination				
	Protection: Mechanisms to deal with potential cases of discrimination				
	Respect and awareness-raising about vulnerable groups				
	Establishing supportive mechanisms for minority groups within the				
	community				
Gender equality	Includes all EO themes specifically relating to differing salaries between				
	genders for the same work and provision of support to women's' work				
Equal opportunities and	Includes all EO themes specifically relating to the provision of accessible				
support for disabled	workplaces for those with disabilities and the creation of jobs tailored to				
people	those with disabilities				
Equal opportunities and	Includes all EO themes specifically relating to ethnic/racial or religious				
support for ethnic, racial	minorities and the creation of a culturally sensitive environment for these				
or religious minorities	groups				
Non-discrimination by	Includes all EO themes specifically relating to age				
age	melades an Eo themes specifically relating to age				
Non-discrimination to	Includes all EO themes specifically relating to individuals with HIV-AIDS				
other vulnerable groups	Includes all EO themes specifically relating to relating sexual orientation				
other valuerable groups	Includes all EO themes specifically relating to any other vulnerable groups				
	Assessment of legal status and adherence to laws and international				
	standards				
Relation with agency	Monitoring and ensuring fair working conditions for employees of				
workers	contractors, subcontractors and intermediaries				
	Non-discrimination to agency/outsourced/home workers comparing to				
	company's employees				
Labour insertion for	Diversity: Presence of people from disadvantaged backgrounds on staff				
economically	Avoidance of discrimination and exploitation, and support to poor groups				
disadvantaged people	e Promotion of social inclusion				

As indicated by the emerging themes in this area (Table 6.8) these principles are well reflected in existing CSR tools and instruments. All CSR tools and instruments (27) included at least a general claim of equality and staff diversity, non-tolerance policies regarding discrimination, and specific strategies to prevent discrimination in human resource policies. For example the Sigma Guidelines- Toolkit for Sustainability Issues (p.3) highlights that: 'Ensuring equal opportunities for all in an organisation without unfair restrictions or barriers. Good practice in this area (...) helps an organisation 'fit' into its surroundings, matching its workforce and supplier mix to that of the locale'. Gender equality (19), equal opportunities and support for disabled people (15), equal opportunities and support for ethnic, racial or religious minorities (17) were covered in more than half of CSR tools and instruments analysed, for example the FLO-CERT Public Criteria List - Hired Labour-Fair Trade Mark Standard (2014, p. 22) states: "Local and migrant, seasonal and permanent workers receive equivalent benefits and employment conditions for equal work performed. While non-discrimination by age was only referenced by eight tools and instruments, nondiscrimination to other vulnerable groups in seven and labour insertion for economically disadvantaged people in six tool and instruments, highlighting a large gap in the current coverage of current CSR tools and instruments. This can partially be explained by the limited number of international laws and standards which have been developed to specifically address discrimination against these vulnerable workers as well as challenges around implementation and adoption (ILO, 2007a).

Human Rights

As illustrated in Table 6.9, 'Human Rights' emerged with seven second-order themes which included: human rights risk and investment analysis; human rights compliance of suppliers; training in human rights; respect for workers' human rights; freedom of workers' organisation and collective bargaining; rejection of child labour; and rejection of forced labour. These second order themes could be further divided into 24 third-order themes

Table 6.9. Human Rights

Sub-themes	Issues in CSR standards		
	Strategic risk management evaluation of operations, products and services		
Human rights risk and	and investment decisions to prevent violations of human rights		
investment analysis	Evaluation of human rights when considering financial partners or the		
	provision of capital		
	Human rights selection criteria for suppliers and contracts and affirmative		
	discrimination to most responsible allies		
	Transparency about production processes and location of suppliers		
Human rights	Monitoring mechanisms and assurance of human rights by suppliers and		
compliance of	business partners		
suppliers	Policies and procedures throughout supply chain to ensure the maintenance		
	and improvement of human rights and CSR issues		
	Response to human right incidents of external partners and legitimate		
	operational-level grievance mechanisms		
	Quantity and type of training carried out and detailed in policies		
Training in Human	Level of knowledge and awareness of employees and managers regarding		
Rights	grievances and remediation of human rights, international standards, and		
	CSR management		
	Policies, procedures and guarantees to ensure human rights are maintained		
	throughout the company,		
	Human Rights auditing and verification of internal compliance		
Respect for workers'	Consultation from local stakeholders and external organisations regarding		
human rights	human rights		
	Non-discrimination at work from a human rights perspective		
	Remediation of human right impacts and legitimate operational-level		
	grievance mechanisms within the company		
	Respect and non-discrimination of employees' rights of freedom of		
Freedom of workers'	organisation		
organisation and collective bargaining	Guarantees in countries which restrict workers' organisation to avoid such		
	restrictions		
	No support to child labour and no exploitative employment		
	Prevention of child labour in the supply chain		
Rejection of child	Decent work conditions for workers between 15 and 18		
labour	Remediation policies when child workers found		
	Awareness raising against child labour and commitment to children's future		
	Avoidance of forced labour		
Rejection of forced	Fair and transparent conditions regarding termination of employment and		
labour	leaving work		
	Prevention of indirect forced labour within the company		

Several conventions which were discussed in relation to the previous themes also apply to human rights. These include the Equal Remuneration Convention, 1951 (No. C100), Discrimination (Employment and Occupation) Convention, 1958 (No. C111), Freedom of Association and Protection of the Right to Organise Convention, 1948 (No. C087), and the Right to Organise and Collective Bargaining Convention, 1949 (No. C098). As discussed earlier, the findings illustrate that these principles are referenced in other areas of CSR tools and instruments. However, the fact that these tools and instruments also recognise them as human rights issues indicates their relative importance and the need to treat them as priorities. For example the use of the word 'right' in the Tripartite Declaration of Principles concerning Multinational Enterprises and Social Policy (ILO, 2006a, p. 8): 'Enterprises should [...] Respect the right of their employees to be represented by trade unions'.

The second-order themes, human rights risk and investment analysis, human rights compliance of suppliers and training in Human Rights, are more specific in nature and not explicitly referred to in ILO conventions. They relate to the extent of labour rights both in the supply chain and global operations of organisations, especially in countries or operations with a high risk of human rights non-compliances. Therefore, they generally promote the principles established in related conventions. In doing so they illustrate the value of CSR tools and instruments in pursuing the principles laid out by the international legislative framework, as they can be more ambitious in scope. For example the World Business Council for Sustainable Development and International Finance Corporation, Measuring Impact Framework Methodology (2009, p.47) recommend companies consider the 'source of impact: Monitoring of suppliers; Existence of human rights screening of suppliers (...); percentage of suppliers that have undergone environmental screening; Supplier enforcement (e.g., number of suppliers disqualified)'. Of the 27 tools and instruments considered, human rights risk and investment analysis was referred to in 12 tools and instruments, human rights compliance of suppliers in 20, and training in human rights in 8 tools and instruments. Given the lack of specific reference to these second-order themes in

international standards, these numbers are indeed promising, but also highlight that that risk analysis and human rights training could be further represented in CSR tools and instruments.

Respect for workers' human rights and freedom of workers' organisation and collective bargaining were largely covered above and were referred to by 27 and 23 tools and instruments respectively. For example, The UN Guiding Principles (UN, 2011, p. 17) states: 'In order to identify, prevent, mitigate and account for how they address their adverse human rights impacts, business enterprises should carry out human rights due diligence. The process should include assessing actual and potential human rights impacts, integrating and acting upon the findings, tracking responses, and communicating how impacts are addressed'.

A number of relevant conventions in this area relate to child labour and forced labour, such as the Minimum Age Convention, 1973 (No. C138), Worst Forms of Child Labour Convention, 1999 (No. C182), Forced Labour Convention, 1930 (No. C029), and Abolition of Forced Labour Convention, 1957 (No. C105). C138 calls for the establishment of a minimal working age and forbids employment below this age. C029 calls for the suppression of forced or compulsory labour, as does article 4 of the UDHR. The International Covenant on Economic, Social and Cultural Rights also affords the right to freely chose work, and prohibits forced labour.

Avoidance of child labour is a central theme of the considered CSR tools and instruments, being covered by 26 of the 27 considered. An example comes from FLO-CERT Public Criteria List, Hired Labour-Fair Trade Mark Standard (2014, p. 15) notes: 'Where children below the age of 15 have been employed in the past, or are found working, the company has put in place a remediation policy to ensure that the children do not enter into worse forms of employment'. Forced labour is also covered by 26 tools and instruments. An example is from the Human Rights Compliance Assessment (HRCA) Quick Check (2006, pp. 13-14): '[the] company takes all necessary measures to ensure that it does not participate

in, or benefit from any form of forced labour. The company (or its recruiting agencies) does not charge workers recruiting or hiring fees that require the worker to be indebted to the company (or recruiting agency), or to work for the company (or recruiting agency) to pay off the debt'. The high prominence of these themes on CSR tools and instruments is in some part likely to be due to the fact that there is a strong precedent set by international legislation, including the four fundamental ILO conventions.

6.3.2. Results of part 2

The goal of the research was to assess whether, and how, enterprises operationalized the link between managing the working environment and CSR, and how this understanding varied across different dimensions. To explore this, a series of tables and figures were compiled indicating how many companies had at least one relevant initiative across the different themes of the analysis (Table 6.10). Figures also indicate the existence of initiatives as a function of region (Figure 2) and sector (Figure 3). At the theme level most organizations mentioned relevant issues, although there was a slight decrease in engagement regarding human rights and a more substantial drop regarding industrial relations. However, there was considerable fluctuation in what was reported at the subtheme level.

Table 6.10. Number of companies reporting on the 30 subthemes (%)

Themes	Percentage of	Subtheme	Percentage of
	companies		companies
	reporting on		reporting on
	theme		subtheme
	(N=100)		(N=100)
Employment	88%	Terms of Contracting and Work Schedules	46 (52%)
Conditions		Actions of Company in Relation to Rotation, Dismissals and Retirements	44 (50%)
		Labour Market Entrance	43 (49%)
		Wages and Benefits	65 (74%)
Organisational	92%	Training and Development	87 (95%)
Development and		Performance Management	69 (75%)
Culture		Organisational Climate and Internal Communication	87 (95%)
Industrial Relations	51%	Employee Representation and Collective Bargaining	44 (86%)
		Dialogue with Workers and Stakeholders during Corporate Restructuring	22 (43%)
Occupational Health and Safety	93%	Workers' Involvement in OHS System and Culture	45 (48%)
(OHS) System		Management of Absenteeism, Work Fatalities and Occupational Diseases	81 (87%)
		OHS Training	57 (61%)
		OHS Prevention	86 (92%)
		OHS Protection	68 (73%)
		Violence, Bullying and Harassment at Work	41 (44%)
Diversity and Non-	91%	Equal Opportunities	80 (88%)
discrimination		Gender Equality	84 (92%)
		Equal Opportunities and Support for Disabled people	49 (54%)
		Equal Opportunities and Support for Ethnic, Racial or Religious Minorities	53 (58%)
		Non-discrimination by Age	53 (58%)
		Non-discrimination to Other Vulnerable Groups	23 (25%)
		Relation with Agency Workers	68 (75%)
		Labour Insertion for Economically Disadvantaged People	23 (25%)
Human Rights	75%	Incorporation of Human Rights in Risk and Investment Analysis	16 (21%)
		Human Rights Compliance of Suppliers	41 (55%)
		Training in Human Rights	28 (37%)
		Respect for Workers' Human Rights	58 (77%)
		Freedom of Workers' Organisation and Collective Bargaining	55 (73%)
		Rejection of Child Labour	38 (51%)
		Rejection of Forced Labour	37 (49%)

NOTE: Percentage in brackets represents percentage of companies reporting on the broader theme reporting also on the specific subtheme

Most regions considered a range of issues in line with this general trend, however the Eastern Mediterranean region was an exception mentioning very few initiatives and in certain cases no initiatives could be identified for entire themes (Figure 6.2).

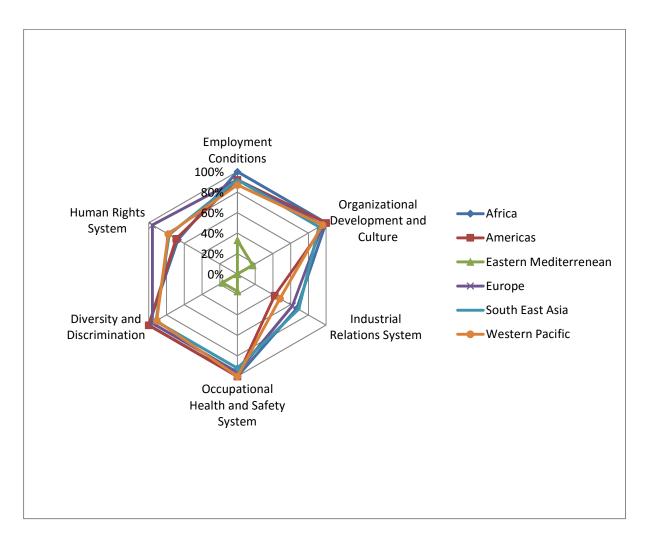


Figure 6.2. Number of companies reporting issues on the six themes by region

Similarly, most sectors showed positive engagement (Figure 6.3). There was relatively little variance amongst sectors on most themes. Once again industrial relations and human rights issues remained the outliers with considerable variance in engagement depending on sector. Of the sectors with relatively large sample sizes, the mining and quarrying sector was particularly noteworthy. Conversely, organizations in the transport, storage and communication sector, often failed to mention several issues. Findings on the subtheme level are presented below.

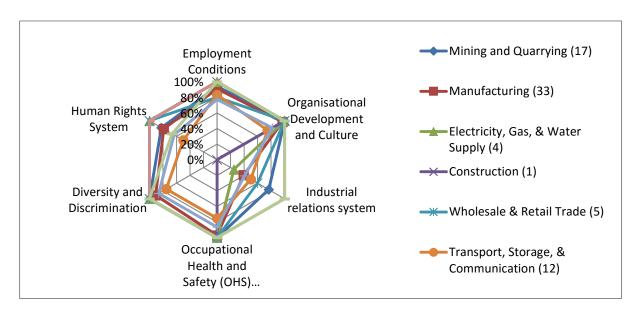


Figure 6.3. Number of companies reporting on the six themes by NACE sector

Employment Conditions

The four subthemes related to this theme (see Table 6.10) included issues such as: flexible working arrangements, formal programmes to aid those made redundant, entry level employment opportunities, and a formal minimum wages policy. Initiatives falling under this theme were mentioned by 88% of organizations. Initiatives relating to remuneration were the most commonly mentioned subtheme (mentioned by 65% of organizations and 74% of organizations discussing the broader theme). Other aspects were mentioned by less than half the organizations at approximately 45% of the sample (50% of those reporting on the broader theme). Organizations from the Africa region, and of the sectors with adequate sample sizes, the manufacturing, and mining and quarrying sectors, discussed this theme more than others. This was the theme organizations from the Eastern Mediterranean region engaged the most with, with 2/6 organizations reporting relevant initiatives.

Organizational Development and Culture

The three subthemes relevant to this theme (see Table 6.10) included the following issues: job analysis to highlight training needs, structured performance appraisals using key performance indexes, and internal communication channels. This theme was mentioned by

most organizations (92%). Initiatives relating to training and development, and organizational climate and internal communication, were particularly prominent, as both were discussed by 87% of the sample and 95% of the organizations who mentioned the broader theme. The remaining subtheme, performance management, was mentioned by 69% of the total sample (75% of those reporting on the wider theme). There was little variance regarding reporting at the region or sector level. Companies from the Eastern Mediterranean remained an exception with many organizations failing to note any related initiatives, while the storage transport and communication sector tended to report initiatives less than other sectors, although performance was still high (75%).

Industrial Relations

The two subthemes relevant to this theme included issues relating to processes to incorporate employees in decision making, as well as services to facilitate relocation. This theme was often not discussed by organizations, as only 51% reported a relevant initiative. This trend persisted across regions, excluding the Eastern Mediterranean region which failed to report any initiatives. However, there was significant variance at the sector level, the most of any theme. The mining and quarrying sector showed a stronger engagement across the theme, as did several sectors with smaller sample sizes (real estate, renting and other business activities; and other community and social and personal services), however this could be due to small sample size. Conversely, the manufacturing, and financial intermediation sectors reported less initiatives under this theme.

There was also considerable variance between the two subthemes. The subtheme concerning dialogue and restructuring was relatively rarely mentioned as only 22% of the total sample and 43% of the organizations discussing the broader theme, made reference to this subtheme. Employee representation and collective bargaining was commented on more often, as 86% of organizations commenting on the theme mentioned initiatives under this subtheme. However, relative to the sample this remained a low percentage (44%).

Occupational Health and Safety (OHS) System

The six themes incorporated under this theme (see Table 6.10) included issues related to: OHS committees, reporting of OHS indicators, OHS interventions regarding traditional and emerging risks, and provision of harassment policies. Overall 93% of the sample reported a relevant initiative making it the most reported theme of the thematic framework. Excluding the Eastern Mediterranean, all regions showed high engagement. Companies in the South East Asia region, indicating comparatively the lowest levels of engagement, still had 92% of organizations reporting on relevant initiatives. Relative to the other regions, the Eastern Mediterranean region performed poorly, however, this was one of the four themes that companies from the Eastern Mediterranean commented on. The mining and quarrying sector was particularly noteworthy with all companies mentioning a related initiative under the theme, the only sector with a large sample size to do so. Conversely the transport, storage, and communication sector performed relatively worse, with only 75% of organizations mentioning a relevant issue.

Companies' performance on the subtheme level varied depending on the subtheme. Management of absenteeism, work fatalities, occupational diseases, and standards (81%) and OHS prevention (92%) were most frequently reported on. Conversely, workers' involvement in OHS systems and culture (48%), OHS training (61%), OHS protection (73%), and violence, bulling and harassment at work (41%), were all reported on considerably less.

Diversity and discrimination

This theme included organizations' provisions to create inclusive environments with respect to several diversity issues (see Table 6.10). Relevant issues captured by the themes included: generic diversity training, provisions to ensure equal wages across genders,

initiatives to promote the recruitment of disabled individuals, development opportunities for racial minorities, inclusion of age within equal opportunities policies, provision of specific policies regarding right to free sexual orientation, dedicated supplier codes, and initiatives to provide employment to indigenous populations. This theme was reported on by 91% of organizations. Initiatives classified under this theme were most readily described by companies in the Americas region, although most sectors engaged with theme. Companies in the Easter Mediterranean region remained disappointing with only one company mentioning a related issue. Most sectors reported relative initiatives across the theme, with the transport, storage and communication sector falling slightly behind (75%).

As above there was considerable variance in reporting at the subtheme level. Gender equality was a large focus with 84% of the sample and 92% of companies reporting on the theme, mentioning a gender related initiative. Equal opportunities (80%) and relation with agency workers (68%), were also quite readily mentioned by organizations. Conversely equal opportunities and support for disabled people (49%), ethnic, racial or religious minorities (53%), non-discrimination by age (53%), non-discrimination to other vulnerable groups (which predominantly focused on right to free sexual orientation) (23%), and labour insertion for economically disadvantaged people (23%) were mentioned considerably less.

Human rights

Seven subthemes related to this theme (see Table 6.10) including issues such as organization: human rights audits of possible financial customers, human rights policy audits, number and description of training courses made available, adoption of the United Nations Global Compact, minimum age policy in recruiting practices, and forced labour audits.

Overall consideration of this theme was mediocre with 75% of organizations including a related initiative. The European region had the highest proportion of organizations considering such initiatives. At the sector level there was considerable variance in levels of engagement. Of the sectors with adequate sample sizes, mining and quarrying reported

initiatives under most subthemes while transport, storage, and communication reported the least. Generally, sectors relating to physical labour commented more on these issues. Generic approaches relating to respect for workers' human rights were the most commonly discussed initiative with 58% of the sample and 77% of organizations reporting on the broader theme, mentioning a related initiative. However, incorporation of human rights in risk and investment analysis received little attention (16% of the total sample and 21% of those companies reporting on human rights issues). Therefore this theme also included subthemes where performance would fluctuate depending on the area of human rights being discussed.

6.4. Discussion

6.4.1. Part 1

While employees' issues have been on the CSR agenda since the first theoretical CSR models (Carroll, 1979, Freeman, 1984, Wood, 1991), and are also included in company CSR reports (Owen & O'Dwyer, 2008), research on these issues, particularly in the CSR literature, as well as on their inclusion in CSR instruments has been limited. The literature review indicated that even though several existing reviews have analysed main dimensions and issues in CSR codes and standards, a large number of these reviews has either overlooked employees' working conditions, health, safety and well-being or have only approached these issues in a general way. However, the findings favourably suggest that this pattern is changing, as many of the CSR instruments and standards launched in recent years are using new methodologies and include new topics, including detailed sections related to working conditions. This is plausibly due to institutional (through creation of guidance, standards and tools) and theoretical developments in the field of CSR over the past decade.

The findings clearly highlighted that most aspects of working conditions are included in CSR instruments. As discussed previously, CSR instruments and standards include basic labour and human rights (work schedules, workers' representation system, non-forced or child labour, non-discrimination, non-violence, health and safety). Increasingly, human resource policies (e.g. recruiting, promoting, training, payment, dismissals) are also covered in various CSR instruments. This is particularly important as regulation does not cover many of these issues, and voluntary approaches such as codes of conduct, governance documents, can help promote good practice, as these practices are linked to workers' well-being, job satisfaction and organizational commitment (Standing, 2007). As such, CSR is increasingly becoming part of the daily work of human resource managers. However, both HR managers and employees' representatives are not always at the forefront of these initiatives (Preuss, Haunschild & Matten, 2009). Moreover, CSR instruments increasingly take into account the needs of vulnerable groups and specific actions are suggested (e.g. drawing a profile of diversity, risk analysis, policies and statements, non-discrimination in human resources, affirmative policies, and protection and grievance mechanisms, awareness-raising). Nongender discrimination in wages and culturally-neutral environments are some of the key aspects to ensure equal rights for minority groups included in the instruments. Besides, specific instruments for vulnerable groups have been launched (McKague & Cragg, 2007).

Research to determine the emerging risks at work that can affect workers' health, safety and well-being shows that these include: (i) new forms of employment contracts – precarious contracts, lean production, outsourcing, informal sector - and job insecurity, (ii) the ageing workforce, (iii) work intensification, (iv) high emotional demands at work (bullying, mobbing, violence at work), and (v) poor work-life balance (EU-OSHA, 2007). In this context, the results of this study also suggest that across all instruments analysed, there is a broad coverage of OHS issues in CSR instruments which include: training, participation, prevention, OHS culture, protection, remediation, management system, and addressing specific needs of vulnerable groups. Also, addressing legal non-compliances and implementing best practices to promote OHS were reported in the analysis (e.g. fines, civil penalties, sanctions, legal actions, awards and certification of compliance with standards).

Some instruments also take into account the prevention of serious work-related diseases and broader public health problems.

Improving working conditions and promoting the health, safety and well-being of workers are clearly relevant to the CSR activities of the firm, as can also be seen in the increased reporting of these issues in annual company CSR reports (Vuontisjärvi, 2006). Looking after the workforce and developing its capacity (mentally, socially, etc.) has strategic importance for organisations and society alike, especially if one considers current challenges such as workforce ageing and organizational restructuring (Jain et al., 2011). Ensuring workers' employability and lifelong learning is an important element in some CSR instruments, as well as supporting active ageing (e.g., accurate training for workers over 45 years old, guidance and support for retirement process, provision of pension schemes etc.).

However, despite the broad coverage of these issues in CSR instruments, their inclusion in individual instruments varies considerably amongst different instruments. Most instruments are far from comprehensive (Rasche, 2010), and the extent to which they cover working conditions are shaped by the goals and objectives that led to their development. The understanding of CSR, the instruments and their implementation are also influenced by region of origin, cultural values, political frameworks, enterprise sector, and economic situation (Albareda et al., 2007; Barth & Wolff, 2009; Blowfield & Murray, 2008; Waddock, 2008).

Many CSR instruments differentiate between internal and external issues, creating an internal-external duality. However, companies need to take both into account when it comes to working conditions and labour issues, as both internal and external stakeholders (through the supply chain) are involved. The need for integrating these external and internal issues will become stronger as globalization and outsourcing become more common. Moreover, there is a clear relationship between labour and human rights issues that many times does not justify their division. There are 'grey areas' that are grounded in both human rights and labour issues, e.g. aspects such as involuntary overtime, creating barriers for trade union

functioning, discrimination, or bullying and violence at work. Implementing external CSR initiatives or philanthropy without including the improvement of working conditions can be problematic, as it can lead to a decrease in employees' performance, job satisfaction and productivity due to an increase in perceived inequity and injustice (Arenas and Rodrigo, 2008).

After conducting a thematic analysis and building an evaluation framework, this research supports hypothesis 1. Main CSR standards seem to be based on the ILO standards and international legislation and, consequently, they show a strong coverage of working conditions and health and safety issues.

6.4.2. Part 2

The present article aimed to assess whether, and how, managing the working environment was represented in CSR reports of FT 500 companies. The purpose of this was to understand whether the growing momentum behind a CSR inspired approach to managing the work environment had entered corporate practice and how. Overall, reporting of themes was high, with most areas identified in the thematic template considered by a significant proportion of companies (approximately 90%). Two notable exceptions at the theme level were industrial relations and human rights.

Regarding the former, both associated subthemes showed lower reporting compared to other subthemes. Jones and colleagues (2007) found that enterprises continued with highly controversial labour policies, if they had a sound business reason for doing so. According to these authors, a higher sensitivity to industrial relation issues could occur in companies operating in high exposure industries with high reputational risks. While uneven sample sizes hinder comparisons, the data here partially supports this possibility. The mining and quarrying sector reported a relatively higher number of initiatives, while transport, storage, and communication, and financial intermediation performed lower. A possible reason for low reporting regarding the second industrial relations subtheme, restructuring, is that this

issue may not have been relevant to all organizations. Previous research suggests corporations tend to approach restructuring in a responsible manner (Bonvin, 2007; Segal et al., 2003) supporting this conclusion.

The finding that human rights initiatives were reported less is in line with previous research. A study by the GRI (2008) considered human rights reporting within their framework and noted the following rates for various human rights initiatives (figure in brackets reflects the percentage found in this study): freedom of association and collective bargaining, 79% (55%); prevention of child labour, 71% (38%); prevention of forced labour, 67% (49%); suppliers/contractors human rights screening, 54% (16%); human rights training, 40% (28%). While the rates reported by the GRI are higher than those found here, there is a similar trend regarding the priority of issues. The report also noted that, similar to the present findings, initiatives regarding freedom of association and collective bargaining tended to be the most in-depth, while initiatives in other areas were more superficial. A second GRI review (Umlas, 2009) reinforced the idea that companies' performance in this area is poor, stating that much progress can be made. An additional critique was that companies opted to report on human rights issues only when they had something positive to report, similar to the present findings. This, despite guidance recommending companies additionally report negative elements (e.g. the presence of child labour) for transparency and monitoring purposes.

Despite the variance regarding these two themes, overall reporting was high, suggesting that broadly speaking, managing the work environment is understood to be a material CSR issue; a finding in line with the limited previous research. Employee issues, including OHS and training and development, was found to be among the most importants in studies conducted in the US, UK, and Australia (Chen & Bouvain, 2008), in Hong Kong (Welford, Chan, & Man, 2008) and China (Gao, 2009).

However, not all subthemes were equally considered, suggesting that the relevance of specific themes was less readily accepted. Training and development and organizational

climate and internal communication, were the two most reported subthemes with 87% of companies discussing related initiatives. Vuontisjärvi (2006) also identified training as the most cited within CSR disclosures in Finland. The high prevalence of this theme may be due to the business case for these initiatives, such as attracting and developing talent (Arnold et al., 2005). The high reporting of organizational climate and internal communication may be explained by the links to regulation, such as provisions to inform or include employees in decisions which affect them materially.

Following these themes, OHS prevention initiatives were the next most reported (86%). It is encouraging that organizations' OHS approach is reported to be more preventative then protective. This may be down to legislative requirements placed on organizations (e.g. The European OSH 'Framework Directive': Directive 89/391/EEC) as well as awareness and guidance related efforts by the ILO, such as the Decent Work agenda (ILO, n.d.), and the WHO, in creating the Healthy Workplace Framework (WHO, 2010). Non-discrimination and gender was the third most referred to subtheme (84%) which again is likely to relate to the focus on gender equality initiatives at the policy level and relevant legislation (Bilimoria, Joy, & Liang, 2008; Wooten, 2008).

Additionally, some indicators were rarely reported on. The four subthemes least considered were: incorporation of human rights in risk and investment analysis (16%), dialogue with workers and corporate restructuring (22%) (discussed above), and non-discrimination to other vulnerable groups, and labour insertion for economically disadvantaged people (23%). Incorporation of human rights in risk and investment analysis, and labour insertion for economically disadvantaged people may not have applied to all organizations thus explaining their relatively low reporting frequency. As mentioned, non-discrimination to other vulnerable groups mainly focused on right to free sexual orientation. Issues mentioned under this subtheme were low compared to other forms of discrimination. This may partially be explained by its absence from CSR guidelines. The GRI (GRI, 2013), often cited as the main source of CSR reporting guidance, makes explicit reference to age, disability, race and gender, without mentioning sexual orientation. Additionally, laws

regarding this form of discrimination have only recently emerged, such as the 2007 Equality Act (Sexual Orientation) in the UK.

In conclusion, this analysis presents a relatively positive picture regarding engagement with management of the working environment. Reporting at the theme level was high overall; however variance at the more specific subtheme level existed. Moreover, this analysis considered reporting of any initiative regardless of quality. However, it can be argued that there exists a basic understanding that managing the work environment and CSR are materially linked. Further development of the institutional environment (Campbell, 2007), particularly in combining hard and soft policy options in this area (Ioannou & Serafeim, 2012), is likely to further stimulate organizations towards better management of the work environment.

Another focus for this research was investigating differences across WHO regions, as social, political and economic climate can influence the nature of organizations' non-financial agenda (Chen & Bouvain, 2008). The performance of the Americas and Europe regions were relatively similar and suggests that organizations in these regions appeared to have the most far reaching CSR initiatives. The European region superseded other regions in this respect, by being far more thorough, far sighted, and based on good practice recommendations. This performance at the regional level is likely due to the emphasis on broader CSR in Europe. Approximately half of all companies in the region were on the GRI database and Dow Jones Sustainability Index, which it is also related to the active role of the European Commission in promoting CSR (EC, 2011a) and to the national policies developed in many EU countries to address these issues (EU-OSHA, 2004).

A higher level of intervention was also seen in the Americas region. Similar to Europe, it is likely that a high level of business awareness and understanding of CSR explain this performance. A recent survey pointed out that most managers felt that CSR did not negatively affect, and could improve, financial performance (Lindgreen, Swaen, & Johnston,

2009). This implies an understanding that integration of CSR into business is necessary for successful and sustainable operation.

The Africa region performed above expectations in terms of reporting. However, three issues require consideration. Firstly, small sample size (six) may have skewed percentage statistics. Secondly, all organizations were based in South Africa due to the selection process, which arguably is not representative of all African organizations. Finally, CSR reports from these companies may have been influenced by operations in other regions. It is plausible these issues affected the results, given that the literature indicates that CSR has been relatively weak in Africa thus far (Fig, 2005; Forstater et al., 2010). Further analysis of organizations throughout the region would clarify these issues.

Organizations in the South East Asia region also appeared to perform well. However, once again relatively small sample size (thirteen) may have skewed comparisons in favour of this region. This is supported by previous research, which has suggested CSR practices in India (where most organizations from the South East Asia region were based) are poor, and less than 20% of large enterprises in this country had a policy or formal programme regarding CSR (Newell, 2006).

The Eastern Mediterranean region performed poorest from the regions. Only 9 subthemes were referred to and mostly very briefly. This is likely down to the perception of CSR on a broader scale. The seven companies in the region did not publish dedicated CSR reports, and from considering CSR related material in annual reviews or websites, it was clear that the main focus was external. Supporting this notion, Ararat (2006) found that social philanthropy was the main item on Easter Mediterranean organizations' CSR agendas. The author argues that poor government performance in these regions compromises the environment in which organizations operate, forcing them to take responsibility for wider society. A similar argument may apply here as initiatives from companies in this region were related to healthcare and education, traditionally seen as governmental responsibilities.

Analysis across sectors was also conducted, however, as mentioned, interpretation was hampered by unequal sample sizes. In addition to comments made throughout, one trend is worth mentioning. Encouragingly, across most sectors there was an appreciation that managing the work environment was an important element of CSR. Variance within this appeared to be explained by the level of risk poor working environment posed in each sector. Where poor working conditions was a more tangible risk (e.g. manufacturing), there appeared to be more engagement with associated themes (reflected in both the reporting statistics and coded material), and similarly the poorer performers were transport, storage and communication, and the financial intermediation sectors. A relevant factor which may have contributed to this trend is that the higher risk industries also tend to have a greater number or relevant regulatory initiatives (e.g. ILO Convention on Safety and Health in Construction (C167)).

Also, findings of the study support hypothesis 2, although taking into account the limitations presented in next section, since a higher reporting level is found in more regulated developed countries, in issues more strictly regulated (e.g., health and safety issues) and in sectors with a greater number of hard and soft law initiatives. Nevertheless, more international research is necessary to conduct deeper sector and regional analysis.

6.4.3. Limitations and future research

Among the limitations of this study, it should be noted that business world is constantly changing so it is not possible to get a fixed pictures from such an analysis over 100 companies. A case study method could be more suited to that where the question of impact of a policy initiative can be asked directly in interviews. Future research should do this.

A caveat to conclusions in this study is whether what is reported in these communications indeed reflects practice. With the history of 'greenwashing' in the area this is a legitimate concern (e.g. Casado, 2006; Font, Walmsley, Cogotti, McCombes, & Häusler, 2012).

However, some research has illustrated that CSR reporting is moving away from this trend towards a more transparent account of corporate practice. In an investigation of whether CSR reports were used for greenwashing purposes, Mahoney, Thorne, Cecil, and LaGore (2013) found that companies publishing CSR reports were more likely to be engaged with CSR practices than those which did not. Therefore, research suggests that CSR reporting is actually linked to practices rather than merely viewed as an opportunity to promote an untrue positive image. Similarly, Freundlieb and Teuteberg (2013) reported that companies appear to be reporting on performance rather than promoting only a positive self-image. Finally, Ioannou and Serafeim (2012) illustrate that when companies were required to report on non-financial activities due to regulatory changes, this also impact performance. These findings suggest that CSR reporting is linked with practices rather than merely viewed as an opportunity to promote an untrue positive image.

Furthermore, while these figures are useful in terms of assessing whether an issue was considered by companies or not, however, they do not allow to describe the type of intervention. In the case of gender discrimination, for instance, many organizations simply state an equal opportunities policy that included gender, with no further specification of the steps to achieve that goal. Thus, a deeper analysis of company reports is required to make judgements of intervention quality.

Finally, the different sample sizes across regions and sectors, made comparisons at this level difficult. However, the process for selection of organizations was devised and maintained in order to ensure consistency in the research and to focus on the primary aim of the present study which was to explore whether managing the working environment in the first instance was an important issue on organization's CSR agendas. Future research could prioritise exploring the differences between countries and regions in this area.

STUDY 2

7. How CSR contributes to implement OHS and psychosocial risk management initiatives in European companies

Relationship between requirements from clients or concern about the organization's reputation and the development of OSH and psychosocial risk management initiatives in Europe.

7.1. Introduction

In the competitive world of business, it is essential to maintain and enhance business reputation in the global marketplace; a basic requirement is to not harm people. This is part of the Corporate Social Responsibility (CSR) agenda influencing many organisations (EU-OSHA, 2004). Stakeholders (either, primary stakeholders as consumers or employees, or secondary stakeholders as governments, community or NGOs) can positively influence CSR either within the companies or in SMEs subsidiaries of larger companies or MNEs (Park, et al., 2014; Park & Ghauri, 2015). Stakeholders have expectations about organizational ethical performance in several and diverse areas, including social, labour, environmental and health and safety issues, but also they request to manage firms' supply chain in a sustainable way. Muller and Kolk (2010) highlight that external pressures on firms (e.g., pressure from stakeholder groups, competitive pressures from the market, regulatory pressures) can led to the implementation of more ethical programmes, Lynch-Wood et al. (2009) call this the externally driven business case (EDBC) for CSR. At the same time, internal stakeholders as workers' organizations and employees can also put pressure for a higher level of OHS performance or ethical practice.

The largest companies are increasingly implementing CSR initiatives, according to the reporting data (KPGM, 2011) and pressures from these large companies can drive smaller

companies within their supply chain to implement CSR initiatives, after being directly pressured (Nisim & Benjamin, 2008) or through ethical purchasing or selection of suppliers (Carter & Jennings, 2002; Reuter et al., 2012). Smaller companies sometimes also try to implement sustainable policies in their supply chain, by using different strategies, tools, auditing and management systems (Ciliberti, et al., 2008; Ciliberti et al., 2011). However, there are several reasons to explain why SMEs have a lower level of CSR practices, such as less need for legitimacy, less exposure and visibility to stakeholders and customers or less scale processes to regulate CSR (Lynch-Wood et al., 2009). Even so, client requirements can still be a significant driver for suppliers in implementing CSR initiatives.

In addition, organizations attempt to improve employers' external image and corporate reputation to the whole range of stakeholders and, specifically, to customers and clients (e.g., customer and client loyalty and satisfaction) (Ripa, Jain, Leka & Herrero, 2013). Customers may pay higher prices for products from ethical companies, attract better qualified employees and gain competitive advantage when corporate reputation is higher, having an indirect link to financial performance (Orlitzky et al. 2003, Yoo & Pae, in press). Improving corporate reputation and external image has been recognized in research as one of the main drivers of CSR (Aguinis & Glavas, 2012). Therefore, organizations can implement sustainable supply chain management because they try to gain legitimacy, reputation or improve their external image (Czinkota et al., 2014), creating competitive advantages, while protecting corporate reputation from negative media attention and consumer boycotts (Foertsl et al., 2010, Hoejmose et al., 2014).

As has been discussed in previous chapters, health and safety has a key role in the drive to gain CSR excellence. It is now increasingly accepted that OSH including the management of psychosocial risks, is an essential component of CSR (EU-OSHA, 2004; Jain et al., 2011; Jain et al., 2014; Sowden & Sinha, 2005; Zwetsloot & Leka, 2010). When looking for this corporate reputation goal, companies develop CSR, which requires compliance with laws on working conditions and Occupational Health and Safety (OSH), but also implement

voluntary initiatives which go beyond the law, for example by implementing health and safety standards (Zwetsloot & Ripa, 2012).

Company image therefore can potentially have an impact on health and safety performance of the firm. Furthermore, large corporate groups are often persuaded that "safety pays and rewards" (Cagno et al., 2013), and consequently companies implement a wide range of initiatives to support improvements in OHS standards and management in the supply chain (Andreou, 2013; Walters & James, 2011). Consequently, client or consumer requirements can lead to OHS management (Law et al., 2006). Companies expect that managing health and safety appropriately could lead to a public perception of social responsibility and to a better image of the firm (Andreou, Leka, Jain & Ripa, 2013). Managers' perception of this idea has been tested favorably on companies certified with OHSAS 18001 (Fernández-Muñiz et al., 2009). However, a comprehensive OHS management system is essential, including aspects such as analysis of causes of sickness, risk evaluation, measures to return to work, existence of a documented OHS policy or involvement of line-management, supervisors or high-level meetings.

Regarding psychosocial risk management, procedures to deal with work-related stress, bullying and harassment, violence at work or work organization, working time arrangements and training and development are key aspects to reduce risks and improve workers' wellbeing. Rand Europe (EU-OSHA, 2012c) analysed 9 OHS measures from the ESENER data - European Survey of Enterprises on New and Emerging Risks. According to their results, about half of all establishments implemented at least seven OHS management elements, around 13 % implemented all nine OHS measures, while only 7% of establishments were implementing two or less OHS measures. Conversely, another secondary analysis conducted by Rand Europe (EU-OSHA, 2012d) analysed 6 psychosocial risk management measures from the ESENER and found that around 12% of establishments did not implement any aspect of psychosocial risk management, with only 3 % of all establishments implementing all six aspects. For instance, less than a third of establishments had procedures to deal with

work-related stress, mainly in larger establishments and in countries with formalised procedures and higher awareness (EU-OSHA, 2010).

Despite this research background, there is a lack of international generalizable data relating CSR and OHS implementation. There is no international research analysing company-level implementation of OHS and psychosocial risk management system as a consequence of client and supplier requirements and attempts to improve CSR reputation. Using the ESENER survey (EU-OSHA, 2010) data, this study intends to fill this gap by analysing the influence of 'requirements from clients or concern about the organization's reputation' as driver for twelve company actions related to an accurate performance on health and safety and psychosocial risk management. Overall, this study aims to explore the role of CSR drivers behind the implementation of Occupational Health and Safety (OHS) and psychosocial risk management policies in the European companies. To achieve this goal, an analysis of the influence of requirements from clients or concern about the organization's reputation in the implementation of OHS and psychosocial risk management policies is undertaken. Consequently, this study hypothesizes that if there are requirements from clients related to health and safety and psychosocial risk management and health and safety managers have concerns about the organization's reputation related to health and safety, then enterprises will undertake to a greater extent occupational health and safety and psychosocial risk management policies, even after controlling by company-level and country-level characteristics.

Figure 7.1 presents the conceptual and analytical model used in the study. Contextual factors such as country, sector, public/private and size will influence company action; therefore their influence is controlled for by introducing them as background or control variables. Gender, age or diversity of the workforce were not measured, since previous research of ESENER data found that they had only small effects both in OHS and psychosocial risk management (EU-OSHA, 2012c, 2012d, 2012e). Responses on whether a company reported Client requirement/employer image as a driver for OSH/ Psychosocial

Risk Management is the independent variable and measures for OSH management and psychosocial risk management are background variables.

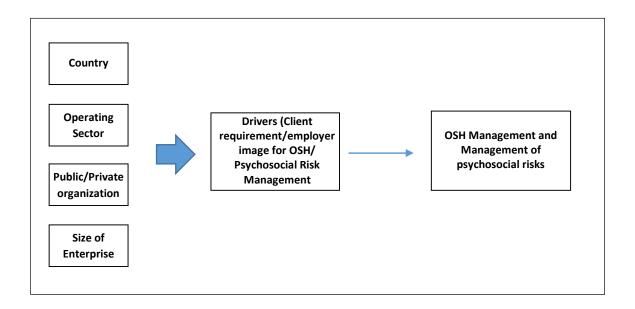


Figure 7.1. Conceptual and analytical model used in Study 2. This includes contextual factors such as country, sector, public/private and size will influence company action

7.2. Methods

7.2.1. Sample

Using the ESENER survey -European Survey of Enterprises on New and Emerging Risks-(EU-OSHA, 2010) data, this study analyses the influence of 'company external image and reputation' and 'client requirements' as drivers for health and safety and psychosocial risk management. This study was done by conducting a secondary analysis on the ESENER dataset. Table 7.1 includes more information about sample used in this study and how the background variables were categorized.

Table 7.1. Country-level, operating sector and size. Descriptive statistics in 31 European countries

Charac	teristic	Percentage		
	1 (2)	28,649)		
Country	y code (Country)	1004		
	AT (Austria)	1034	3.6	
	BE (Belgium)	1069	3.7	
	DE (Germany)	1510	5.3	
	DK (Denmark)	1005	3.5	
	EL (Greece)	1000	3.5	
	ES (Spain)	1566	5.5	
	FI (Finland)	1000	3.5	
	FR (France)	1497	5.2	
	IE (Ireland)	506	1.8	
NO	IT (Italy)	1501	5.2	
	LU (Luxembourg)	500	1.7	
	NL (Netherlands)	1009	3.5	
	PT (Portugal)	1005	3.5	
	SE (Sweden)	1000	3.5	
	UK (United Kingdom)	1500	5.2	
	CH (Switzerland)	1019	3.6	
	NO (Norway)	951	3.3	
	BG (Bulgaria)	501	1.7	
	CY (Cyprus)	510	1.8	
	CZ (Czech Republic)	1015	3.5	
EU12 HR	EE (Estonia)	501	1.7	
	HU (Hungary)	1031	3.6	
	LT (Lithuania)	520	1.8	
	LV (Latvia)	506	1.8	
TR	MT (Malta)	343	1.2	
	PL (Poland)	1500	5.2	
	RO (Romania)	518	1.8	
	SI (Slovenia)	529	1.8	
	SK (Slovakia)	503	1.8	
	HR (Croatia)	500	1.7	
NACE (TR (Turkey)	1500	5.2	
NACE (Operating sector)	100	0.7	
	C (Mining and quarrying)	196	0.7	
Goods	D (Manufacturing)	8488	29.6	
	E (Electricity, gas and water supply)	349	1.2	
	F (Construction)	2756	9.6	
	G (Wholesale and retail trade)	4203	14.7	
	H (Hotels and restaurants)	947	3.3	
	I (Transport, storage and communication)	1313	4.6	
EU15 CH NO	J (Financial intermediation)	706	2.5	
C:	K (Real estate, renting and business activities)	2724	9.5	
Service	L (Public administration and defence, social	1514	5.3	
	security)	2166	7.6	
	M (Education)	2166	7.6	
	N (Health and social work)	2141	7.5	
	O (Other community, social, personal service	1146	4.0	
G:	activities)			

Small enterprises- 10 to 49 employees	15,170	52.9	
Medium and large enterprises - More than 50 employees	13,479	47.1	
Private / Public sector			
Private sector	22,443	78.3	
Public sector	6206	21.7	

7.2.2. Procedure

ESENER study was conducted in 2009-2010 by the European Agency for Safety and Health at Work (EU-OSHA) in all 27 European Member States, as well as Croatia, Turkey, Norway and Switzerland. The sample covered all sectors of economic activity except for agriculture, forestry and fishing (NACE Rev. 2 'A'). In 15 of the 31 countries, interviews were conducted directly by using addresses from address registers. In the remaining 16 countries, a special screening procedure was applied in order to transform company-related samples into establishment samples. The statistical unit of analysis was individual establishment, rather than other company structures. In the case of multi-site companies, the screening procedure served to identify the eligible establishments belonging to that company and to randomly select one of them for interview. It involved computer-assisted telephone interviews (CATI) with 28,649 managers of establishments, specifically with highest ranking manager involved responsible for OHS. EU-OSHA contracted TNS Infra-test to carry out the fieldwork. Managers were randomly selected, from private and public sector organizations with more than 10 employees. ESENER survey sought to ascertain how health and safety risks are managed at workplace, identifying success factors and obstacles to prevention.

7.2.3. Variables

Outcome variable

Prior to carrying out the analysis, each selected item from the survey was dichotomised. Items are divided in two main categories: (a) management of health and safety and (b) psychosocial risk management. A 'Yes' response was coded as '1', a 'No' response was coded as '0' and 'No answer or N/A' was coded as 'system missing'. Some items had different response scales and were therefore dichotomised as follows: OSH issues raised in high level meetings which was dichotomised by coding regularly as '1' and, occasionally or practically never as '0'. Involvement of line-management and supervisors was dichotomised by coding very high and quite high as '1' and quite low or very low as '0'. Procedure to deal with work-related stress/bullying or harassment/violence at work was dichotomised by coding 'having a procedure in place' as '1', while 'not having a procedure' or 'work-related stress/bullying or harassment/violence at work is not an issue in our establishment' was coded as '0'.

Each of the items presented were then included as a dependent variable in the logistic regression model.

Management of health and safety. Analyse causes of sickness. The outcome variable was analysis of causes of sickness and was measured with the following question: 'Does your establishment routinely analyse the causes of sickness absence?'. More than half of respondents answered 'yes' to this question (56,6%).

Measures return to work. The outcome variable was measures to return to work and was measured with the following question 'Do you take measures to support employees' return to work following a long-term sickness absence?'. Almost two out of every three enterprises reported having such measures (66.6%).

Documented OSH policy. The outcome variable was documented OSH policy and was measured with the following question 'Is there a documented policy, established management system or action plan on health and safety in your establishment?'. Most enterprises reported having such a documented OHS policy (79%).

OSH issues raised in high-level meetings. The outcome variable was OSH issues raised in high level meetings and was measured with the following question 'Are health and safety issues raised in high level management meetings regularly, occasionally or practically

never?'. Response categories ranged from 1- Regularly- to 0 -Occasionally or practically never. Almost half of enterprises reported having such high-level management meetings regularly (46.9%).

Involvement line-management and supervisors. The outcome variable was involvement of line management and supervisors in OSH management and was measured with the following question 'Overall, how would you rate the degree of involvement of the line managers and supervisors in the management of health and safety? Is it very high, quite high, quite low or very low?'. Response categories ranged from 1- Very high and quite highto 0 –quite low or very low. More than three quarters of enterprises reported an involvement from high to quite high (76.8%).

Regularly RI&E or other measure. The outcome variable was risk assessment and was measured with the following question 'Are workplaces in your establishment regularly checked for safety and health as part of a risk assessment or similar measure?'. The vast majority of enterprises reported having such measures of risk management (89,5%).

Psychosocial risk management. Procedure to deal with work-related stress. The outcome variable was procedure to deal with work-related stress and was measured with the following question 'Does your establishment have a procedure to deal with work-related stress?'. Almost one out of every three enterprises reported having such a procedure (29.1%).

Procedure to deal with bullying or harassment. The outcome variable was procedure to deal with bullying or harassment and was measured with the following question 'Is there a procedure in place to deal with bullying or harassment?'. Approximatively one out of every three enterprises reported having such a procedure (32.9%).

Procedure to deal with violence at work. The outcome variable was procedure to deal with violence at work and was measured with the following question 'And do you have a

procedure to deal with work-related violence?'. Almost one out of every three enterprises reported having such a procedure (27.4%).

Measures PSA: change way work is organised. The outcome variable was changes to the way work is organised and was measured with the following question 'In the last 3 years, has your establishment used any of the following measures to deal with psychosocial risks? Changes to the way work is organised'. Less than half of enterprises reported having such a measure (42.7%).

Measures PSA: change working time arrangements. The outcome variable was changes to working time arrangements and was measured with the following question 'In the last 3 years, has your establishment used any of the following measures to deal with psychosocial risks? Changes to working time arrangements'. Almost one out of every three enterprises reported having such a measure (29.8%).

Measures PSA: provision of training. The outcome variable was provision of training and was measured with the following question 'In the last 3 years, has your establishment used any of the following measures to deal with psychosocial risks? Provision of training'. More than half of enterprises reported having such a measure (58.2%).

Covariates

Control variables. Four control variables were included in the analyses (as presented in Table 7.1 above). These control variables were used to control for potential confounding effects of variables of the study on the outcome variable. Control variables included sociodemographic variables. Socio-demographic variables were: Country, Operating sector (Goods/ Service), Public/Private organization, Size of Enterprise (Less 50 workers / 50 or more workers).

Enterprise sector: Assigned from NACE-Code from sampling source. These were divided into two categories – Manufacturing and goods producing (coded as '1') and Service sector (coded as '0') oriented organisations. Research had shown that enterprises operating in

different employment sectors may face different problems and have different priorities (e.g., EU-OSHA, 2009; ILO, 2010a). The service sector now dominates the economy of the EU, making up 67.1% of the total European workforce.

Size of establishment was controlled with the variable Size of enterprise and was measured with the following question 'Approximately how many employees work at this establishment?'. Two groups were created on the basis of company size (small companies from 10 to 49 workers -coded as '0' and medium and large companies with more 50 or more workers - coded as '1'). When it comes to OSH management, the size of the company plays a big part. Large companies often have the financial means and structure to effectively implement a good OSH system, which in most cases is lacking in small companies.

EU Country was measured with the question 'Country code: preassigned'. The countries were afterwards divided into two groups on the basis of their OSH infrastructure – Old EU member States pre- 2004 (EU15) plus Switzerland and Norway (coded as '1') which have a more developed OSH infrastructure as compared to the new EU member states post-2004 (EU12) plus Turkey and Croatia (coded as '0'), which have a lesser developed OSH infrastructure.

Public/private enterprise was measured with the question 'Does this establishment belong to the public sector?'. Public (coded as '1') and private enterprises (coded as '0') have different priorities and therefore it is important to control for any impact on the analysis.

Independent (predictor) variables. Two variables measuring requirements from clients or concern about the organization's reputation were as independent variables in this study. Both items were dichotomised, where a 'Yes' response was coded as '1', a 'No' response was coded as '0' and 'No answer or N/A' was coded as 'system missing'

Requirements from clients or concern about the organization's reputation in relation to Occupational Health and Safety. The independent (predictor) variable was requirements from clients or concern about the organization's reputation in relation to Occupational

Health and Safety and was measured with the following question 'Which of the following reasons prompted your establishment to deal with health and safety? Requirements from clients or concerns about the organisation's reputation'. The percentage of enterprises reporting this type of concern was of 86.5%.

Requirements from clients or concern about the organization's reputation in relation to psychosocial risk management. The independent (predictor) variable was requirements from clients or concern about the organization's reputation in relation to psychosocial risk management and was measured with the following question 'Which of the following reasons prompted your establishment to deal with psychosocial risks? Requirements from clients or concerns about the organisation's reputation'. The percentage of enterprises reporting this type of concern was of 26.2%.

7.2.4. Analytical strategy

Due to the dichotomous (binary) nature of the variables, multivariate analyses were carried out using logistic regression analysis in SPSS 20. Logistic regression analysis is one of the most frequently used statistical procedures, and is becoming more popular in social science research. Logistic regression estimates the probability of an outcome. Events are coded as binary variables with a value of 1 representing the occurrence of a target outcome, and a value of zero representing its absence. It also allows for continuous, ordinal and/or categorical independent variables. The method was chosen on the basis of its strengths while analysing models with binary dependent variables as suggested by Pohlmann and Leitner (2003). Logistic regression results are also reported to be comparable to those of OLS in many respects, but give more accurate predictions of probabilities on the dependent outcome.

7.3. Results

7.3.1. Client requirement and OSH management

First the impact of client requirement and OSH management was examined, as presented in Table 7.2. In relation to OHS management, the final regression model (see table7.2) predicted a variance in level of OHS management activities which ranges from 2 percent (involvement line-managers and supervisors) to 11 percent (measures to return to work). Level of prediction for analysis of causes of sickness is 7 percent, for documented OHS policy is 5 percent, for OHS issues raised to high level meetings is 8 percent, and 6 percent for regular risk inventory and evaluation (RI&E). Therefore, higher variance is explained in the two aspects related to involvement of line-managers and supervisors and high-level meetings including OHS issues.

In Table 7.2 we present the results of six independent multivariate binary logistic models where client requirements and corporate reputation (OHS requirements and psychosocial risk requirements) predicted the outcome variables. All models were adjusted for a set of control variables: type of country, type of operating sector, type of enterprise, and size of enterprise. Net effects of client requirements showed that an increase in client requirements (OHS) were positive related to an increase in all of the dependent variables. Thus, when the requirements of clients were linked to OHS according to managers it was observed a statistically significant increase in the odds ratio of analysis of cause of sickness (1.74), measures of return to work (1.85), documented OHS policies (1.56), OHS issues raised in high level meetings (1.68), involvement line-managements and supervisors (1.76), and regular RI&E and other measures (2.32). Consequently, when an enterprise's manager states that the company is being requested by clients or there is a will to improve corporate reputation in the area of OHS management, there is a higher likelihood to find initiatives to manage health and safety in the establishment.

Table 7.2. Logistic Regression: Client requirement and OSH management

	0	utcome	variabl	e: Initia	tives of	manag	ement	of health	n and s	afety		
	Analyse causes of sickness (N= 25673)		Measures return to work (N=25673)		Documented OSH policy (N=25673)		OSH issues raised in high level meetings. (N= 25252)		Involvement line-management and supervisors. (N= 25673)		Regularly RI&E or other measure (N= 25673)	
	В	Exp (B) (95% C.I.)	В	Exp (B) (95% C.I.)	В	Exp (B) (95% C.I.)	В	Exp (B) (95% C.I.)	В	Exp (B) (95% C.I.)	В	Exp (B) (95% C.I.)
Country (New - Old EU member state)	.495	1.640* (1.55, 1.73)		2.622* (2.47, 2.78)		1.630* (1.53, 1.74)	.560	1.751* (1.66, 1.85)		1.150* (1.08, 1.225)		.774* (.0705, .85)
Operating sector (Goods - Service)	.214	1.239* (1.17, 1.31)		1.179* (1.11, 1.25)	.196	1.217* (1.14, 1.30)	.398	1.489* (1.41, 1.57)		1.247* (1.17, 1.33)	.507	1.661* (1.51, 1.83)
Public - Private	109	.897* (.84, .96)	182	.833* (.78, .89)	115	.892* (.82, .96)	163	.850* (.80, .91)	.025	1.025 (.95, 1.10)	.053	1.055 (.95, 1.17)
Size of Enterprise (small - medium and large)	.822	2.275* (2.22, 2.44)		2.471* (2.27, 2.69)		_	.921	-		1.499* (1.38, 1.63)		-
Client requirement - OSH management		1.743* (1.61, 1.89)		1.854* (1.71, 2.01)		1.592* (1.45, 1.74)	.529	1.697* (1.56, 1.84)		1.765* (1.62, 1.92)		2.315* (2.08, 2.57)
Client requirement - Psychosocial risk management		1.300* (1.23, 1.38)		1.283* (1.20, 1.37)		.969 (.90, 1.04)		1.101* (1.04, 1.17)		1.009 (.94, 1.08)		1.083 (.98, 1.195)
Notes			= .09; 2: ΔR ² Model	o R ² kerke) Step 	= .04; 2: ΔR ² Model	R ² kerke) Step = .01; X ² (6)=	= .07; 2: ΔR ² Model	R ² kerke) Step = .01; X ² (6)=	= .01; 2: ΔR ² Model	o R ² (kerke) Step (= .01; (X ² (6)=		

A different pattern was found for client requirements (Psychosocial). The only statistically significant relationships were found for analyses causes of sickness (1.30), measures of return to work (1.28), and OHS issues raised in high level meetings (1.10). The remaining relationships of the substantive part of the models were not statistically significant.

Looking to the upper part of Table 7.2, we see that all control variables were significantly related to the outcome variables except for regular RI&E and other measures. The results indicate that enterprises based on EU15 member states, Switzerland and Norway to have measures in place to manage OSH as compared to enterprises based in new member states (EU12), Croatia and Turkey. Enterprises in EU 15 countries (+ CH and NO) were predictive of a positive analysis of causes of sickness (OR: 1.64), measures of return to work (OR: 2.62), documented OHS policies (OR: 1.63), OHS issues raised in high level meetings (OR: 1.75), involvement line-managements and supervisors (OR: 1.15), as compared to enterprises in EU12 countries (+ HR and TR). Interestengly, for regular RI&E and other measures, the observed tendency was the opposite: enterprises in new members states showed a significant tendency to score lower on regularly check their establishment for safety and health as part of a risk assessment or similar measure (OR: .77).

As for type of operating sector, the observed relations were significant and positive, thus suggesting a tendency in the companies operating in the manufacturing and goods sector to score higher in the outcome variables (Odds ratios greater that 1.18) and to have more measures in place to manage occupational health and safety than enterprises in the service sector. As anticipated, large and medium sized organizations showed a positive tendency to score higher on the outcome variables (odds ratios greater than 1.50), regularly RI&E (3.15), meanwhile OSH issues raised in high level meetings (2.51), analysis of causes of sickness (2.275), measures to return to work (2.47), documented OSH policy (2.15), and involvement of line-management and supervisors (1.5). Also, were the private companies those showing higher levels in all of the outcome variables (Odds ratios lower than .90), except for involvement line-managements and supervisors, and regular RI&E and other

measures that showed no statistical significance. These OHS initiatives are significantly more often found in private organizations, however, these differences are negligible and the findings show that belonging to public or private sector had little or no impact on OSH management.

Overall, the analyses of control variables suggested that these procedures of OHS management can be found: a) in old member states (and Switzerland and Norway) more often than in countries which joined the EU after 2004 (and Croatia and Turkey), with the exception of regularly RI&E; b) in the goods and manufacturing sector organizations; c) for private companies, and; d) in enterprises with more than 49 employees.

7.3.2. Client requirement and psychosocial risk management

The findings indicated that procedures and measures put in place to manage psychosocial risk in enterprises were also affected by requirements from clients. The final regression model (see table 7.3) predicted between 4 and 14 per cent of the variance of the different psychosocial risk management initiatives studied. Higher variance is explained regarding procedures to deal with bullying and harassment (14 per cent), procedures to deal with work-related stress (12 per cent) and to deal with violence at work (11 per cent). On the other side, this model including client requirements and promotion of corporate reputation in OHS and psychosocial risks just explain 4 per cent of the variance of working time arrangements, 5 per cent of changes in the way work is organized and 6 per cent of provision of training.

Examination of the odd ratios (exp B) in the final step of the model shows that a number of variables were significant predictors of high levels of psychosocial risk management activities. The results indicate that the odds ratio of enterprises based in old member states (EU15) was 2.09 for procedures to deal with work-related stress, 3.6 for procedures to deal with bullying and harassment, and 2.45 for procedures to deal with violence at work.

Table 7.3. Logistic Regression: Client requirement and psychosocial risk management

		(Outcome	e variab	le: Initi	atives o	f psych	osocial	risk ma	nageme	ent		
	Procedure to		Procedure to		Procedure to		Measures		Measures		Measures PSA:		
	deal w		deal wi		deal w		PSA: c	_	PSA: c	_	provisi		
	work-r	elated	bullyin	_	violend	e at	way w			_	trainin	-	
	stress		harass		work		organi		_		(n=25	573)	
	(n=25418)		(n=25475)		•	(n=25466)		(n=25673)		(n=25673)			
	В	Exp	В	Exp	В	Exp	В	Exp	В	Exp	В	Exp	
		(B)		(B)		(B)		(B)		(B)		(B)	
		(95%		(95%		(95%		(95%		(95%		(95%	
		C.I.)		C.I.)		C.I.)		C.I.)		C.I.)		C.I.)	
Country (New - Old EU	.737	2.090 *	1.282	3.603 *	.897	2.451 *	.205	1.228 *	.067	1.070 *	.250	1.284* (1.21,	
member		(1.96,		(3.38,		(2.30,		(1.16,		(1.01,		1.36)	
state)		2.22)		3.84)		2.61)		1.30)		1.13)			
Operating	369	.692*	323	.724*	442	.643*	112	.894*	235	.791*	182	.834*	
sector (Goods		(.65,		(.68,		(.60,		(.85,		(.75,		(.79,	
- Service)		.735)		.77)		.68)		.94)		.84)		.88)	
Public -	308	.735*	568	.567*	607	.545*	046	.955	.031	1.032	366	.694*	
Private		(.69,		(.53,		(.51,		(.90,		(.965,		(.65,	
		.79)		.61)		`58) [′]		1.02)		1.10)		.74)	
Size of	.679	1.972	.709	2.031	.612	1.845	.342	1.408	.337	1.401	.512	1.668*	
Enterprise		*		*		*		*		*		(1.555,	
(small -		(1.845		(1.90,		(1.72,		(1.32,		(1.31,		1.79)	
medium and		,		2.17)		1.98)		1.50)		1.50)			
large)		2.19)											
Client	.249	1.283	.422	1.525	.370	1.448	.332	1.394	.426	1.531	.366	1.441*	
requirement -		*		*		*		*		*		(1.33,	
OSH		(1.17,		(1.39,		(1.32,		(1.285		(1.40,		1.56)	
management		1.40)		1.67)		1.59)		,		1.68)			
								1.51)					
Client	.218	1.244	.284	1.328	.432	1.541	.694	2.002	.569	1.767	.628	1.874*	
requirement -		*		*		*		*		*		(1.76,	
Psychosocial		(1.17,		(1.25,		(1.45,		(1.89,		(1.67,		1.99)	
risk		1.32)		1.41)		1.64)		2.12)		1.87)			
management													
Notes	Step 1	Step 1: Step 1:		:	Step 1:		Step 1:		Step 1:		Step 1:		
	Pseudo R ²		Pseudo R ²		Pseudo R ²		Pseudo R ²		Pseudo R ²		Pseudo R ²		
			(Nagelkerke)										
	= .07; Step		= .13; Step						= .01; Step				
	2: $\Delta R^2 =$								2: $\Delta R^2 = .03$;				
	.005; Model										Model X ² (6)=		
	$X^{2}(6)=$		2811.14; *p						702.53; *p <			3; ^p <	
		';	< .01.		< .01.		.01.		.01.		.01.		
	.01.												

This means that these procedures of psychosocial risk can be found in enterprises in old member states to a greater extent than in countries which joined the EU after 2004. Odds ratios for measures of psychosocial risk management such as work organization (1.23),

working time arrangements (1.07) and provision of training (1.28) are also more likely to be found in old member states.

Companies operating in the service sector were more likely to have more measures in place to manage psychosocial risks than enterprises in the manufacturing and goods sector. Higher levels of odds ratio were found in procedures to deal with violence at wok (.643), work-related stress (.692) and bullying or harassment (.724); this means that these psychosocial risk initiatives tend to characterize service companies to a greater extent. Measures to manage work organization (0.89), working time arrangements (0.79) and provision of training (0.83) also are significant and more likely to be found in service companies. Size of enterprise also affect the implementation of psychosocial risk management. The odd ratio of medium and large organizations (50 or more workers) had nearly two times the odd ratios for smaller organizations (under 50 workers) to have more measures in place to manage work-related stress (1.98), bullying or harassment (2.03) and violence at work (1.845). In relation to other measures to manage psychosocial risk management, the odds ratio was around 1.5 times greater in larger companies to have measures such as manage work organization (1.41), working time arrangements (1.40) and provision of training (1.67). Finally, whether an organization is public or private seems to influence just in several of the measures that have been tested. Meanwhile, procedures to deal with work-related stress, bullying and harassment and violence at work are significantly more often found in private organizations. From the other measures of work organization, only provision of training is more likely to happen in private organizations, with an odds ratio of 0.694.

Client requirements either for OHS management or psychosocial risk management and corporate reputation are significant drivers for psychosocial risk management, even after controlling a number of variables. All analyzed variables have an effect on the likehood of implementing psychosocial risk initiatives. Both requests influence the development of psychosocial risk initiatives, as it was expected. Client requirements for an excellent OHS management system usually includes also psychosocial risk initiatives. Consequently, all

variables are affected by client requirements for OHS. Nevertheless, psychosocial risk requirements from clients have more influence to drive the implementation of procedures to deal with violence at work (with an odds ratio of 1.54), work organization (odds ratio of 2.0), working time arrangements (odds ratio of 1.77) and provision of training (1.87), although there are smaller effects on procedures for work-related stress (1.24) and bullying and harassment (1.33). Thus, when an organization's manager declares that the company is being requested by clients or there is a will to improve corporate reputation in the area of psychosocial risk management, there is a higher likelihood to find initiatives to tackle psychosocial risk (as much as almost twice initiatives of work organization, working time arrangements and provision of training).

All covariates (e.g., old/new member states, size, sector, public/private) and both drivers analyzed have an effect on psychosocial risk management initiatives, except public/private in changes in work organization and working time arrangements. Interestingly, client request for OHS can drive to the implementation of psychosocial risk management initiatives, even more than client requirements for psychosocial issues such as work-related stress or bullying and harassment. Finally, client requirements or corporate reputation was found to be a significant driver, as enterprises reporting client requirements or corporate reputation as a driver were more likely to use more measures to manage psychosocial risks at work.

7.4. Discussion

7.4.1. Firm size, sector, country, and OHS and psychosocial concerns

Country, operating sector and size of enterprise differ also between the models. In our study, firm size reveals to be an important predictor of OHS and psychosocial risk management. Larger and medium sized organizations were more likely to have both more

OHS and psychosocial risk management initiatives, which is consistent with previous research that suggests more ethical and responsible programmes are found in the largest companies. A secondary analysis of the ESENER data confirms this: bigger companies and companies that are part of a large organization reported more measures of OSH and psychosocial management, and the measures adopted decreased much faster for companies below 100 employees (EU-OSHA, 2012b, 2012c, 2012d). In our study, impact of size (larger companies) is moderately higher in OHS management than in psychosocial risk management. This could mean that companies have less elaborated psychosocial risk management programmes than OHS ones. Our results are in concordance with the review of Aguinis and Glavas (2012): "as firm size increases, additional resources and visibility of the firm strengthen the relationship between CSR and outcomes" (p. 943). They conclude "the CSR-outcomes relationship is strengthened when level of exposure and visibility are high and size of the company is large" (p. 943).

This conclusion is also reached by Brower and Mahajan (2012) which found a relationship among firm size, marketing emphasis (e.g., marketing and advertising intensity, focus on innovation, value creation and external stakeholders) and global exposure to and scrutiny from customers (e.g., serving consumer markets, firm's degree of globalization, use of corporate brands) and the implementation of CSP. For instance, transference of benefits and harms in companies with corporate brands are more common: negative stakeholder responses to a firm's actions could carry over to all of the firm's products (Brower & Mahajan, 2012). When negative events occur, instead of boycotts, companies with strong CSP could be given 'the benefit of the doubt' by customers (Godfrey, Merril & Hansen, 2009). Following Muller and Kolk (2010), the effect of size (higher presence of CSR policies in largest companies) could be associated with their higher visibility, which leads to higher public scrutiny and extrinsic pressure, but also could be a consequence of the scale required to implement properly certain operations of CSR (e.g., institutionalized training programmes). A higher size could lead to a higher scrutiny to the company (Brower & Mahajan, 2012), to a higher media pressure, and to greater demands from stakeholders and higher risk of reputation damage due to inadequate CSR (Udayasankar, 2008).

Lynch-Wood et al. (2009) after analyzing externally driven business case for environmental behaviours suggested several reasons to explain a lower CSR practices in SMEs. Firstly, unethical SME firm's reputation and external image is less likely to be damaged after not meeting stakeholder expectations or not doing CSR reports, while markets could not reward ethical efforts of SMEs. Secondly, SMEs have less need for legitimacy, since they suffer less impacts on their reputation from stakeholders. Thirdly, smaller organizations are less likely to have scale processes to regulate CSR and health and safety. Fourthly, customer pressures are higher when a supplier has many kinds of customers and consumers. Individual consumer power and corporate customer power is suggested to be higher in large firms, since most SMEs supply for other SMEs of the supply chain rather than for large corporate customers and consumers do not have in a SME a visible and common object to address their pressures: "a small firm with a limited number of customers will act under the influence of that power; a small firm with many customers of equal power will not feel any specific influence unless these customers act cooperatively" (Lynch-Wood et al., 2009, p. 59).

This is shown in corporate boycotts, often addressed to large companies, where consumers have the potential to change manager behaviours. In addition, customers, NGOs and society usually have less interest on smaller companies, many times they have even no knowledge of the SME and brand visibility, public expectation, and needs to protect corporate identity are stronger in larger companies than in SMEs. Visibility is linked to publicity and, consequently, more opportunities to threaten firm's legitimacy after stakeholder actions. Finally, they conclude that there is a market socially regulated by the external pressures which rewards virtuous behaviours and penalise harmful activities, however many smaller firms not experience these pressures and are mostly driven by regulation and not by voluntary practices: they produce smaller social impacts, have customers with limited power, have less visible brands, and communities are less interested in them and provoke less external pressures. Furthermore, largest companies could have a higher awareness to promote safety initiatives (Cagno et al., 2013). Paradoxically, size

effects and reputation can influence each other: Largest firms and financially successful firms are associated to become over-rated and to have a stronger social reputation. Meanwhile, firms wrong doing against primary stakeholders enhances the probability of becoming under-rated (Liston-Heyes & Ceton, 2009).

Moreover, impact of country (EU-15) is higher in psychosocial risk initiatives such as procedures to deal with work-related stress, bullying and harassment and violence at work (odds ratio from 2.1 to 3.6), as well as several measures of OHS management, such as analysis of causes of sickness, measures to return to work, documented OHS policy and OHS issues in high level meetings (odds ratio from 1.63 to 2.62). The only variable that showed higher impact in new member states rather than EU-15 countries was regularly RI&E, possibly because to risk assessment is central to the EC framework directive 89/391 which results in common practices across Europe. This idea is supported since vast majority of enterprises reported having such measures of risk management (89,5%), the higher percentage of all OHS measures studied.

Country was also a key variable according to previous studies (EU-OSHA, 2012b, 2012c), and even the smallest establishments in a 'favourable' country reported high levels of OSH measures. Therefore, it was concluded that a good national OSH environment improves OHS performance of companies of all sectors and sizes (EU-OSHA, 2012c).

In relation to sector, private enterprises were more likely to have in place higher OHS management and psychosocial risk management initiatives, but this difference with public enterprises was very small. While manufacturing and goods sector enterprises had more influence in OHS management, service sector enterprises had a higher likelihood to develop psychosocial risk management. This confirms previous analysis with ESENER (EU-OSHA, 2012b, 2012c). It could be explained by a higher influence of employees', exposure to psychosocial hazards (higher public exposure of employees in this sector), and by a less dramatic consequences of physical accidents than in traditional manufacturing and goods sector as well as a higher OHS prevention tradition in goods and manufacturing sectors. Walsh et al. (2009) defend that corporate reputation could have a stronger effect on service

companies rather than manufacturing ones, due to their higher exposure to customers. Moreover, both physical and psychosocial concerns and motives for OHS and psychosocial risk management, help to explain more variance in the regression. Finally, private sector organizations seems to have more impact on psychosocial risk management (odds ratio lower than .735) than in OHS management (odds ratio between between 0.90 and 0.83), indicating that private sector enterprises are more likely to put initiatives in place to manage the psychosocial work environment as compared to public sector enterprises.

7.4.2. Employer image and client requirements

The results indicated that after controlling country, sector, public/private organizations and size, the "requirements from clients or concern about enterprise reputation" either about OHS or psychosocial risk management still increase the likelihood of an enterprise putting in place measures to deal with general health and safety initiatives and psychosocial risk at work. This research shows that two important drivers to go beyond the law requirements in OHS and psychosocial risk management, are the client requirements and corporate reputation about OHS (1.59 to 2.315 odds ratio in promoting OHS, 1.28 to 1.53 in promoting psychosocial risk management) and client requirements and corporate reputation about psychosocial risk management (1.10 to 1.30 odds ratio in promoting OHS, but only is significant in three of the variables tested; 1.24 to 2.00 odds ratio in promoting psychosocial risk management). As expected, OHS request have more impact in promoting OHS initiatives rather than psychosocial ones. However, OHS client requirements have a significant impact on promoting psychosocial risk management (odds ratio from 1.28 to 1.53 in enterprises where their managers report this driver), which suggests that when request to implement OHS management systems appear (usually putting in place OHS management systems), psychosocial risk management initiatives are also developed. A lower impact of client requirements for psychosocial risk management on the development of OHS management initiatives was found, mainly influencing the analysis of causes of sickness (OR: 1.30) and the measures to return to work (OR: 1.28). Many occupational diseases and sickness are caused by psychological risks and work-related stress, since they are one of the three leading causes of occupational diseases (ILO, 2012b), client requirements to tackle psychosocial risks could directly have an impact on the analysis of psychological causes of sickness and in the measures to return to work.

Results are coherent with other studies that suggest that external pressures on firms (e.g., pressure from stakeholder groups, competitive pressures from the market, regulatory pressures) could led to the implementation of more ethics programmes (Muller & Kolk, 2010). In addition, companies with greater sensitivity to stakeholders and greater scrutiny from them will have a greater breadth of CSP (Brower & Mahajan, 2012). 87% of global customers believe businesses should place equal weight on business and society (Edelman, in Brower & Mahajan, 2012). In addition, these firms could also be demanding that suppliers had greater CSP (Ciliberti et al, 2008; Ciliberti et al., 2011; Lubin & Esty, 2010). As it was found in the UK, client requirements increase the motivation to engage in CSR of more than half of the 103 UK SME owner/managers surveyed (Baden et al., 2009). Specifically, client or consumer requirements has been found to lead to OHS management (Law, Chan & Pun, 2006, Raj-Reichert, 2013). Furthermore, this study suggests that dissemination of health and safety measures within the supply chain seems to be happening in a European scale. Similar dissemination was proposed to happen in the supply chains of electronic MNEs analysed by Raj-Reichert (2013).

The influence of CSR initiatives in trying to gain legitimacy, protecting reputation and improving external image of organizations and their suppliers is well-established in literature (Czinkota et al., 2014; Del Bosco & Misani, 2011; Elmualim et al., 2012; Foertsl et al., 2010, Hoejmose et al., 2014; Kola-Lawal et al., 2014; Zheng et al., 2015). However, less research had been conducted on the influence of these drivers (e.g., corporate reputation, external image) in promoting psychosocial risk management and OHS management, although there are promising results in Northern Ireland (Moore et al., 2011) and Norway (Njå & Fjelltun, 2010).

As far as corporate reputation and clients demands are central parts of CSR, these results suggest that this part of CSR is leading to implement OHS and psychosocial management in the European companies. Similar effects were found assessing almost 400 companies participating in UN Global Compact, where changing health and safety procedures was one of the top four actions (the second in non-OECD countries) implemented in support of UN Global Compact (Mackinsey & Company, 2004, May 11).

However, although external image is an important driver to implement CSR, its effects can be limited as far as the effect of responsible practices on reputation could be dependent on the previous corporate image of the firms. According to Schuler and Cording (2006), when positive or negative CSP information is consistent with the firm's socially responsible reputation, it will have a medium level of intensity and the message supports what is believed about the company and then reinforces an existing positive or negative image of the firm. Moreover, when positive CSP information appears about firms with a negative external reputation or image, it will produce a low degree of intensity, since people will perceive lack of sincerity. Consequently, "it may take years for consumers to integrate positive CSP information into a firm's reputation (e.g., Exxon and the Valdez incident or Nike and its past overseas sweatshop practices). Therefore, a firm may have years of "good" CSP but still suffer from a "bad" reputation because of its past actions" (Schuler & Cording, 2006, pp. 547-548). The highest level of intensity, conversely, occurs when a reputable firm does not meet societal expectations and takes some action perceived as harmful to society. Then, "consumers will revise their evaluations and expectations of the firm, and the firm may experience a backlash" (p. 548). In any case, several studies link supply chain management and CSR initiatives with customer satisfaction and loyalty (Xu & Gursoy, 2015; Walsh et al., 2009).

Moreover, most managers are still centered in "Do no harm" perspective rather than "CSR as positive force", which leads more to prevent risks than to promote well-being, as was concluded after surveying 1.000 managers from eight large international firms (Pedersen,

2010). This could imply a higher emphasis on general health and safety issues instead psychosocial risks. However, CSR development represents "a dynamic, continuous process, without clear stopovers or breaks and with potential trial-and-error periods" (Maon et al., 2010, p. 34). A CSR stage can lead to the next one and to an ethical spiral. In this case, implementing OHS initiatives could make easier to go forward and also implement psychosocial risk management. Besides, a CSR-oriented organization culture could mediate the influence of stakeholders on CSR practices. Thus,

"New management teams, stakeholder pressures, the presence of a CSR champion or the evolution of legal and regulatory frameworks could all drive or hinder the development of CSR programmes and initiatives. Corporate leaders' specific visions, motives and values appear to constitute a particularly important influence on the nature and scope of an organization's commitment to social responsibility" (Maon et al., 2010, pp. 34).

In this sense, Muller and Kolk (2010) conclude that management commitment and intrinsic motives to CSP is related to higher levels of CSP.

Findings from the study give support to hypothesis 3. According to the results, requirements from clients related to health and safety and psychosocial risk management and the OHS managers' concerns about the organization's reputation related to health and safety, are related to a greater extent occupational health and safety and psychosocial risk management policies. This effect is still significant after controlling by company-level and country-level characteristics.

7.4.3. Limitations and future research

It should be noted that this research is based on establishments, so we cannot assume the assumption of these values for the whole company, and maybe should be studied the

effects of organizational culture and informal processes (EU-OSHA, 2012c). According to Maon et al. (2010):

"Sub-cultural differences in organizations might occur across hierarchical levels and functional units (...). Such differences reflect enactments of the myriad, distinct works and social environments within the organizations, which may lead to local, hierarchical and functional deviations with respect to the dominant stakeholder culture of the organization and the coexistence of nuanced sub-cultures within the organization. We warn that the distinct phases and stages highlighted in our model should not suggest an unyielding succession of obligatory grade crossings for all groups and sub-groups" (p. 34).

Rand Europe, in its report for EU-OSHA (2012c), suggested several limitations of ESENER data. Firstly, there is not a profile of the non-respondent establishments, so establishment where there were responses could be different to the non-responses ones, and a bias is possible. Furthermore, a CATI survey provides limited information, since it needs that information is easily accessible to respondents and there are time constraints. Another limitation is that self-reported information from OHS managers may be unreliable. They could have a stake in showing a better company's image than reality. Walters et al. (EU-OSHA, 2012a) found differences between workers representatives' and managers' responses in the ESENER survey, especially in subjective factors such as the impact of policy and degree of involvement of managers in OSH management, while their views are quite identical in relation to the presence of documented policy and risk assessments. Workers' representatives seem to be more sceptical than managers. An explanation could be that workers' representatives may be less informed than management about OHS policies in the establishment, although they could have a better idea about the implementation of OHS measures. In relation to this, Rand Europe (EU-OSHA, 2012c)

recommended either to collect data about workplace accidents, occupational diseases or workers' turnover or make a linkage to official sources of information as correlates of the impact of OSH and psychosocial risk management measures.

A final limitation of this research is in the wording of the question used. The initial questionnaire asked in the same question for "client requirements or enterprise reputation", so we cannot be sure whether the managers responded affirmative to client requirements or to enterprise reputation. However, literature relates both variables consistently, and we think that their accumulative effect is an accurate measure of external stakeholders, CSR and corporate reputation. Another limitation comes from that we have analyzed country-effects by dividing 31 EU countries in two groups: EU-15 (adhered to EU before 2004) plus Norway and Switzerland and the countries adhered after 2004 plus Croatia and Turkey. EU statistics and reports usually difference EU countries in such a way. However, we could possibly find more variation between countries of these two groups. A multi-level regression with this data could help to analyze better the national context effects. Results from a second wave of ESENER survey will be published in late 2015 and may improve quality of the data.

The findings support previous research (Sánchez-Toledo et al., 2009) which indicates that concern for employer image, inherent in an organization's CSR strategy, can motivate organizations to adopt OSH initiatives. However, this research is unique due to its random sample at European level and to its unusually high sample size. Most research on CSR is based on purposive sample or limited to one country. Therefore, the big and randomized sample is one of the main strengths of this research. Besides, it analyses altogether national, size and sector variables with individual level of responses, through management responses. Then, we go further than previous research and we can assume that effects of external image of CSR appear independently of the existence of those variables.

Finally, we can conclude that 1) external (clients and customers) stakeholders are powerful drivers for implementing OHS and psychosocial risk management systems within European companies; 2) employer's image and corporate reputation leads to a stronger development

of OHS and psychosocial risk management within companies; 3) companies in old member states (and Norway and Switzerland), public enterprises and establishments with 50 or more workers are more likely to implement measures to deal with psychosocial risks and OHS management systems; and 4) Corporate Social Responsibility can be an innovative means of promoting worker safety, health and wellbeing within organizations and used to supplement existing initiatives.

STUDY 3

8. Impact of psychosocial risk factors on European employees' well-being and job satisfaction.

Statistical analysis of the effects of psychosocial hazards at work in the well-being and health on European employees: A study of the 5th European Social Survey 2010.

8.1. Introduction

Work-related psychological health is a concern around the world. In EU-27, 23 per cent of workers showed low levels of well-being and 6 per cent were likely to suffer from depression in 2010 (Eurofund, 2012a), while 9.5 per cent found their job stressful all the time (Eurofund, 2007). As it has been already reviewed and commented, psychological risks (see chapter 2) have a relevant influence on health (Figure 1) (WHO, 2003, 2008). However, this paper understand this risks as social conversion factors as they enable or restrict the capability set of people at work.

A recent review by the WHO (2010) highlights the detrimental impact of psychosocial hazards on workers' physical (e.g. heart disease, musculoskeletal disorders, and diabetes), mental (e.g. depression, anxiety and burnout), and behavioural health (e.g., smoking and drinking) as well on organizational outcomes as absenteeism, productivity, job satisfaction and intention to quit (e.g., Chung & Kowalski, 2012; Michie & Williams, 2003; Vahtera, et al., 2004; van den Berg et al., 2009; see also chapter 1, 2 & 4 and figure 1.5). Specifically, psychosocial hazards have been shown to impact mental health as depression, anxiety and psychological disturbance (Bonde, 2008; De Lange et al., 2004). Another aspects as job satisfaction can also impact on workers' physical and mental health and performance (Faragher et al., 2005; Kopp et al., 2009) and MSDs (Fernandes et al., 2010).

Niedhammer et al. (2013) analysed the association between psychosocial work factors (decision latitude, psychological demands, social support, physical violence, sexual

harassment, discrimination, bullying, long working hours, shift and night work, job insecurity, job promotion and work-life imbalance) and sickness absence, by analysing 2005 EWCS in 31 European countries. They found that high psychological demands, discrimination, bullying, low-job promotion and work-life imbalance for both genders and physical violence for women were all associated with sickness absence. Slany et al. (2014), after analyzing psychosocial hazards in 32,708 workers in 34 European countries from the 2010 EWCS, found that job demands, career development, social relationships, and workplace violence were associated with long sickness absence. Several studies have approached to psychosocial risks at work analyzing country-differences (Bambra et al., 2014; Lunau et al., 2014; Niedhamer et al., 2012). Niedhammer et al. (2015) recently found, after questioning 26,883 men and 20,079 women in France, that low decision latitude, high psychological demands, low social support, low reward, bullying and verbal abuse were associated with depression and anxiety in both genders.

Additionally, the literature on psychosocial risks also underlines the role of individual characteristics or conversion factors. For example, workers' age could influence level of stress and health impacts Older workers could have less turnover and fewer occupational injuries (Siu, Phillips & Leung, 2003), however, they suffer more from musculoskeletal disorders (Eurostat, 2010) and work-related stress. Social class, grade of employment and level of education can also influence psychosocial risk factors (e.g., decision authority and skill discretion, Andersen et al., 2004), health outcomes and cardiovascular heart disease (Marmot et al., 1997). In addition, psychosocial risk factors (e.g., low social support, job insecurity) could be more detrimental for employees in lower social class position.

Gender differences can affect health impacts of psychosocial risks. Well-being has been claimed to be, on average, significantly higher for men than for women (Eurofund, 2013a, Ministerio de Salud, 2011). Women show higher levels of emotional demands, while men are more exposed to cognitive and physical demands in Europe and have more serious accidents (EU-OSHA, 2002). Women report a slightly better working climate and higher support from managers, although lower rewards, compared to men (Eurofound, 2013a).

However, physical health problems, physical work demands and work fatigue were found to be more prevalent in women (Laaksonen et al., 2008). An explanation of gender differences is that as labour market is highly gender-segregated globally (with each gender underrepresented in some jobs and over-represented in others), psychosocial risk factors can be different between men and women (Burchell, Fagan, O'Brien, & Smith, 2007; EU-OSHA, 2011), although a small effect could be also caused by the different weights given by each gender to working conditions (Hauret & Williams, 2013). For instance, caring and service jobs are more common among men and manual, physical and technical jobs related to machinery (EU-OSHA, 2002), while women more often work in low-status occupations (OECD, 2012).

Beyond the influence of individual-level characteristics, it might be argued that national characteristics in which companies operate could have an influence on workers' health. The literature on the study on national indexes of development seems to partially support this claim. For instance, the Human Development Index (HDI was designed by the United Nations Development Program (UNDP) in 1990 to be a simple measure of the availability of the essential choices needed for human development (Engineer, et al., 2010). The HDI is based on the concept that people are the real wealth of a nation so development implies the expansion of individuals' capabilities or freedoms instead of only resources control and utility (Mamtani, Lowenfels, Cheema, & Sheikh, 2014; Sen, 2003). Institutions have to help people enhance their dignity by providing them with the opportunity to develop their capabilities freely (Nussbaum, 2000). As such, the capabilities approach has been studied in the organizational arena by, for instance, re-examining workplace equality (Cornelius & Gagnon, 2004; Gagnon & Cornelius, 2006), proposing a new view of talent management (Downs & Swailes, 2013), understanding participative governance (Collier & Esteban, 1999) linking business and human development issues through CSR (Corneliuset al., 2008; Lompo & Trani, 2013; Parra, 2008; Renouard, 2011; Thompson, 2008), and how companies promote employees' capabilities to use family-friendly policies (Den Dulk et al., 2011; Hobson & Fahlen, 2009; Hobson, et al., 2011). It would be also possible to analyse whether

a company has organized the work environment in such ways that allows workers to develop a variety of human capabilities (Vogt, 2005). Similarly, Fagan and Walthery (2011) have argued that organizations' policies are one of the key social conversion factors which shape the capability set and functionings of individual employees. A person's capability is determined by conversion factors, which include not only personal characteristics, such as mental and physical conditions, but also social characteristics, including social norms and institutions. In this sense, organizations' policies are a social conversion factor enabling or constraining people's freedom to achieve valuable funtionings. Additionally, research linking capabilities and health-related issues at work is limited.

Several efforts have been carried out to list a set of fundamental capabilities (i.e. Nussbaum, 1995, 1999, 2000; Robeyns, 2003). Particularly, the HDI itself infers capability development by identifying health (life expectancy at birth), education (years of education and expected years of schooling), and material well- being (per capita Gross National Income) as achieved functionings (Herrero, et al., 2012). At this respect, psychosocial risks are a key under explored area within the capabilities approach and the organizational arena. Under this context, this paper tries to advance the debate about human development, the working environment, and subjective health in Europe. It argues that it is important to go beyond a merely country-level comparison and include the policy implemented by employers at the organizational level. Drawing on the Sen's Capabilities Approach, it proposes that employers' policies at the organizational level are one important social conversion factor for enhancing employees' capabilities at work. Therefore, this study explores the impact of the psychosocial hazards at work on the capability "to live a heathy life" in a sample of employees from European Countries with different levels of human development measured by the Human Development Index (HDI). Overall, the objective of the present study is to study the influence of the most prominent psychosocial risks at work on the health of workers in Europe, taking into account both individual-level characteristics of workers and country-level characteristics. Therefore, it is hypothesized that if workers report psychosocial risks at their work, then the subjective well-being of workers will be

negatively affected, even after controlling by individual-level characteristics of workers and country-level characteristics.

8.2. Methods

8.2.1. Sample

Data from the European Social Survey (round 5, 2010) of 14,876 employees from 22 European countries were used for this study. The detailed description of this opinion poll is available elsewhere (www.europeansocialsurvey.org). It was carried out in 2010 and covered the population of residents 15 years and over of 22 European countries.

8.2.2. Procedure

Individuals were selected randomly, using sampling frames of individuals, households and addresses. Quota sampling or substitution of non-responding households or individuals was not permitted at any stage. Effective achieved sample size for each country was of 1,500 (or 800 in the case of countries less than 2 million people). Both individuals and countries data were weighted. Individual weights corrected for slightly different probabilities of selection of individuals. Countries weights corrected for the fact that most countries taking part in the ESS have very similar sample sizes, no matter how large or small their population. This weight ensured that each country was represented in proportion to its population size. Complete dataset included data from 50,781 individuals of which 39,570 were currently employed at the time of the study. Most of the variables of interest from this study, however, presented a moderate percentage of missing values, leaving to a total of 14,876 employees with complete data in all variables of the study.

Table 8.1. Country-level descriptive statistics for subjective health and Human Development Index (HDI) in 22 European countries (n = 14,876)

Country	N	Subjective Health	HDI (2010)
Country		Mean (S.D.)	
Belgium	687	4.14 (.66)	.867
Bulgaria	686	4.04 (.73)	.743
Switzerland	675	4.25 (.69)	.874
Cyprus	313	4.49 (.70)	.810
Czech Republic	821	3.92 (.78)	.841
Germany	1266	3.71 (.80)	885
Denmark	705	4.24 (.78)	.866
Estonia	706	3.65 (.71)	.812
Spain	662	3.95 (.73)	.863
Finland	715	4.02 (.73)	.871
France	760	3.94 (.79)	.872
United Kingdom	940	4.16 (.78)	.849
Greece	618	4.53 (.63)	.855
Croatia	395	4.14 (.83)	.767
Hungary	556	4.38 (.73)	.804
Ireland	701	4.38 (.73)	.894
Israel	634	4.41 (.77)	.872
Netherlands	750	3.97 (.62)	.890
Norway	762	4.19 (.75)	.937
Poland	583	3.86 (.68)	.794
Portugal	579	3.86 (.68)	.795
Russian	945	3.45 (.65)	.719
Federation			
Slovenia	477	3.86 (.71)	.827
Slovakia	566	3.85 (.70)	.818
Ukraine	441	3.36 (.69)	.709
Sweden	664	4.20 (.77)	.884

8.2.3. Variables

Outcome variable

Subjective health. The outcome variable was subjective health, measured with the following question: 'How is your health in general? Would you say it is (1), very good, (2) good, (3) fair, (4) bad, or (5) very bad?' Responses were recoded so that a higher score indicated better subjective health (M = 4.00, S.D. = 7.99). Descriptive satistics are presented in Table 1.

Covariates

Control variables. Several control variables were included in the analyses. These control variables were used to control for potential confounding effects of variables of the study on the outcome variable. Control variables included sociodemographic and interview-related variables. Socio-demographic variables were: sex (male -49.9%-, female -51.1%), age in years (M = 41.83, S.D. = 11.77), educational background (years of full-time education completed, M = 13.81, S.D. = 3.48), financial stress, size of locality, and marital status (married-living with partner -66.1%-). Financial stress was measured with the following question: 'Which of the descriptions comes closest to how you feel about your household's income nowadays? (1) Living comfortably on present income, (2) Coping on present income (3) Finding it difficult on present income, (4) Finding it very difficult on present income' (M = 2.00, S.D. = .84). Size of locality was coded (1) a big city, (2) suburbs or outskirts of big city, (3) town or small city, (4) country village, (5) farm or home in countryside (M = 2.77,S.D. = 1.24). Interview-related variables. Interview-related variables as reported by the interviewer were included to control for potential response bias (see Gracia & Herrero, 2005 for a similar approach). These variables included whether respondent understood the questions as appraised by the interviewer -from (1) never to (5) very often- and sex of the interviewer (male, female).

Influence of the size of stablishment was measured with the variable *Size of establishment* from (1) under 10 workers to (5) 500 or more workers (M = 2.80, S.D. = 1.34).

Psychosocial hazards. Several variables measuring work-related conditions and psychosocial hazards were used for this study and represent the substantial part of the models tested.

Job content. This hazard includes lack of variety or short work cycles, fragmented or meaningless work, under use of skills, high uncertainty, and continuous exposure to people through work (WHO, 2003). We used Variety of current work from (1) not at all to (4) very true (M = 2.90, S.D. = .97).

Workload & work pace. This hazard considers work overload or under load, high levels of time pressure and being continually subjected to deadlines (WHO, 2003). We used Work overload (not enough time to get everything done in job from (1) agree strongly to (5) disagree strongly (M = 2.99, S.D. = 1.13).

Control of work. This hazard takes into account low participation in decision making, lack of control over workload, pacing, and shift working (WHO, 2003). This research analyzes Control over daily work from (1) no influence to (10) complete control (M = 6.00, S.D. = 3.39)

Environment and equipment. This hazards considers inadequate equipment availability, suitability or maintenance; poor environmental conditions such as lack of space, poor lighting, and excessive noise (WHO, 2003). This research analyses Health/security at risk because of job from (1) not at all true to (4) very true(M = 1.81, S.D. = .96).

Interpersonal relationships at work. This hazard includes social or physical isolation, poor relationships with superiors, lack of social support, interpersonal conflict, harassment, bullying and violence (WHO, 2003). It is analysed Support from co-workers (1) not at all true to (4) very true (M = 3.12, S.D. = .86).

Career development and pay. This hazard considers career stagnation and uncertainty, under promotion or over promotion, poor pay, job insecurity, and low social value to work

(WHO, 2003). In this research we use two variables to analyse it. Satisfaction with salary from (1) agree strongly to (5) disagree strongly (M = 2.93, S.D. = 1.10). Career development from (1) agree strongly to (5) disagree strongly (M = 3.16, S.D. = 1.11).

Home-work interface. This hazard includes conflicting demands of work and home, low support at home, problems arising out of dual careers (WHO, 2003). We use two variables to analyse it. Worry about work when not working from (1) never to (5) always (M = 2.70, S.D. = 1.10). Balance job and other aspects from (1) extremely dissatisfied to (10) extremely satisfied (M = 6.38, S.D. = 2.11).

Job satisfaction. Satisfaction with main job from (1) extremely dissatisfied to (10) extremely satisfied (M = 7.29, S.D. = 1.96).

Country-level variables. Human Development Index (HDI) is a measure of country development that combines health (life expectancy), education (educational attainment) and wealth (income per capita) (United Nations Development Programme, 2013, http://hdr.undp.org/en/data). Data from HDI-2010 (the year of the survey) was used for this study. A higher value indicates a higher level of human development. HDI indexes are published by the United Nations Development Programme (2011). Descriptive statistics for country-related variables are presented in Table 8.1.

8.2.4. Analytical strategy

Data present a multilevel structure with individuals (level 1) nested within countries (level 2). We used multilevel modelling that allows to include additional error terms that reflect the complex pattern of variation introduced by the hierarchical structure of the data (random effects). Because our outcome variable is continuous, we used the linear mixed model module of SPSS 21 to partition the variance components of the dependent variable in each of the levels of the hierarchical structure of the data. Prior to performing the analyses we checked for multicollinearity problems among predictors examining the Variance

Inflation Factor (VIF). VIF indicates whether there is a strong association between a given predictor and all remaining predictors. A VIF greater than 10 indicates problems of multicollinearity (Stevens, 2012). All VIFs were in the range 1-2, suggesting no multicollinearity problems.

The multilevel analysis was performed in steps. The starting point was an empty model or unconditional model without explanatory variables in which the total variance of subjective health was partitioned into a component at each level. This model served to test the hypothesis that the outcome variable varied randomly across level 2 units (countries) and that a multilevel approach is justified. In the next step we explored main as well as interaction effects of variables at the individual and country level.

Restricted maximum likelihood (REML) estimation was used to account for the sampling variation of the fixed parameters. Standard errors and 95% confidence intervals were calculated from 1000 stratified by country bootstrapped samples with bias-correction. All explanatory variables were centered on their grand mean (for continuous variables) and their grand mode (for categorical variables) to ease interpretation of the parameter estimates.

8.3. Results

Results for models tested are presented in Table 8.2. The unconditional model present a significant random variation of the mean of subjective health (.606, S.E. = .007, p < .001) suggesting that the average subjective health is different across level-2 units (countries) and that a multilevel approach is justified. The full model shows the expected value of subjective health for a random individual in a randomly drawn country, after adjusting for all the statistically significant covariates.

As for the fixed effects of control variables, results of Table 8.2 shows that subjective health is influenced by age, marital status, educational background and financial stress.

Table 8.2. Estimates, robust standard errors and 95 percent confidence intervals for fixed and random effects for covariates of general subjective health among employees in 22 European countries (n = 14,876)

	Unconditional Model		Full Model	
	Estimate(S.E.)	95% C.I.	Estimate(S.E.)	95% C.I.
Intercept	4.024 (.061)***	(4.012	3.993 (.032)	(3.928,4.063)
		4.036)		
Fixed Effects				
Level-1				
Socio-demographics Variables				
Male			.077 (.013)***	(.049,.104)
Age			016 (.001)***	(017,015)
Size of Locality			006 (.004)	(016, .002)
Married			.009 (.001)***	(.033, .014)
Educational Background			.016 (.002)***	(.013, .019)
Financial Stress			105 (.008)***	(123,088)
Interview Variables				
Age of interviewer			.001 (.000)***	(000, .002)
Male interviewer			.032 (.017)*	(.002, .067)
Respondent Understood questions			.028 (.009)***	(.011, .046)
Work-related variables				
Size of Establishment			001 (.004)	(001, .001)
Variety of Job			.023 (.007)***	(.010, .035)
Time to do everything			002 (.005)	(013, .009)
Work organization			003 (.002)	(007, .000)
Health risk			047 (.007)***	(060,033)
Help coworkers			.022 (.008)**	(.006, .037)
Dissatisfaction with salary			015 (.006)**	(027,002)
Worry when not working			043 (.006)***	(055,032)
Satisfaction balance job-other			.027 (.004)***	(.020, .034)
Job satisfaction			.018 (.004)***	(.010, .025)
Level-1 interactions				
Gender*Interviewer gender			050 (.023)*	(095,005)
Age*Interviewer age			.001 (.000)***	(.000, .001)
Level-2				
HDI			2.030 (.124)***	(1.796,
				2.273)
Cross- level-1 and level-2 interactions				
Health Risk * Hdi			343 (.104)**	(560,149
Satisfaction balance job-other * Hdi			.143 (.048)***	(.045, .234)
Intercept Random Variation	.606(.007)		.058(.018)	
Model Deviance (-2 log likelihood)	34754,080		30847.227	

Married, educated and wealthier individuals tend to show greater levels of subjective health after adjusting for all variables of the study. Individuals tended to disclose different levels of subjective health depending on the sex and age of interviewer.

Also, difficulties in understanding the questions (as appraised by the interviewer) were significantly related to lower subjective health scores. Looking at the interactions terms of level-1 variables in Table 8.2, results show that the influence of gender and sex of respondent significantly interacted with gender and sex of interviewer. In this sense, the lowest levels of subjective health were observed for female respondents answering about their subjective health to female interviewers (-.050, S.E: = .023, p < .05). Regarding the variable age, age of interviewer had its greater effect on subjective health at higher levels of age of respondent (.001, S.E: = .000, p < .001). In other words, older respondents expressed better health conditions to older interviewers than to younger ones.

As for the substantial part of the model, most of work variables were significantly related to subjective health after accounting for the effects of control variables. Thus, individuals with a more varied job, with help of coworkers, less worried by job when not working, satisfied with their balance between job and other areas of their life, more satisfied with their salary, under low health-risk conditions at work or satisfied with their job, informed of significantly better health conditions. The country Human Development Index was also significantly associated with subjective health of citizens. The presence of significant cross-level interactions suggested, however, that the influence of HDI on individual's health might be better understood as an influence on the way other significant correlates are associated with subjective health. In this sense, health risk at work presents a greater influence on subjective health under lower HDI conditions, while satisfaction with balance between job and other areas of life seemed to influence health to a greater extent in countries with higher HDI. Figure x shows a visual presentation of these effects. According to this figure, while health risk at work was negatively related to subjective health on the average, when we take into account countries' HDI we see that subjective health is better for workers

8.4. Discussion

In this research, findings show that most psychosocial risk factors are affecting self-perceived health, even after controlling covariates as sex, age in years, educational background, financial stress, size of locality, and marital status. Specifically, perceived health is better when there is variety of job, co-workers support, being less worried when not working, being satisfied with their balance between job and other areas of their life, satisfaction with salary, job satisfaction and working under low health-risk conditions.

As literature had shown, lack of variety at work was associated to poorer health, which can lead to unhealthy behaviours (Cox et al., 2000) and MSDs (Fernandes et al., 2010; Norman et al., 2008). Importance of co-workers support is coherent with previous research that suggested its impact on health as well as its importance as protective factor (Bourbonnais & Mondor, 2001; Niedhammer et al., 2008; Slany et al., 2014). Findings also suggest the impact of work-life satisfaction on subjective health. Work-life dissatisfaction has been linked to work-home conflict and health problems (Allen et al., 2000; Demerouti et al., 2004; Frone, 2000; Hammer et al., 2004; Niedhammer et al., 2013; Tunlid, 2014).

According to the study findings, dissatisfaction with salary can lead to poorer subjective health, which is coherent with previous research that points out that salary dissatisfaction could influence high job strain. Specifically, salary dissatisfaction could show that high efforts might are followed by not equivalent rewards, leading to an effort-reward imbalance which worsen physical and mental health (e.g., high job strain, heart disease problems, MSDs, mental disorders, etc.) (Derycke et al, 2013; Kivimaki et al., 2002; Niedhammer et al., 2004; Niedhamer et al., 2015; Rugulies & Krause, 2008; Stansfeld et al, 1999). According to our results, De Croon, Blonk, De Zwart, Frings-Dresen, and Broersen (2002) suggested that job satisfaction was dependent on psychosocial hazards (e.g., physical and supervisor demands, De Croon et al., 2002), although it can also impact on workers' physical and mental health, MSDs and performance (Faragher et al., 2005; Fernandes et al, 2010; Kopp et al., 2009). Financial insecurity and economic stress could be also

contributing to a worse self-rated health (Ferrie et al., 2003; ILO, 2012b). This is partly coherent with 5th EWCS (Eurofund, 2012a), where social support, fair salary and career development were protective health factors and environmental hazards and job insecurity impacted on health.

However, two variables were not found to be significant, despite of previous evidence of its influence on health. 'Time to do everything at work' (workload) was not associated with subjective health. Previous research had linked to health effects (Allesøe et al., 2010; Caro-Villamil, 2007; Cortese, et al., 2010; Kaliniene et al., 2013; Rydstedt, et al., 1998; Saijo, 2008; Slany et al., 2014; Stansfeld et al., 1999). 'Control over daily work' did not impacted on subjective health, although it is one of the factors that usually had been linked to physical and psychological health (Amick et al., 1998; Bosma et al, 1997; Bosma, et al., 1998; Leka & Jain, 2010; Marmot et al., 1997; Rugulies et al., 2006).

The effect of HDI could influence the way psychosocial risks are related to subjective health. In countries with higher HDI, satisfaction with balance between job and other areas of life seemed to influence health to a greater extent. Niedhammer et al. (2012) found national differences when analysing psychosocial risks. Some countries had a lower prevalence of exposure to four factors or more, especially Denmark, Netherlands and Norway, while Czech Republic, Greece, Lithuania and Turkey showed a higher prevalence of exposure. Gallie and Russell (2009) found gender differences between countries when analyzing work-life conflict, although Steiber (2009) did not find country effects after analysing 23 countries with ESS data. However, they do not include covariates in the analysis. Recently, Lunau et al. (2014), using 2010 EWCS data, found that employees reporting a poor work-life balance reported more health problems, and also found a between country-variation of poor worklife balance that could be explained by working hours, working time regulations and welfare state regimes. Furthermore, health risk at work presents a greater influence on subjective health under lower HDI conditions. Bambra et al. (2014) concluded that physical risks ('tiring or painful working positions') were associated to poorer subjective health and that they were present in all welfare state regimes. In this sense, Toch et al. (2014) after

conducting a multilevel logistic regression analyses with 2010 EWCS data, found that physical working conditions account for a substantial proportion of occupational inequalities in health among countries. Physical, rather than psychosocial, working conditions seem to have the largest effect on self-assessed health in manual classes (specifically with women in manual occupations) and contribute substantially to health inequalities (Toch et al., 2014).

Dollard and Neser (2013) explored whether work stress related factors explained national differences in health and productivity (gross domestic product, GDP). They combined five data sets from 31 European countries and considered macro market power factors (i.e. union density), influence national worker health and GDP via work psychosocial factors and income inequality to influence national worker health productivity model. They found that aggregated worker self-reported health accounted for 12 per cent of the variance in national life expectancy and in national gross domestic product (GDP). Furthermore, workers' health and GDP were explained by macro-level (union density), and organisational-level (psychosocial safety climate, PSC). Social and economic factors (e.g., welfare regimes, work related policies) influenced psychosocial climate and workplace protection. They conclude that workers' health and unionism can impact positively on the national economy. All these studies justify a multi-level approach to research psychosocial risk factors.

As a conclusion, results of study 3 confirm hypothesis 4 which stated that the reporting of psychosocial risks at work by European workers, is associated to lower levels of subjective well-being, after controlling individual-level and country-level characteristics. However, it has been found that level of human development of a country is affecting the relationship among some psychosocial risks and subjective health.

PART III: GENERAL DISCUSSION AND CONCLUSIONS

9. Discussion of results

This doctoral research has analysed the current situation of work-related stress and psychosocial risks, including their prevalence and impact around the world, by reviewing the literature about their effects on psychological, physical and organizational health (Chapter 2). Despite the lack of data in developing countries, there is enough evidence to ensure that we are facing a global problem with significant health consequences. This research also reviewed current international and regional hard and soft policies, including ILO Conventions, EU Directives and further different approaches to promote health and safety (Chapter 3). Although there is relevant international legislation on health and safety, regulations on psychosocial risks are less developed and more inconclusive.

Additionally, ratification of international conventions is an on-going process and many countries have still not ratified any convention in this area. At a regional level, most legally-binding legislation is coming from the European Union; however, most legislation related to psychosocial risks (e.g., framework agreements on work-related stress or violence at work) is non-binding for member states and, therefore, stakeholders demand more guidance and more specific references to psychosocial risks in the core EU Directives on health and safety (Leka et al., 2014). However, due to challenges relating to the development and implementation of legislation, there are also demands for further guidance and complementary measures aimed at dealing with psychosocial risks at work. Therefore, there is a need for a supplementary approach in the study of health and safety and psychosocial risks related to CSR. Soft law is needed since hard law does not either often include psychosocial risk issues or it is not widely enforced. In this sense, CSR frameworks should include normative requests and guidance from international conventions, recommendations as well as EU Directives. As we have analysed in the present research (Chapter 6, Study 1

part 1), CSR standards could be used to this end since they cover core aspects and recommendations from the international labour and human rights legislation.

In fact, CSR standards could be and are used for different purposes. In our literature review of categories of CSR standards and main CSR instruments presented in Chapter 4.1, we have been able to identify which standard or instrument is suitable for each of these purposes. Specifically, six CSR standard categories were identified: (1) Codes of Behaviour and Ethics Principles, (2) Auditing and Management systems, (3) Sustainability and Social Reporting, (4) Social and Environmental Investment Indexes, (5) CSR reputation and social rankings, and (6) Multi-method self-improvement instruments. Also, main advantages and disadvantages of each category were discussed (see table 4.1). In addition, 28 reviewed CSR standards were further selected for their global relevance (see table 4.3). 27 of this 28 standards were used as a basis for a specific review about the coverage of working conditions (Chapter 6, Study 1) and used to develop a framework and thematic analysis linking CSR standards and psychosocial risk management (Chapter 4.2.).

Empirical studies were focused on analysing the current situation of working conditions and psychosocial health around the world in three global high-quality samples of workers and organizations. The focus was on how to motivate organizations to better manage their work environment and reduce psychosocial hazards. There was a need for empirical data by charting existing CSR practices to manage the work environment. The research therefore examined issues related to improving working conditions are being implemented in 100 of the largest global companies and which issues are covered in the main CSR standards (Study 1, part 2); the influence of CSR to drive to health and safety and psychosocial risk management at European companies (Study 2); and the impacts on European workers' self-perceived health of psychosocial hazards, while taking into account different levels of human development (Study 3).

9.1. Working conditions at corporate level and in CSR standards (Study 1)

Study 1 analysed, firstly, how working conditions related to well-being were covered in CSR standards and which areas received more emphasis. In order to develop a theoretical framework of working conditions related to well-being these areas were further compared with relevant ILO standards. This framework was used, secondly, to explore the coverage of working conditions in CSR reports in a sample of large companies around the world. It was examined how CSR was implemented in the business arena, detecting whether main companies were addressing health and safety and psychosocial risks.

9.1.1. Discussion of the main findings

Results from Study 1 (part 1) suggest that many of the CSR instruments and standards developed in recent years include detailed sections related to working conditions (see figure 6.1). In this sense, there has been a growing institutional (through creation of guidance, standards and tools) and theoretical interest in CSR over the past decade, and most recent CSR standards are more comprehensive and globally oriented. CSR instruments include basic labour and human rights (work schedules, workers' representation system, non-forced or child labour, non-discrimination, non-violence, health and safety). Since basic labour themes originate from international labour standards and regulations (e.g. ILO fundamental Conventions, Universal Declaration of Human Rights, OECD Guidelines), a number of themes and sub-themes were directly or indirectly addressed by these instruments. These results support hypothesis 1, although not all areas of international standards have been equally translated in CSR standards, as it is discussed below.

Human Resources policies (e.g. recruiting, promoting, training, payment, dismissals) have been increasingly addressed in several CSR instruments. This is particularly important given that regulation, particularly in developing countries, does not often cover many of these issues. Then, voluntary approaches such as codes of conduct, or governance documents, can help to promote good practices, as these are linked to workers' well-being, job satisfaction and organizational commitment (Standing, 2007). However, CSR instruments do not only necessarily take into account the needs of vulnerable groups and only specific actions are suggested (e.g. risk analysis, policies and statements, non-discrimination in human resources, affirmative policies, and protection and grievance mechanisms, awareness-raising, workers' employability and lifelong learning, supporting active ageing, etc...). Our study also suggests that across all instruments analysed, there is a broad coverage of health and safety issues in CSR instruments which include: training, workers' participation, prevention, organizational culture, prevention, protection, remediation, management system, implementing best practices to promote OHS and addressing specific needs of vulnerable groups, as well as legal non-compliances.

Despite the indeed broad coverage of above issues in CSR instruments, these are far from being comprehensive (Rasche, 2010). As it has been pointed out by previous researchers, the extent to which these instruments cover working conditions are not only conditional to the goals and objectives that led to their development, but also to the region of origin, cultural values, political frameworks, business sector, and economic situation (Albareda et al., 2007; Barth and Wolff, 2009; Blowfield and Murray, 2008; Waddock, 2008).

Our study, by thematically analysing CSR instruments, has contributed to the development of a comprehensive framework of issues relating to working conditions which are part of responsible business practices. It has also emphasised that managing employee issues and working conditions should be core components of ethical and socially responsible company initiatives. The inadequate inclusion of working conditions in several individual instruments, however, might be considered a systematic inconsistency that remains in practice. In this sense, the framework developed in this study might be used to further improve the quality of CSR instruments, as it provides a comprehensive view of employee issues and working conditions that could be addressed in such instruments. It can also help to implement new

and broader initiatives to promote workers' health, safety and well-being, as part of a company's responsibility agenda. Furthermore, this framework can be used to analyse corporate social performance and/or corporate reporting of companies with a focus on working conditions, as presented in the second part of Study 1.

As for the second part of Study 1, the objective was to explore whether the responsibility driven approach to managing the work environment, which has gained momentum in recent years had permeated through to organizations, as reflected in corporate reporting (a proxy for organizational practice). The findings show that many organizations were reporting on initiatives linked to overarching themes. Positive engagement seemed to be associated with what is perhaps best described as a strong institutional environment promoting CSR (Campbell, 2007) in terms of thematic area, region, and sector.

Overall, reporting of themes was high (see table 6.10, including the percentage of companies reporting in their CSR reports each subtheme), and most areas identified in the thematic template were considered by a significant proportion of companies (approximately 90%). Industrial relations and human rights themes were the exception, showing lower reporting compared to other subthemes. According to Jones et al. (2007), a higher sensitivity to industrial relations issues could occur in companies operating in high exposure industries with high reputational risks. This is supported by our results. Thus, the mining and quarrying sector reported a relatively higher number of initiatives, while transport, storage, communication, and financial intermediation performed lower. In line with previous research (GRI, 2008), human rights initiatives were reported less frequently.

Not all subthemes were equally considered, suggesting that the relevance of specific themes was less readily accepted, while variance at the more specific subtheme level existed. Despite the variability regarding human rights and industrial relation themes, overall reporting was high, suggesting that broadly speaking, managing the work environment is understood to be a material CSR issue; a finding which is in line with the so far limited existing research. Training and development and organizational climate and internal

communication, were the two most reported subthemes with 87% of companies discussing related initiatives. Following these themes, OHS prevention was the following most reported theme (86%). Non-discrimination and gender was the third most referred subtheme (84%). Links to regulation of these issues (e.g., gender equality initiatives, provisions to inform employees in decisions that affect them, etc.) could be the cause of their high degree of reporting (Bilimoria, et al., 2008; Wooten, 2008). The degree to which an area was paid attention to is likely to be linked to the existence of initiatives in the broader policy arena such as legislation. Therefore, these findings support the efficacy of such an approach, strengthening the argument for continuing to develop the responsibility driven approach to managing the work environment alongside other existing policy initiatives.

In a global approach, CSR performance of organizations in America and Europe were the highest. In Europe, it could be related to the Europeanization of CSR (Vogel, 2006), while in America a high level of business awareness and understanding of CSR was also found. Organizations in the South-East Asia region also appeared to perform well, which could be caused by a small sample size, since previous research had shown limited CSR programmes in this region (Newell, 2006). Africa region performed above expectations, although all organizations analysed are based in South Africa and furthermore data could be influenced by business operations developed in industrialized countries with stricter legislation in relation to working conditions. The Eastern Mediterranean region performed the poorest as compared to other regions. Although the aforementioned methodological issues mean that further research is needed to elaborate on the degree to which managing the work environment is a CSR priority in developing countries, it is encouraging that there are at least some examples of positive CSR performance. This is particularly important because a supplementary approach to legislation is greatly needed in the developing world. International guidance and tools have had some effect converging CSR performance towards the desired outcome (Waddock, 2008).

Across sectors, variability appeared to be explained by the level of risk poor working environment posed in each sector. The poorest sector performers were transport, storage

and communication, and financial intermediation sectors. Business sectors with more tangible risks (e.g. manufacturing), appeared to be more engaged to report company actions addressed to improve working conditions, which could be explained by the existence of stricter regulatory frameworks in these industries. Overall, results of study 1 (part 1) are supporting hypothesis 2.

In this study, information was coded from sources reflecting a top down perception of CSR management. There is little information regarding the success or implementation of initiatives and, therefore, no way to assess whether organizations engage in the described initiatives. While evidence suggests that corporations are moving away from greenwashing to transparent reporting (Freundlieb & Teuteberg, 2013), further research could compare what is described in such corporate reports, to stakeholders' experiences at the implementation level. Furthermore, the research here focused on the FT 500 and, while they are critical organizations to engage, they remain a small fraction of all organizations. Of particular interest is whether SMEs can also be approached with CSR agenda.

9.1.2. Influence of institutional and theoretical and research developments

The increasing coverage of working conditions in CSR standards and reports could be explained by the influence of both institutional and research developments in the last years. There has been key developments to institutionalise CSR, such as the launch of the 2001 European Commission Green Paper to further discussions aimed at developing a European framework for corporate social responsibility and several additional reports and initiatives, arguably remains the most influential work in highlighting the relevance of CSR to working conditions as it identified the internal and external dimension of CSR. According to the Green Paper, the internal dimension includes human resources management, health and

safety at work, adaptation to change, management of environmental impacts and natural resources; while the external dimension is based on local communities, business partners, suppliers and consumers, human rights, and global environmental concerns (EC, 2001).

The Green Paper and subsequent institutional guidance steered the development of CSR not only in Europe, but also in many other regions, as well as main ILO Conventions and Recommendations. The analysis of instruments in Study 1 illustrated that this guidance succeeded in influencing the areas included in more recent standards and tools. The findings indicate that the key areas of working conditions covered in CSR instruments and tools included: employment conditions; training, performance and communication; industrial relations; diversity and discrimination; occupational health and safety; and human rights. The themes elaborated by the European Commission were therefore translated into practice and are now an intrinsic part of the CSR landscape.

The findings further indicated that the CSR standards and tools which cover labour dimensions and working conditions include the basic labour themes which originate from international labour standards and regulations (ILO fundamental Conventions, Universal Declaration of Human Rights, OECD Guidelines). This was expected as inclusion of basic labour standards has been called for by several key international organisations. For example, the European Commission recommended that contents of standards should be in accordance with "the core labour standards identified by the ILO and include child and forced labour, discrimination issues, freedom of association and collective bargaining, health and safety, wage levels, working times and disciplinary practices" (EC, 2004a, p. 7). This was also reported by an OECD review (2009), based on the analysis of the OECD guidelines, ILO MNE Declaration and the Global Compact, which identified 12 labour issues covered in major CSR instruments: freedom of association and collective bargaining; elimination of all forms of forced and compulsory labour; abolition of child labour; non-discrimination in respect of employment and occupation; general development; employment promotion; training; wages and benefits; work schedules; safety and health; social protection; industrial relations.

At the same time, these developments have created an international CSR infrastructure which includes multi-stakeholder institutions, standards, journals and publications which inform and influence developments in this field (Waddock, 2008). Relying on international pioneer CSR instruments (e.g. GRI launched in 1999-2000, SA8000 in 1997, OECD Guidelines in 1976 –revised sixth times), international multi-stakeholder governing bodies were created, as well as international forums or specific CSR organisations. These organisations facilitated that new approaches to working conditions were broadly accepted and included in the new generations of CSR instruments. Finally, they had a maximizing effect on standardization and CSR implementation around the world, facilitating that new institutional developments that came from the European Commission or the United Nations were easily translated into practice at a global level.

In relation to theoretical and research developments, there has been an increase in both the number and relevance of CSR publications in the 21st century (Aguinis & Glavas, 2012; De Bakker, Groenewegen, & Den Hond, 2005; Taneja et al., 2011). Recent theoretical developments and research on CSR reveals an emerging global consensus on basic standards of corporate behaviour, which include several aspects of working conditions (Goel & Cragg, 2005; GRI, 2011; Paine et al., 2005). For example, a study by the OECD (in, Fuentes-García, Nuñez-Tabales, & Veroz-Herrado, 2008) on the relative importance of the different areas among company-specific codes of conduct, reported that reasonable working environment (75.7%), compliance with laws (65.5%), no discrimination or harassment (60.8%), workers' compensation (45.3%), prevention of child labour (43.2%), obligations with contractors/suppliers (41.2%), rejection of forced labour (38.5%), training (32.4%), working hours (31.8%), and freedom of association and collective bargaining (29.7%) were the most common work-related topics that appeared in company codes of conducts. Through an analysis of CSR instruments, Paine and colleagues (2005) developed the global business standards codex, which included a set of eight overarching principles. The codex presents a comprehensive but simplified picture of the conduct expected from companies today, the provisions of which can be customised to a company's specific business and context. Five principles of the codex explicitly include standards relating to employee issues and working conditions (Paine et al., 2005). In further study, Montero and colleagues (2009) analysed 20 international CSR instruments to examine the coverage of occupational health and safety (OHS) in these instruments. They found that 17 instruments explicitly mention OHS, while in seven of them OHS is a distinct component. They concluded that despite this evidence, it was not clear that OHS is present as a priority in the CSR debate, since the inclusion of OHS in CSR standards and tools could also be due to the existence of strong legislation in industrialised countries. They pointed out that many CSR instruments did not cover anything beyond what was already included in OHS legislation and called for CSR instruments to supplement legislation and further integration between these areas (Montero et al., 2009).

In sum, Study 1 pointed out a global picture of the current coverage of working conditions in CSR standards and CSR reports, showing mixied but positive results which can be explained due to theoretical and research advancements. On the other hand, this study does not add information about which factors drive to the promotion of health and safety policies at workplace. Study 2 therefore tried to respond to this research question and analysed the drivers to implement OHS management policies at an organizational level, establishing a link between promoting CSR and development of health and safety and psychosocial risk management policies.

9.2. Client requirements and corporate reputations as drivers for OHS (Study 2)

Study 2 was focused on how CSR activities could lead organizations/enterprises to implement occupational health and safety and psychosocial risk management policies at the company and establishment level in Europe. To do so, client and supply chain requirements and the interest in improving corporate reputation as drivers for implementing OHS and psychosocial risk management policies at company-level were analysed. Specifically, this

research took advantage of a large dataset of European OHS managers and sought to analyse whether the 'client requirements and the interest in improving corporate reputation and external image' of the company led to the implementation of either OHS management systems and/or psychosocial risk management systems.

9.2.1. Discussion of the main findings

The findings indicated that CSR clearly worked a driver to promoting workers' health and safety, by increasing the likelihood to the implementation of health and safety management programmes in EU companies. Summarizing, findings of Study 2 reveal that after controlling for type of country (new/old EU member), sector, public/private enterprise and size of enterprise, the requirements from clients or concern about enterprise reputation in OHS and psychosocial risk management positively influence the development of measures to deal with health and safety and psychosocial risks at work. Although health and safety requests have more impact on promoting health and safety initiatives, they also have a significant impact on promoting psychosocial risk management. This confirms hyphotesis 3.

Furthermore, firm size (companies over 50 workers) appeared to be closely related to the development of health and safety and psychosocial risk management, with more initiatives put in place. Size effect on CSR has been widely studied in the scientific literature (Aguinis & Glavas, 2012; Brower & Mahajan, 2012; Cagno et al., 2013; Lynch-Wood et al., 2009, Muller & Kolk; 2010; Udayasankar, 2008) and seems to be linked to a lower need and capacity of smaller companies (e.g., less public scrutiny, visibility and external pressures from customers and stakeholders, less capacity to implement scale processes, less impact after behaving unethically, less need for legitimacy) to implement CSR policies, including health and safety policies. Consequently, specific approaches for smaller companies are needed to promote CSR and health and safety capabilities and to recognise the CSR

improvements that smaller companies are implementing. This has been found problematic since there are very few European instruments and initiatives providing specific guidance on managing and preventing psychosocial risks in SMEs (Leka et al., 2014). On the positive side, a comprehensive workplace stress management programme at organization level in a medium sized company in Korea has been proved to be effective in reducing stress levels and psychosocial hazards, so there is room for improvement in this area (Kim et al., 2014). Type of country (EU-15 pre 2004 vs new member states after 2004) was found to have a significant influence in several outcome variables analyzed. For instance, influence of client requirements and corporate reputation have more impact in EU-15 pre-2004 member states to develop higher procedures to deal with work-related stress, bullying and harassment and violence at work, and to promote OHS initiatives such as analysis of causes of sickness, measures to help workers to return to work after an accident or disease, documented OHS

policy and discussing OHS issues in high level meetings within the company. These

differences could be linked to the existence of a stricter OHS legislation and labour

inspectorate in these countries as well as better awareness and diffusion of CSR practices.

In relation to industrial sectors, manufacturing and goods sector has more influence in OHS management, while service sector is related to a higher probability to implement psychosocial risk management. Specifically, previous analysis on ESENER found that higher levels of psychosocial management were reported in education, health and social work, while traditional high risk sectors (e.g., construction, mining, and health and social work) implemented more OHS measures (EU-OSHA, 2012b, 2012d). These results were expected since manufacturing and goods companies have a higher tradition related to occupational health and safety measures to reduce physical accidents and traditional health and safety risks. On the other side, psychosocial emerging risks are appearing more in service companies, which could also be more exposed to customers and have a higher need to keep their corporate reputation (Walsh et al., 2009). Being a private organization seems to have more impact on psychosocial risk management than on OHS management.

Results of study 2 support the hypothesis that external pressures on firms (e.g., customer or client requests, supply chain requirements) and willingness to promote corporate reputation are linked to a higher level of health and safety and psychosocial risk management initiatives in European companies. Although the influence of these variables had been previously studied (see chapter 1.5.4. and chapter 7), there was a lack of generalizable data from international randomly selected companies in Europe. Additionally, there were only smaller national studies focused on the impact of external pressures and corporate reputation on the development of OHS management and psychosocial risk management systems (Moore et al., 2011; Njå and Fjelltun, 2010). Our study suggests that promoting CSR (e.g., extension of CSR within the supply chain, increasing the link between corporate social performance and corporate reputation, increasing consumers' ethical awareness) could be an appropiate strategy to promote occupational health and safety management in European companies. This supports previous research (Sánchez-Toledo et al., 2009) which indicated that concern for employer image, inherent in an organization's CSR strategy, can motivate organizations to adopt OSH initiatives. Furthermore, results prove that this CSR approach could also be useful to promote psychosocial risk management. This is relevant, since psychosocial risks are not always addressed by national regulations; therefore a voluntary complementary approach is necessary.

Study 2 adds relevant knowledge about how to promote health and safety through CSR at the workplace and which drivers and factors influence the development of health and safety and psychosocial risk policies and initiatives. Nevertheless, it does provide information about the magnitude of the impact of psychosocial hazards on European workers' self-perceived health and the influence of the human development, as Study 3 does. By identifying the health impact, it is easier to propose an intervention at workplace through CSR in order to improve workers' health and human development.

9.3. Impact of psychosocial hazards on workers' health, human development and CSR interventions (Study 3)

Study 3 analysed whether main psychosocial risk factors reviewed in chapter 2 and 4.2. had an influence on European employees' perceived health, after controlling gender, age, educational background, and exploring whether level of human development in each country influenced psychosocial hazards-health association. Employers' policies at the organizational level are an important social conversion factor for enhancing employees' capabilities at work, including the capability to live a healthy life, which is linked to human development. After showing that psychosocial risks were related to a worsening of the physical and psychological health, it was clear the need for future company-level intervention to reduce hazardous psychosocial risks. Interventions could be based on the frameworks developed either connecting CSR to psychosocial risks in Chapter 4.2. or linking CSR to overall working conditions in Study 1 (part 1).

9.3.1. Discussion of the main findings

Findings of Study 3 have shown that most psychosocial hazards were related to self-perceived health in European workers, even after controlling covariates as sex, age in years, educational background, financial stress, size of town or city of residence, and marital status, confirming hyphotesis 4. Self-perceived health was found to be better when workers had variety in their jobs, received co-workers support, were more satisfied with their balance between job and other areas of their lives and, consequently, felt less worried when they were not working, when they were more satisfied with their salary, felt higher job satisfaction and when they worked under low health-risk conditions. Two variables studied were not significant and did not relate to perceived health, despite results of previous

research reviewed in Chapter 2 (Kaliniene et al., 2013; Leka & Jain, 2010; Marmot et al., 1997; Rugulies et al., 2006; Slany et al., 2014, Stasfeld et al., 2000): time to do everything at work (workload) and control over daily work (job control). Financial insecurity and economic stress could also be contributing to a worse self-rated health (Ferrie et al., 2003; ILO, 2012b). Results of this study were coherent with 5th EWCS (Eurofund, 2012a), where social support, fair salary and career development were protective health factors and environmental hazards and job insecurity impacted on health.

According to ESENER analysis (EU-OSHA, 2012c), awareness of health and safety risks may increased with experience and knowledge of OSH management and regulatory frameworks, making workers more sensitive and decreasing their self-perceived health. They conclude that,

"There is not straightforward to draw causal inferences (...). Sweden is the best performer in our OSH management index, but shows the highest level of workers feeling their health and safety at work is at risk in this sample. Greece shows relatively high levels of concern over health at work but little sickness absence" (EU-OSHA, 2012c, p. 55).

However, this study does not compare their results with HDI, since a key factor could be the country level of human development. Our study incorporates a country-level analysis, by using the Human Development Index (HDI). Results found that level of human development influenced the relation of psychosocial risks to subjective health. Thus, in countries with higher HDI, satisfaction with balance between job and other areas of life seemed to influence health to a greater extent. On the other side, the workers' perception that their health is at risk at work presented a greater influence on subjective health under lower HDI conditions.

Recent research also links working conditions and self-perceived health to macro-level and organizational variables. For instance, Dollard and Neser (2013) found that social and

economic factors (e.g. welfare regimen, work-related policies) influenced psychosocial safety climate, union density, and workplace protection, and that these variables were related to workers' health. Conversely, self-reported health accounted for 12 per cent in the variance in national gross domestic product (GDP).

9.4. Interventions at organization-level in OHS and psychosocial risk management

Although guidance standards and regional and national legislation have evolved in the last decade (Chapter 3), difficulties in enforcing legislation (e.g., lack of resources for labour inspectorate, non-binding legislation) or disregard for legislation (Andreou & Leka, 2012) as well as creative compliance (Gold & Duncan, 1993) and the increase of precarious working conditions (Benach & Muntaner, 2007), have provoked that psychosocial risk management guidance has not always been put into practice. This becomes even worse in developing countries with less strict legislation (Joubert, 2002). This is problematic considering the results of Study 3 showing the health impact caused by psychosocial hazards.

As long as societal pressures and stakeholders are promoting engagement in CSR, responsible business practices are becoming increasingly important in this context of high impact on health of psychosocial hazards and not existing (or enforced) legislation about psychosocial risks. It is clear that CSR involves social concerns, which include aspects of the psychosocial work environment and workers' health, safety and well-being. Looking after the workforce and developing its capacity (mentally, socially, etc.) has strategic importance for organizations and society alike, especially if one considers current challenges such as workforce ageing and organizational restructuring (Jain et al., 2011). However, although half of all European establishments reported at least seven aspects of OHS management systems this figure decrease dramatically in relation to the management of psychosocial risk (Cockbrun, Milczarek, Irastorza & González, 2012). Psychosocial risk management still has less popularity than OHS management, although establishments with better OHS

management systems are likely to have better psychosocial risk management level (EU-OSHA, 2012b, 2012d). Leka et al (EU-OSHA, 2012e) found that implementation of good practice in OHS management and concern for work-related stress, harassment and violence appeared to be "strongly associated with implementation of both procedures and ad hoc measures to deal with these issues, irrespective of enterprise size, sector or country" (p. 11). Leka et al. (EU-OSHA, 2012b), in order to improve psychosocial risk management in European companies, recommended to improve the training of OHS service providers in psychosocial risk management; designe good practice guidance standards; developing a business case explaining the cost-effectiveness of these interventions; addressing needs (resources, support, awareness, guidance) differently across sectors, country, including specific tools for smaller companies; implement educational initiatives for managers; specific support, training and guidance for bullying, harassment and work-related violence, and establishing an OHS policy, action plan or management system, including psychosocial risks assessment and prevention.

Our study (Chapter 7, Study 2) has shown that client and customer requests to behave ethically, keeping a positive enterprise reputation, is leading in European enterprises to a higher implementation of OHS and psychosocial risk management systems. Engaging in responsible business practices which incorporate the psychosocial work environment has been reported to potentially lead to increased long term stability for the business, a better public image and improved employer reputation (Jain et al., 2011). OHS management can increase productivity (Tasho, Jordan, & Robertson, 2005), reduce sickness absenteeism and economic costs (Mackay, Cousins, Kelly, Lee, & McCaig, 2004), and provoke greater client confidence and access to a wider market on the basis of being competitive on more than just price (Antonelli, Baker, McMahon & Wright, 2005). Consequently, all these measures have potential to decrease psychosocial hazards, while increasing job satisfaction and perceived health.

On the negative side, management systems including occupational health and safety (OHS) do not assure either effective health and safety measures or worker's participation in OHS. This happens especially when managers are guided by external motives, as improving reputation or getting low reported accident figures, to implement OHS management. Frick (2011) argues that when motives are external and workers' influence is too limited, these systems could lead more to manipulation than to safe work. It could lead to downstream control of safe behaviour (e.g., suppressing accident reporting) or one-way communication rather than considering occupational diseases or implementing OHS workers' participation mechanisms (Frick, 2011). Holmqvist (2009) also warned that workplace health promotion and health promotion could increase organizational control in a more favorable way to the organization's aims. This is aggravated by the current restructuration of work, which reduces worker representation (Walters, 2011).

To prevent this, new participation structures associated to OHS management systems and the participation in interventions of the health and safety representatives on psycho-social risk management could be linked to high-performance organizations (Kristensen, 2011, Walters, 2011). An analysis of the ESENER data (EU-OSHA, 2012c) found that more OHS measures were implemented and had a higher perceived success and impact where there was a formal workers' representation or consultation system in place within the company. These effects are more pronounced in smaller firms. Walters et al., in an EU-OSHA report (EU-OSHA, 2012a), found that workplaces with both forms of worker representation and high management commitment to health and safety were almost 10 times more likely to report a documented OHS policy than workplaces without worker representation and low management commitment. Both OHS and psychosocial risk management are also more likely to be implemented in these kind of workplaces with workers' participation and management involvement, which are more frequent in the EU-15.

Several work-related interventions have been suggested by the WHO (2003) and the ILO (2012) to tackle work-related stress, including work redesign (e.g., changing demands of work, sharing workload, improving employees' control and the amount and quality of

support, appropriate training), stress management training, ergonomics and environmental design (e.g., improving equipment and physical working conditions), and management and organizational development (e.g., management systems, organizational culture, managers' training, avoidance of work-place violence). It is, additionally, important that CSR instruments and standards cover these aspects, so that they can be used by companies to self-improve in these areas. Many of the work-related interventions could be addressed by CSR instruments and standards, which provide a broad coverage of several psychosocial factors (Chapter 4.2.) and could promote workers' health and human development (Jain et al, 2014). For example, ISO 26000 – section 6.4.6 Labour practices issue 4 health and safety at work, includes direct reference to psychosocial hazards, stating that organizations should 'strive to eliminate psychosocial hazards in the workplace, which contribute or lead to stress and illness'.

The thematic analysis in Chapter 4.2. showed that while psychosocial factors relating to work schedules, control at work, physical work environment and equipment, career development and home-work interface were covered by at least some instruments, there was hardly any coverage of psychosocial factors related to job content (such as lack of variety, fragmented or meaningless work, under use of skills), and role in the organization (such as role ambiguity, role conflict, and having responsibility for supervising people). Also in the case of factors such as organizational culture and function, the focus was on nondiscrimination, while the coverage of hazards relating to interpersonal relationships at work was limited to harassment, bullying and violence at work and, to some extent, to social or physical isolation. Hazards such as work pace, low levels of support for problem solving and personal development, poor relationships with superiors, lack of social support, were almost absent in CSR instruments. Consequently, after the thematic analysis, a framework analysis has been conducted and a CSR framework developed in chapter 4.2. This has tried to overcome a double deficit. Firstly, in the thematic analysis several psychosocial factors did not appear within basic labour themes and their coverage in CSR instruments was found to be lacking or generic. Consequently, the psychosocial risk framework developed included a

coverage of the 10 psychosocial hazards (tables 4.4. to 4.13). This is especially useful in areas with low to none coverage (e.g., job content, role in the organization, organization culture, work pace, low levels of support for problem solving and personal development, poor relationships with superiors, lack of social support), although it can also enrich the preventive approach to other psychosocial hazards (e.g., work schedules, lack of control at work, poor physical work environment and equipment, lack career development and homework interface). The value is that this model proposes issues already included in some CSR standards. Secondly, no CSR standard has a comprehensive approach to psychosocial risks. The model developed in this PhD (Chapter 4.2.) identifies which CSR standards and instruments can be used to face each specific psychosocial hazard, helping to provide useful tools for managers and practitioners. Theoretical framework developed in Study 1 (Chapter 6) includes a broader focus, covering working conditions as a whole. Both frameworks could be highly useful to reduce psychosocial hazards at workplace.

These CSR theoretical frameworks can help to develop work-place initiatives, suggesting an approach to improve working conditions, human resources policies (e.g. recruiting, promoting, training, payment, dismissals) while tackling psychosocial hazards. For instance, work-place initiatives addressing work-life balance can include flexible arrangement in working patterns, transportation to work, childcare facilities, or support to workers' parenthood. These workplace arrangements to support motherhood impact positively on mothers' working hours (Abendroth, Lippe & Maas, 2012). Meanwhile career development can include (e.g., promoting employability and professional development, support for continuing formal education, assessment of development needs), employee retention and promotion (e.g., internal promotion and recognition, fair job performance reviews), reduction of job insecurity (e.g., mitigation of adverse consequences of restructuring operations causing major effects on employees, promotion of job security), support to retiring employees, and adequate pay and benefits (e.g., salary, extra hours, health insurance and other economic benefits). Finally, effort-reward imbalance is addressed by reducing salary inequalities, sharing of profits with employees, and fair conditions in less industrialized countries. In addition, health and education benefits (e.g., pension schemes, 280

health care, support to workers above 45 years) and adequate salaries can improve workers' capabilities and increase human development in a country, affecting life expectancy, years of education, and income per capita.

The findings from our research allow for further integration of these areas and consolidation of CSR instruments by providing a complete and updated framework of the main areas of the work environment which can be used to improve working conditions and promote employee health, safety and well-being. An update of existing CSR standards including relevant aspects to face psychosocial hazards would be also desirable. Practitioners and researchers in Occupational Health Psychology (OHP) must play a key role in this endeavour and it is hoped that this study will provide them with guidance to support companies in this area. This would allow OHP research and practice to further develop and promote employee health, safety and well-being through a sustainability approach.

9.5. The avenue to human development

A comprehensive approach to working conditions is needed. After interviewing experts worldwide, Kortum et al. (2011) concluded that "the complex relationships between macroeconomic issues, working conditions, workers' health, as well as health behaviours, clearly point to the need for an intervention model that addresses workplace and contextual issues in a comprehensive manner" (p. 153). This also links ill-health and poverty. A macro-level approach to work-related stress, which includes political conflicts, poverty, job insecurity, unemployment, social, political, economic, cultural and religious structures, the prevalence of HIV/AIDS, and the impact of globalization have been claimed (Kortum et al., 2010). Organizations impact on workers' health, but also on their capabilities to live a plenty life, and in the human and economic development of their communities (Dollard & Neser, 2013). At a European level, Milieu Consulting (2013) claimed for the need of a coherent framework at the EU level connecting occupational and public health dimensions.

CSR standards can help to extend decent working conditions. However, there is a need for further consolidation and revision of existing CSR instruments so that they adequately cover issues relating to working conditions. Our research shows how CSR standards and interventions at organizational level could include psychosocial risk management, improving human development. This expands the chances to use CSR standards as instruments to promote workers' health. This is essential because, "like any tool, a CSR instrument can be used well or poorly - or left on the shelf to be admired or to rust, but the better it is made, the greater the chance it will fill its intended purpose" (Paine et al., 2005, p. 2). However, stronger links among CSR standards, CSR practices and macro-level policies and problems are necessary, especially in developing countries. In this sense, this doctoral research shows significative positive CSR performance around the world can provide a supplementary approach to legislation (La Dou, 2003). Translating the institutional environment from the developed world to developing regions is likely to benefit these regions in developing more responsible approaches to managing the work environment.

10. CONCLUSIONS

This research summarizes the following key conclusions:

- 1. CSR standards include basic labour and human rights (work schedules, workers' representation system, non-forced or child labour, non-discrimination, non-violence, health and safety), in accordance with international labour standards and regulations. Since many countries, especially developing countries, have still not ratified international legislation, their national legislation is not covering many of these issues. In this case, voluntary approaches such CSR standards can help to promote good practice (Study 1, part 1).
- 2. New areas and themes related to health and safety and psychosocial well-being appear in CSR standards, including further requirements than basic international legislation. Some examples found in this research include human resource policies (e.g. recruiting, promoting, training, payment, dismissals) and actions that address the needs of vulnerable groups and specific actions are suggested (e.g. drawing a profile of diversity, policies and statements, non-discrimination in human resources, affirmative policies, and protection and grievance mechanisms, awareness-raising), and workers' employability and lifelong learning as well as supporting active ageing (Study 1, part 1). In relation to psychosocial risks, psychosocial factors relating to work schedules, control at work, physical work environment and equipment, career development and home-work interface were covered by at least some instruments. From this point of view, a CSR approach is expected to increase fair working conditions and workers' well-being around the world.

- 3. While all the CSR standards analysed in our research had a broad coverage of OHS issues (training, participation, prevention, OHS culture, protection, remediation, management system, as well as addressing legal non-compliances and implementing OHS best practices), other areas have more limited coverage in these standards. In relation to psychosocial factors, there was hardly any coverage of factors related to job content (such as lack of variety, fragmented or meaningless work, under use of skills), and their role in the organisation (such as role ambiguity, role conflict, and responsibility for people). In specific sub-themes, such as organisational culture and function, the focus was on non-discrimination, while the coverage of hazards relating to interpersonal relationships at work was limited to harassment, bullying and violence at work and, to some extent, to social or physical isolation. Hazards such as work pace, low levels of support for problem solving and personal development, poor relationships with superiors, lack of social support, were not found to be included in CSR instruments in the reviews conducted. Given this evident variability, an evaluation framework including 6 issues, 30 themes and 99 subthemes was developed and further tested in a global sample of 100 FT companies implementing CSR initiatives. This evaluation framework includes a comprehensive view of employee issues and working conditions addressed in such instruments (Study 1, part 1).
- 4. After applying an evaluation framework to 100 FT global companies, it was clear that managing the work environment is understood to be a material CSR issue, with most areas identified in the evaluation framework considered by a significant proportion of companies (approximately 90%). Two notable exceptions at the theme level were industrial relations and human rights. Both associated subthemes showed lower reporting compared to other subthemes. Besides, not all subthemes were equally considered. Training and development and organizational climate and internal communication, were the two most reported, followed by two areas with

higher existing legislation, such as OHS prevention initiatives and non-discrimination and gender (Study 1, part 2).

- 5. Americas and Europe regions appeared to have the furthest regions reaching CSR initiatives. The European region superseded other regions by being far more sighted, and based on good practice recommendations. Organisations in the South East Asia region also appeared to perform well. Africa region performed above expectations, although all organizations analysed are based on South Africa and operate in other regions. The Eastern Mediterranean region performed poorest than the other regions. In sectors where poor working conditions are a more tangible risk (e.g. manufacturing) and there is a greater number of regulatory initiatives, there appeared to be more engagement with associated themes (Study 1, part 2).
- 6. External (clients and customers) stakeholders are powerful drivers for implementing OHS and psychosocial risk management systems within European companies and employer's image and corporate reputation leads to a stronger development of OHS and psychosocial risk management within companies, although the effect of these external pressures are somewhat conditional to the existence of well-established legislation in some countries and size of the establishment. Companies in old EU member states (pre-2004) and Switzerland and Norway, public enterprises and establishments with 50 or more workers are more likely to implement measures to deal with psychosocial risks and OHS management systems. Therefore, CSR can be used to promote worker's health, safety and well-being, supplementing existing regulatory initiatives (Study 2).
- 7. Related to the psychosocial well-being of workers, most psychosocial hazards are related to self-perceived health in European workers. Thus, self-perceived health was found to be better when workers had variety in their jobs, received co-workers

support, were more satisfied with their balance between job and other areas of their life and, consequently, felt less worried when they were not working, when they were more satisfied with their salary, felt higher job satisfaction and when they worked under low health-risk conditions. Lack of financial security and economic stress could be also contributing to a worse self-rated health. These influences were found after controlling for sex, age in years, educational background, financial stress, size of locality, and marital status (Study 3).

- 8. At a national level, the human development a country has achieved for its citizens influenced the relation of psychosocial risks to subjective health. Thus, in countries with higher Human Development Index (HDI), satisfaction with balance between job and other areas of life seemed to influence health to a greater extent. On the other side, the workers' perception that their health is risk at work presented a greater influence on subjective health under lower HDI conditions. Country and macro-level variables must be considered when analysing psychosocial hazards and their impact on workers' health. Level of human development of a country influence how workers perceive psychosocial hazards and, supposedly, how they experience work-related stress and the effects on their health (Study 3).
- 9. CSR standards include basic human and labour rights, as well as a considerable coverage of requirements to face psychosocial hazards and promote workers' health. The CSR initiatives at workplace level seem to be following significant issues related to working conditions, and the lack of international legally-binding legislation suggests that using these CSR initiatives at workplace can improve working conditions and reduce psychosocial hazards. Client requirements and the willingness to improve enterprise reputation are significant drivers leading to the implementation of health and safety and psychosocial risk management. Consequently, CSR and its extension through the supply chain have a potential to promote health and safety and psychosocial well-being of workers worldwide.

PART IV: REFERENCES

REFERENCES

- Aaltonen, M. (2007). The Zero Effect Model. In Prevent (Eds.), *The Quality of Working Life:*Challenges for the Future (pp. 166-170). Brussels: Prevent.
- Abendroth, A. K., Van der Lippe, T., & Maas, I. (2012). Social support and the working hours of employed mothers in Europe: The relevance of the state, the workplace, and the family. *Social Science Research*, *41*(3), 581-597.
- Abrahams, D. (2004). *Regulating Corporations: A resource guide.* United Nations Research Institute for Social Development (UNRISD), Geneva.
- AccountAbility & KPGM (2005). Assurance Standards Briefing: AA1000 Assurance Standard & ISAE3000. London: AccountAbility. Retrieved from http://www.accountability.org/images/content/1/9/193/Assurance%20Standards%20
 Briefing.pdf
- AccountAbility & WBCSD (2004). Issue Management Tool: Strategic Challenges for Business in the Use of Corporate Responsibility Codes, Standards, and Frameworks. Retrieved from http://www.wbcsd.org/pages/edocument/edocumentdetails.aspx?id=77&nosearchcontextkey=true
- Aguinis, H., & Glavas, A. (2012). What we know and don't know about corporate social responsibility a review and research agenda. *Journal of management*, *38*(4), 932-968.
- Ahi, P., & Searcy, C. (2013). A comparative literature analysis of definitions for green and sustainable supply chain management. *Journal of Cleaner Production*, *52*(1), 329-341.
- Åkerstedt, T., Knutsson, A., Westerholm, P., Theorell, T., Alfredsson, L., & Kecklund, G. (2002). Sleep disturbances, work stress and work hours: a cross-sectional study. *Journal of psychosomatic research*, *53*(3), 741-748.
- Albareda, L., Lozano, J. M., & Ysa, T. (2007). Public Policies on Corporate Social Responsibility: The Role of Governments in Europe. *Journal of Business Ethics, 74 (4),* 391 407.
- Alkire, S. (2005). Why the Capability Approach? *Journal of Human Development, 6*(1), 115–135.

- Allen, T. D., Herst, D. E., Bruck, C. S., & Sutton, M. (2000). Consequences associated with work-to-family conflict: a review and agenda for future research. *Journal of occupational health psychology*, 5(2), 278.
- Allesøe, K., Hundrup, Y. A., Thomsen, J. F., & Osler, M. (2010). Psychosocial work environment and risk of ischaemic heart disease in women: the Danish Nurse Cohort Study. *Occupational and environmental medicine*, *67*(5), 318-322.
- Alterman, T., Luckhaupt, S.E., Dahlhamer, J.M., Ward, B.W., & Calvert, G.M. (2013a). Prevalence rates of work organization characteristics among workers in the U.S.: Data from the 2010 National Health Interview Survey. *American Journal of Industrial* Medicine, *56*(6), 647-659.
- Alterman, T., Luckhaupt, S.E., Dahlhamer, J.M., Ward, B.W., & Calvert, G.M. (2013b). Job Insecurity, Work-Family Imbalance, and Hostile Work Environment: Prevalence Data from the 2010 National Health Interview Survey. *American Journal of Industrial* Medicine, *56*(6), 660-669.
- Amabile, T. M., & Conti, R. (1999). Changes in the Work Environment for Creativity During Downsizing. *Academy of Management Journal*, *42*(6), 630-640.
- American Psychological Association (APA) (2014). *Stress in America™: Paying With Our Health. American Psychological Association* [Electronic version]. Retrieved from http://www.apa.org/news/press/releases/stress/2014/stress-report.pdf
- Amick III, B. C., Kawachi, I., Coakley, E. H., Lerner, D., Levine, S., & Colditz, G. A. (1998).

 Relationship of job strain and iso-strain to health status in a cohort of women in the

 United States. *Scandinavian Journal of Work, Environment & Health*, 24(1), 54-61.
- Amnesty International (1998). Amnesty International Human Rights Principles for Companies.

 Retrieved from http://www.amnesty.org/en/library/asset/ACT70/001/1998/en/8d6c82f3-e81c-11dd-9deb-2b812946e43c/act700011998en.pdf
- Andreou, N.J.A, Leka, S., Jain, A., & Ripa, D. (2012, April). What do Companies Tell us about their Occupational Health and Safety Practices: An Analysis of 100 FT 500 Company Corporate Social Responsibility Reports. Paper presented at the 12th European Academy of Occupational Health Psychology Conference, Zurich, Switzerland. Abstract retrieved from http://www.eaohp.org/uploads/1/1/0/2/11022736/eaohp2012 book of proceedings 2012.pdf

- Andreou, N.J.A, Leka, S., Jain, A., & Ripa, D. (2013, May). *Can Corporate Social Responsibility Be Used as a Driver for Occupational Health and Safety: Implications for OHP Practice*. Paper presented at 10th International Conference on Occupational Stress and Health NIOSH, Los Angeles, USA.
- Andreou, N.J.A. & Leka, S. (2012). The role of Corporate Social Responsibility in Improving Occupational Safety and Health. In A. Jain, B. B. Puplampu, K. Amponsah-Tawiah & N. J. A. Andreou (Eds.), Occupational Safety & Health and Corporate Social Responsibility in Africa: Repositioning Corporate Responsibility Towards National Development (pp. 127-142). Cranfield: Cranfield Press.
- Andreou, N.J.A. (2013, 7 August). Corporate Social Responsibility for Results. Good Company Newsletter, 7(7). Retrieved from http://www.apaexcellence.org/resources/goodcompany/newsletter/article/463
- Antonelli, A., Baker, M., McMahon, A., & Wright, M. (2006). Six SME Case Studies that Demonstrate the Business Benefit of Effective Management of Occupational Health and Safety. Sudbury: Health and Safety Executive.
- Aragón, J., & Rocha, F. (2005). *La Responsabilidad Social Empresarial en España: Una aproximación desde la perspectiva laboral*. Madrid, Spain: Ministerio de Trabajo y Asuntos Sociales.
- Ararat, M. (2006). Corporate social responsibility across middle east and north Africa. *Social Science Research Network (SSRN) 1015925*. Retrieved from http://papers.ssrn.com/sol3/papers.cfm?abstract_id=1015925
- Arenas, D., & Rodrigo, P. (2008). Do Employees Care About CSR Programs? A Typology of Employees According to their Attitudes. *Journal of Business Ethics*, *83*(2), 265–283.
- Arnold, J., Randall, R., Patterson, F., Silvester, J., Roberson, I., Cooper, C. L., . . . Hartog, D. D. (2005). *Work Psychology: Understanding Human Behaviour in the Workplace*. Harlow, UK: Financial Times/Prentice Hall.
- Aronsson, G., & Gustafsson, K. (2005). Sickness presenteeism: prevalence, attendance-pressure factors, and an outline of a model for research. *Journal of Occupational and Environmental Medicine*, 47(9), 958-966.
- AVINA Foundation, & Korin, M. (2011). *In search of sustainability: The road of Corporate Social Responsibility in Latin America and AVINA Foundation's contribution*. AVINA Foundation, Buenos Aires, Argentina. Retrieved December 17, 2014 from <a href="http://csr-pubmed/http://csr-p

- <u>udesc-esag.wikispaces.com/file/view/CSR+in+Latin+America+-+Avina+Foundation+-+Libro-RSEeng-FINAL.pdf</u>
- Baden, D. A., Harwood, I. A., & Woodward, D. G. (2009). The effect of buyer pressure on suppliers in SMEs to demonstrate CSR practices: an added incentive or counter productive?. *European Management Journal*, *27*(6), 429-441.
- Bambra, C., Lunau, T., Van der Wel, K. A., Eikemo, T. A., & Dragano, N. (2014). Work, health, and welfare: the association between working conditions, welfare states, and self-reported general health in Europe. *International Journal of Health Services*, 44(1), 113-136.
- Banco Interamericano de Desarrollo (BID) (2009). Guía de aprendizaje sobre la implementación de Responsabilidad Social Empresarial en pequeñas y medianas empresas. Washington DC, USA: Banco Interamericano de Desarrollo, Fondo Multilateral de Inversiones.
- Barth, R., & Wolff, F. (eds.) (2009). Corporate Social Responsibility in Europe: Rhetoric and Realities (RARE PROJECT EU). Cheltenham, UK: Edward Elgar Publishing Limited.
- Basu, K., & Palazzo, G. (2008). Corporate Social Responsibility: A process model of sensemaking. *Academy of Management Review*, *33(1)*, 122–136.
- Behnam, M., and MacLean, T. L. (2011). Where is the accountability in International Accountability Standards? A Decoupling Perspective. *Business Ethics Quarterly* 21(1), 45-72
- Benach, J., & Muntaner, C. (2007). Precarious employment and health: developing a research agenda. *Journal of Epidemiology and Community Health*, 61(4), 276-277.
- Benach, J., Amable, M., Muntaner, C., & Benavides, F.G. (2002). The consequences of flexible work for health: are we looking in the right place. *British Medical Journal* 56(6), 405-406.
- Benach, J., Muntaner, C., Santana, V., & Chairs, F. (2007). Employment conditions and health inequalities. *Final report to the WHO Commission on Social Determinants of Health (CSDH) Employment Conditions Knowledge Network (EMCONET)*. Geneva, Switzerland: WHO. Retrieved from http://www.who.int/social_determinants/resources/articles/emconet_who_report.pdf
- Benach, J., Vives, A., Amable, M., Vanroelen, C., Tarafa, G., & Muntaner, C. (2014).

 Precarious employment: understanding an emerging social determinant of health. *Annual review of public health*, *35*, 229-253.

- Benavides, F.G., Benach, J., Diez-Roux, A.V., & Roman, C. (2000). How do types of employment relate to health indicators? Findings from the second European survey on working conditions. *Journal of Epidemiology and Community Health* 54(7), 494-501.
- Benavides, F.G., Wesseling, C., Delclos, G.L., Felknor, S., Pinilla, J., & Rodrigo, F. (2014). Working conditions and health in Central America: a survey of 12.024 workers in six countries. *Occupational and Environmental Medicine*, 71(7), 459–465.
- Bernhard-Oettel, C., Sverke, M., & De Witte, H. (2005). Comparing three alternative types of employment with permanent full-time work: How do employment contract and perceived job conditions relate to health complaints?. *Work & Stress*, 19(4), 301-318.
- Bevan, S. (2010). The business case for employees health and wellbeing: a report prepared for Investors in People UK. London, UK: The Work Foundation. Retrieved from http://www.theworkfoundation.com/downloadpublication/report/245 245 iip270410.p
- Bilimoria, D., Joy, S., & Liang, X. (2008). Breaking barriers and creating inclusiveness: Lessons of organizational transformation to advance women faculty in academic science and engineering. *Human Resource Management*, 47(3), 423-441.
- Blanchflower, D., & Oswald, A. (2005). Happiness and the Human development index: the paradox of Australia. *Australian Economic Review, 38*(3), 307-318
- Blowfield, M., & Frynas, J. G. (2005). Editorial Setting new agendas: critical perspectives on Corporate Social Responsibility in the developing world. *International Affairs*, 81(3), 499-513.
- Blowfield, M., & Murray, A. (2008). *Corporate responsibility: a critical introduction*. New York: Oxford University Press.
- Boardman, J., & Lyon, A. (2006). *Defining best practice in corporate occupational health and safety governance* (Research Report No. 506). Retrieved from Health and Safety Executive website: http://www.hse.gov.uk/research/rrpdf/rr506.pdf
- Bohle, P., Quinlan, M., Kennedy, D., & Williamson, A. (2004). Working hours, work-life conflict and health in precarious and" permanent" employment. *Revista de Saúde Pública*, 38, 19-25. http://dx.doi.org/10.1590/S0034-89102004000700004
- Bohle, P., Quinlan, M., & Mayhew, C. (2001). The health and safety effects of job insecurity:

 An evaluation of the evidence. *The Economic and Labour Relations Review*, *12*(1), 32-60.

- Bohman, A., and Minter, G. (2008). *International Initiatives to Promote Responsible Business: A navigation guide for business.* International Business leaders Forum, London, UK. Retrieved from http://www.globalhand.org/system/assets/979de2b627aae00018be0777e0b3f3495b8 eaf45/original/Responsible Business IBLF 2008.pdf
- Böhning, W. R. (2003). *Gaps in basic workers' rights: measuring international adherence to and implementation of the organization's values with public ILO data* (Working Paper Declaration/WP/13/2003). Geneve: ILO. Retrieved from http://digitalcommons.ilr.cornell.edu/cgi/viewcontent.cgi?article=1009&context=freedom
- Bolis, I., Brunoro, C. M., & Sznelwar, L. I. (2014). Mapping the relationships between work and sustainability and the opportunities for ergonomic action. *Applied ergonomics*, 45(4), 1225-1239.
- Bonde, J.P. (2008). Psychosocial factors at work and risk of depression: A systematic review of the epidemiological evidence. *Occupational & Environmental Medicine*, 65(7), 438-445.
- Bonvin, J. M. (2007). Corporate Social Responsibility in a Context of Permanent Restructuring: a case study from the Swiss metalworking sector. *Corporate Governance: An International Review, 15*(1), 36-44.
- Bosma, H., Marmot, M. G., Hemingway, H., Nicholson, A. C., Brunner, E., & Stansfeld, S. A. (1997). Low job control and risk of coronary heart disease in Whitehall II (prospective cohort) study. *Bmj*, *314*(7080), 558.
- Bosma, H., Stansfeld, S. A., & Marmot, M. G. (1998). Job control, personal characteristics, and heart disease. *Journal of occupational health psychology*, *3*(4), 402.
- Bourbonnais, R., & Mondor, M. (2001). Job strain and sickness absence among nurses in the province of Quebec. *American journal of industrial medicine*, *39*(2), 194-202.
- Bowen, H. R. (1953/2013). *Social responsibilities of the businessman*. Iowa, USA: University of Iowa Press. Original work published in 1953.
- Brammer, S., & Pavelin, S. (2004). Building a good reputation. *European Management Journal*, 22(6), 704-713.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101.

- Bremer, J. A. (2008). How global is the Global Compact? *Business Ethics: A European Review*, 17(3), 227-244.
- Broughton, A. (2008). *Working Conditions and Social Dialogue*. European Foundation for the Improvement of Living and Working Conditions. Retrieved from http://www.eurofound.europa.eu/docs/comparative/tn0710019s/tn0710019s.pdf
- Brower, J., & Mahajan, V. (2013). Driven to be good: A stakeholder theory perspective on the drivers of corporate social performance. *Journal of business ethics*, *117*(2), 313-331.
- Brunk, K. H. (2010). Exploring origins of ethical company/brand perceptions: A consumer perspective of corporate ethics. *Journal of Business Research*, 63(3), 255-262.
- Burchell, B., Fagan, C., O'Brien, C., & Smith, M. (2007). Working conditions in the European Union: The gender perspective. Dublin: European Foundation for the Improvement of Living and Working Conditions.
- Burton, J. (2010). WHO Healthy Workplace Framework and Model: Background and Supporting Literature and Practices. Geneva: WHO.
- Business in the Community (BITC). (2003). *Responsibility: Driving Innovation, Inspiring Employees*. London: Business in the Community.
- Business Leaders Initiative on Human Rights (BLIHR) (2009). *Essential Steps For Business To Respect Human Rights: Guidance Note*. Retrieved from http://www.integrating-humanrights.org/data/fe/file/ES%20final%20for%20web.pdf
- Cagno, E., Micheli, G. J., Masi, D., & Jacinto, C. (2013). Economic evaluation of OSH and its way to SMEs: A constructive review. *Safety science*, *53*(2), 134-152.
- Calder, F., and Culverwell, M. (2004). *Following up the World Summit on Sustainable Development Commitments on Corporate Social Responsibility.* Interim Report January 30th 2004. Royal Institute of International Affairs, London.
- Campbell, J. L. (2007). Why Would Corporations Behave in Socially Responsible Ways? An Institutional Theory of Corporate Social Responsibility. *Academy of Management Review*, 32(3), 946-967.
- Caniëls, M. C., Gehrsitz, M. H., & Semeijn, J. (2013). Participation of suppliers in greening supply chains: An empirical analysis of German automotive suppliers. *Journal of Purchasing and supply management*, 19(3), 134-143.

- Carasco, E.F., & Singh, J.B. (2008). Human Rights in Global Business Ethics Codes. Business and Society Review 113(3), 347–374.
- Carroll, A. B. (1979). A three dimensional conceptual model of corporate performance. Academy of Management Review, 4(4), 497-505.
- Carroll, A. B. (1983, July 15). Corporate Social Responsibility: Will Industry Respond to Cutbacks in Social Program Funding? *Vital Speeches of the Day, 49*, 604-608.
- Carroll, A. B., & Shabana, K. M. (2010). The business case for corporate social responsibility: a review of concepts, research and practice. *International Journal of Management Reviews*, 12(1), 85-105.
- Carter, C. R., & Jennings, M. M. (2002). Social responsibility and supply chain relationships. *Transportation Research Part E: Logistics and Transportation Review*, 38(1), 37-52.
- Casado, F. (2006). La RSE ante el espejo: Carencias, complejos & expectativas de la empresa responsable en el siglo XXI. Zaragoza, Spain: Prensas Universitarias de Zaragoza.
- Caux Round Table (2008). *People, Performance, Well-Being: Guidelines for Management and Employees*. Retrieved from http://www.cauxroundtable.org/view-file.cfm?fileid=132
- Caux Round Table (2010). *Principles For Responsible Business*. Retrieved from http://www.cauxroundtable.org/view-file.cfm?fileid=143
- Cetindamar, D. (2007). Corporate social responsibility practices and environmentally responsible behavior: The case of the United Nations Global Compact. *Journal of Business Ethics*, 76(2), 163-176.
- Chen, S., & Bouvain, P. (2008). Is corporate responsibility converging? A comparison of corporate responsibility reporting in the USA, UK, Australia and Germany. *Journal of Business Ethics*, 87, (1), 299-317.
- Cheng, G. H. L., & Chan, D. K. S. (2008). Who suffers more from job insecurity? A metaanalytic review. *Applied Psychology*, *57*(2), 272-303.
- Choi, E.S. & Ha, Y. (2009). Work-related Stress and Risk Factors among Korean Employees. *Journal of Korean Academy of Nursing*, Vol. 39(4), 549-561.
- Chollet, P., & Cellier, A. (in press). The Effects of Social Ratings on Firm Value. *Research in International Business and Finance*.

- Chung, C. E. & Kowalski, S. (2012). Job stress, mentoring, psychological empowerment, and job satisfaction among nursing faculty. *The Journal of Nursing Education, 51*(7), 381-8.
- Cifuentes, M., Sembajwe, G., & Tak, S. (2008). The association of major depressive episodes with income inequality and the human development index. *Social science* & *medicine*, *67*(4), 529-539.
- Ciliberti, F., De Haan, J., De Groot, G., & Pontrandolfo, P. (2011). CSR codes and the principal-agent problem in supply chains: four case studies. *Journal of Cleaner Production*, 19(8), 885-894.
- Ciliberti, F., Pontrandolfo, P., & Scozzi, B. (2008). Investigating corporate social responsibility in supply chains: a SME perspective. *Journal of cleaner production*, *16*(15), 1579-1588.
- Cockburn, W., Milczarek, M., Irastorza, X., & Rial González, E. (2012). The Management of Psychosocial Risks Across the European Union: Findings from ESENER. In J. Houdmont, S. Leka & R.R. Sinclair (Ed.s), Contemporary Occupational Health Psychology: Global Perspectives on Research and Practice (Vol.2), (pp. 162-183). Oxford: Wiley-Blackwell.
- Collier, J., & Esteban, R. (1999). Governance in the Participative Organisation: Creativity and Ethics. *Journal of Business Ethics*, *21*(2), 173–188.
- Cornelio, C. (Coord.). 2013. *Primera Encuesta Nacional a Trabajadores, Empleo, Trabajo, Condiciones y Medio Ambiente Laboral Argentina 2009.* (Informe final). Argentina: SRT, Ministerio de Trabajo, Empleo y Seguridad Social. Retrieved from: http://biblioteca.srt.gob.ar/Publicaciones/2013/EncuestaNac2009.pdf
- Cornelio, C., Alfredo, E., Itati-Iñiguez, M.J., & Sapoznik, M.M. (2012, March). *First National Survey on Environmental Working Conditions, Employment and Health Argentina 2009*. Paper presented at the 30th Congress of the International Commission on Occupational Health, ICOH, Cancun, Mexico. Abstract retrieved from https://icoh.confex.com/icoh/2012/webprogram/Paper7918.html
- Cornelius, N., & Gagnon, S. (2004). Still Bearing the Mark of Cain? Ethics and Inequality Measurement. *Business Ethics: A European Review, 13*(1), 26–40.
- Cornelius, N., Todres, M., Janjuha-Jivraj, S., Woods, A., & Wallace, J. (2008). Corporate social responsibility and the social enterprise. *Journal of Business Ethics*, *81*(2), 355–370.

- Cortese, C. G., Colombo, L., & Ghislieri, C. (2010). Determinants of nurses' job satisfaction: the role of work–family conflict, job demand, emotional charge and social support. *Journal of Nursing Management*, 18(1), 35-43.
- Coulmont, M., & Berthelot, S. (2015). The financial benefits of a firm's affiliation with the UN Global Compact. *Business Ethics: A European Review*, *24*(2), 144-157.
- Cox, T. (1993). Stress research and stress management: Putting theory to work. (HSE Contract Research Report No 61/1993). Sudbury, UK: HSE Books.
- Cox, T., & Griffiths, A. (2005). The nature and measurement of work-related stress. In J. Wilson & N. Corlett (Eds.), *Evaluation of human work: A practical ergonomics methodology* (3rd ed.) (pp. 553-573). Boca Raton, FL: CRC Press.
- Cox, T., Griffiths, A., & Rial-Gonzalez, E. (2000). *Research on work related stress*. Luxembourg: Office for Official Publications of the European Communities.
- Crane, A. & Matten, D. (2010, December 19) *Business ethics more culturally significant than*CSR but not everywhere. Retrieved from http://craneandmatten.blogspot.ch/2010/12/business-ethics-more-culturally.html
- Crompton, S. (2011). What's stressing the stressed? Main sources of stress among workers. Canadian Social Trends, 92, 44-50. Retrieved from http://www.statcan.gc.ca/pub/11-008-x/2011002/article/11562-eng.pdf
- Cummings, G., & Estabrooks, C. A. (2003). The effects of hospital restructuring that included layoffs on individual nurses who remained employed: A systematic review of impact. *International Journal of Sociology and Social Policy*, 23(8/9), 8-53.
- Cuyper, N., & Witte, H. (2006). The impact of job insecurity and contract type on attitudes, well-being and behavioural reports: a psychological contract perspective. *Journal of Occupational and Organizational Psychology*, 79(3), 395-409.
- Czinkota, M., Kaufmann, H. R., & Basile, G. (2014). The relationship between legitimacy, reputation, sustainability and branding for companies and their supply chains. *Industrial Marketing Management*, 43(1), 91-101.
- Dahlsrud, A. (2008). How Corporate Social Responsibility is defined: An analysis of 37 definitions. *Corporate Social Responsibility and Environmental Management*, 15, (1) 1-13.
- Danish Institute for Human Rights. (2006). *Human Rights Compliance Assessment (HRCA):*Quick Check. Copenhagen, Denmark: Danish Institute for Human Rights.

- Davies, R., and Jones, P. (2005). *Trends and Context to Rates of Workplace Injury* (Health and Safety Executive, Research Report Series No. 386). Sudbury, UK: HSE Books.
- De Bakker, F. G. A., Groenewegen, P., and Den Hond, F. (2005). A bibliometric analysis of 30 years of research and theory on corporate social responsibility and corporate social performance. *Business & Society 44*(3), 283-317.
- De Croon, E. M., Blonk, R. W., De Zwart, B. C., Frings-Dresen, M. H., & Broersen, J. P. (2002). Job stress, fatigue, and job dissatisfaction in Dutch lorry drivers: towards an occupation specific model of job demands and control. *Occupational and Environmental Medicine*, *59*(6), 356-361.
- De Cuyper, N., & De Witte, H. (2007). Job insecurity in temporary versus permanent workers: Associations with attitudes, well-being, and behaviour. *Work & Stress*, *21*(1), 65-84.
- De Cuyper, N., De Jong, J., De Witte, H., Isaksson, K., Rigotti, T., & Schalk, R. (2008). Literature review of theory and research on the psychological impact of temporary employment: Towards a conceptual model. *International Journal of Management Reviews*, 10(1), 25-51.
- De Lange, A.H., Taris, T.W., Kompier, M.A.J., Houtman, I.L.D., & Bongers, P.M. (2004). Work characteristics and psychological well-being: Testing normal, reversed and reciprocal relationships within the 4-wave SMASH study. *Work & Stress, 18*,(2) 149-166.
- Deeney, C., & O'Sullivan, L. (2008). Work related psychosocial risks and musculoskeletal disorders: potential risk factors, causation and evaluation methods. *Work (Reading, Mass.)*, *34*(2), 239-248.
- Del Bosco, B., & Misani, N. (2011). Keeping the enemies close: The contribution of corporate social responsibility to reducing crime against the firm. *Scandinavian Journal of Management*, *27*(1), 87-98.
- Dembe, A. E., Erickson, J. B., Delbos, R. G., & Banks, S. M. (2005). The impact of overtime and long work hours on occupational injuries and illnesses: new evidence from the United States. *Occupational and environmental medicine*, *62*(9), 588-597.
- Demerouti, E., Bakker, A. B., & Bulters, A. J. (2004). The loss spiral of work pressure, work-home interference and exhaustion: Reciprocal relations in a three-wave study. *Journal of Vocational Behavior*, 64(1), 131-149.

- Den Dulk, L., Peper, B., Černigoj Sadar, N., Lewis, S., Smithson, J., & Van Doorne-Huiskes, A. (2011). Work, Family, and managerial attitudes and practices in the european workplace: Comparing dutch, British, and Slovenian financial sector managers. *Social Politics*, 18(2), 300–329.
- Derycke, H., Vlerick, P., Van de Ven, B., Rots, I., & Clays, E. (2013). The Impact of Effort–Reward Imbalance and Learning Motivation on Teachers' Sickness Absence. *Stress and Health*, 29(1), 14-21.
- Dewa, C.S., Lin, E., Kooehoorn, M., & Goldner, E. (2007). Association of chronic work stress, psychiatric disorders, and chronic physical conditions with disability among workers. *Psychiatric Services*, *58*(5), 652-658.
- Di Martino, V., Hoel, H., & Cooper, C. L. (2003). *Preventing violence and harassment in the workplace*. Dublin: European Foundation for the improvement of living and working conditions.
- Dollard, M. F., & Neser, D. Y. (2013). Worker health is good for the economy: Union density and psychosocial safety climate as determinants of country differences in worker health and productivity in 31 European countries. *Social Science & Medicine*, 92(2), 114-123.
- Dollard, M., Bailey, T., Mc Linton, S., Richards, P., Mc Ternan, W., Taylor, A., & Bond, S. (2012). *The Australian Workplace Barometer: Report on psychosocial safety climate and worker health in Australia* (Canberra, Safe Work Australia). Available at: http://www.safeworkaustralia.gov.au/sites/swa/about/Publications/Documents/748/The-Australian-Workplace-Barometer-report.pdf
- Dollard, M.F. Skinner, N., Tuckey, M.R., & Bailey, T. (2007). National surveillance of psychosocial risk factors in the workplace: An international overview. *Work & Stress,* 21(1), 1-29.
- Downs, Y., & Swailes, S. (2013). A capability approach to organizational talent management. *Human Resource Development International*, 16(3), 267–281.
- Dragano, N., Lunau, T., Eikemo, T. A., Toch-Marquardt, M., van der Wel, K. A., & Bambra, C. (2015). Who knows the risk? A multilevel study of systematic variations in work-related safety knowledge in the European workforce. *Occupational and environmental medicine*, 72(8), 553-559. doi:10.1136/oemed-2014-102402
- Dumith, S., Hallal, P., Reis, R., & Kohl, H. (2011). Worldwide prevalence of physical inactivity and its association with human development index in 76 countries. *Preventive Medicine*, *53*(1), 24-28

- Duxbury, L; Higgins, C. (2012a). *Key Findings Revisiting Work-Life Issues in Canada: The*2012 National Study on Balancing Work and Caregiving in Canada. Ottawa, ON:
 Carleton University & The University of Western Ontario. Retrieved from http://newsroom.carleton.ca/wp-content/files/2012-National-Work-Key-Findings.pdf
- Duxbury, L; Higgins, C. (2012b). *Revisiting Work-Life Issues in Canada: The 2012 National Study on Balancing.* Ottawa, ON: Carleton University & The University of Western Ontario. Retrieved from http://www.healthyworkplaces.info/wp-content/uploads/2012/11/2012-National-Work-Long-Summary.pdf
- Eby, L. T., Casper, W. J., Lockwood, A., Bordeaux, C., & Brinley, A. (2005). Work and family research in IO/OB: Content analysis and review of the literature (1980–2002). *Journal of Vocational Behavior*, 66(1), 124-197.
- Einarsen, S., Hoel, H., & Cooper, C. (Eds.). (2003). *Bullying and emotional abuse in the workplace: International perspectives in research and practice*. Chicago, IL: CRC Press. Chicago
- Elkington, J. (1999). *Cannibals with Forks: The Triple Bottom Line of 21st Century Business*. Oxford: Capstone Publishing.
- Elmualim, A., Valle, R., & Kwawu, W. (2012). Discerning policy and drivers for sustainable facilities management practice. *International journal of sustainable built environment*, 1(1), 16-25.
- Elzahaf, R. A., Tashani, O.A., Unsworth, B.A., & Johnson, M.I. (2012). The prevalence of chronic pain with an analysis of countries with a Human Development Index less than 0.9: a systematic review without meta-analysis. *Current Medical Research & Opinion*, 28(7), 1221-1229.
- Engineer, M. H., Roy, N., & Fink, S. (2010). "Healthy" Human Development Indices. *Social Indicators Research*, 99(1), 61–80.
- Estryn-Behar, M., Van Der Heijden, B., Camerino, D., Fry, C., Le Nezet, O., Conway, P. M., & Hasselhorn, H. M. (2008). Violence risks in nursing—results from the European 'NEXT'Study. *Occupational medicine*, *58*(2), 107-114.
- Ethical Trading Initiative (2010). Ethical Trading Initiative Management Benchmarks.

 Retrieved from http://www.ethicaltrade.org/sites/default/files/resources/ETI%20Management%20benchmarks.pdf

- Ethical Trading Initiative (n.d.). *The ETI Base Code*. Retrieved from http://www.ethicaltrade.org/eti-base-code
- European Agency for Safety and Health at Work (EU-OSHA). (2000). Research on work-related stress. Luxembourg: Office for Official Publications of the European Communities. Available at: http://osha.europa.eu/en/publications/reports/203
- European Agency for Safety and Health at Work (EU-OSHA). (2002). *New forms of contractual relationships and the implications for occupational safety and health*. Luxembourg: Office for Official Publications of the European Communities. Retrieved from https://osha.europa.eu/en/tools-and-publications/publications/reports/206
- European Agency for Safety and Health at Work (EU-OSHA). (2004). *Corporate Social Responsibility and Safety and Health at Work*. Luxembourg: Office for Official Publications of the European Communities. Retrieved from https://osha.europa.eu/en/tools-and-publications/publications/reports/210
- European Agency for Safety and Health at Work (EU-OSHA). (2007). Expert forecast on emerging psychosocial risks related to occupational safety and health. European Risk Observatory Report, 5. Luxembourg: Office for Official Publications of the European Communities. Retrieved from https://osha.europa.eu/en/tools-and-publications/publications/reports/7807118
- European Agency for Safety and Health at Work (EU-OSHA). (2009). *OSH in figures: stress at work facts and figures.* Luxembourg: Office for Official Publications of the European Communities. Retrieved from https://osha.europa.eu/en/tools-and-publications/publications/reports/TE-81-08-478-EN-C OSH in figures stress at work
- European Agency for Safety and Health at Work (EU-OSHA). (2010). European Survey of

 Enterprises on New and Emerging Risks Managing safety and health at work.

 Luxembourg: Office for Official Publications of the European Communities. Retrieved

 from

 https://osha.europa.eu/en/tools-andpublications/publications/reports/esener1 osh management
- European Agency for Safety and Health at Work (EU-OSHA). (2011). *Mental health promotion in the workplace: A good practice report*. Luxembourg: Office for Official Publications of the European Communities. doi: 10.2802/78228
- European Agency for Safety and Health at Work (EU-OSHA). (2012a) Analysis of the findings of the European Survey of Enterprises on New and Emerging Risks on the effectiveness and support for worker representation and consultation on health and safety (European Risk Observatory Report). Luxembourg: Office for Official Publications of the European Communities. doi:10.2802/53799

- European Agency for Safety and Health at Work (EU-OSHA). (2012b). *Drivers and barriers* for psychosocial risk management: An analysis of the findings of the European Survey of Enterprises on New and Emerging Risks (ESENER). (European Risk Observatory Report). Luxembourg: Office for Official Publications of the European Communities. doi:10.2802/16104
- European Agency for Safety and Health at Work (EU-OSHA). (2012c). *Management of occupational health and safety at work. An analysis of the findings of the European Survey of Enterprises on New and Emerging Risks (ESENER).* (European Risk Observatory Report by Rand Europe). Luxembourg: Office for Official Publications of the European Communities. Retrieved from doi:10.2802/90924
- European Agency for Safety and Health at Work (EU-OSHA). (2012d). *Management of psychosocial risks at work: An analysis of the findings of the European Survey of Enterprises on New and Emerging Risks (ESENER).* (European Risk Observatory Report by Rand Europe). Luxembourg: Office for Official Publications of the European Communities. Retrieved from doi:10.2802/92077
- European Agency for Safety and Health at Work (EU-OSHA). (2012e). Understanding Workplace Management of Safety and Health, Psychosocial Risks and Worker Participation through ESENER: A Summary of Four Secondary Analysis Reports. Luxembourg: Office for Official Publications of the European Communities. Retrieved from
 - https://osha.europa.eu/sites/default/files/publications/documents/en/publications/reports/esener-summary/TEAM11001ENC.pdf
- European Agency for Safety and Health at Work (EU-OSHA). (2014). *Calculating the cost of work-related stress and psychosocial risks: European Risk Observatory Literature Review*. Luxembourg: Office for Official Publications of the European Communities. doi: 10.2802/20493
- European Commission (EC). (2001). *Green Paper: Promoting a European Framework for Corporate Social Responsibility* (COM/2001/366 final). Official Journal of the European Communities, 32(L183), 1-8. Luxembourg: Office for Official Publications of the European Communities.
- European Commission (EC). (2002). *Corporate Social Responsibility: A Business Contribution to Sustainability* (Communication from the European Commission COM/2002/347 final). Luxembourg: Office for Official Publications of the European Communities.

- European Commission (EC). (2003). *Mapping Instruments for Corporate Social Responsibility*. Directorate-General for Employment and Social Affairs. Luxembourg: Office for Official Publications of the European Communities, Luxembourg.
- European Commission (EC). (2004b). Communication from the Commission Partnership for change in an enlarged Europe Enhancing the contribution of European social dialogue (COM/2004/0557 final). Luxembourg: Office for Official Publications of the European Communities. Retrieved from http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex:52004DC0557
- European Commission (EC). (2004c). Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of Regions on the practical implementation of the provisions of the Health and Safety at Work Directives 89/391 (Framework), 89/654 (Workplaces), 89/655 (Work Equipment), 89/656 (Personal Protective Equipment), 90/269 (Manual Handling of Loads) and 90/270 (Display Screen Equipment). (COM/2004/0062 final). Luxembourg: Office for Official Publications of the European Communities. Retrieved from http://eur-lex.europa.eu/legal-content/EN/ALL/?uri=CELEX:52004DC0062
- European Commission (EC). (2007a). Communication from the Commission to the Council and the European Parliament transmitting the European framework agreement on harassment and violence at work (COM/2007/0686 final). Luxembourg: Office for Official Publications of the European Communities. Retrieved from http://eurlex.europa.eu/legal-content/EN/TXT/?uri=celex:52007DC0686
- European Commission (EC). (2007b). *Questionnaire to raise SME awareness of CSR*.

 Retrieved from http://ec.europa.eu/enterprise/policies/sustainable-business/files/csr/campaign/documentation/download/questionaire en.pdf
- European Commission (EC). (2009a). *Commission staff working document: European Competitiveness Report 2008*. Luxembourg: Office for Official Publications of the European Communities. Retrieved from http://register.consilium.europa.eu/doc/srv?l=EN&f=ST%2015670%202006%20INIT
- European Commission (EC). (2010). An Agenda for new skills and jobs: A European contribution towards full employment (Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions COM/2010/0682 final/2). Luxembourg: Office for Official Publications of the European Communities. Retrieved from http://eurlex.europa.eu/legal-content/EN/TXT/?uri=celex:52010DC0682R(01)

- European Commission (EC). (2011a). *A Renewed EU Strategy 2011-2014 for Corporate Social Responsibility*. (Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions COM/2011/681 final). Luxembourg: Office for Official Publications of the European Communities. Retrieved from http://ec.europa.eu/enterprise/newsroom/cf/ getdocument.cfm?doc id=7010
- European Commission (EC). (2011b). Report on the implementation of the European social partners' Framework Agreement on Work-related Stress. (Commission Staff Working Paper SEC/2011/241 final). Retrieved from: http://erc-online.eu/wp-content/uploads/2015/03/COM_SEC20110241_EN.pdf
- European Commission (EC). (2013) Report on the current situation in relation to occupational diseases' systems in EU Member States and EFTA/EEA countries, in particular relative to Commission Recommendation 2003/670/EC concerning the European Schedule of Occupational Diseases and gathering of data on relevant related aspects. Luxembourg: Office for Official Publications of the European Communities. Retrieved from http://ec.europa.eu/social/BlobServlet?docId=9982&langId=en
- European Commission. (EC). (2004a). *ABC of the main Instruments of Corporate Social Responsibility.* Directorate-General for Employment and Social Affairs. Luxembourg: Office for Official Publications of the European Communities. Retrieved from http://www.bmsk.gv.at/cms/site/attachments/4/3/5/CH0113/CMS1218196434160/csr_abc%5B1%5D.pdf
- European Commission. (EC). (2009b). Towards greater corporate responsibility: Conclusions of EU-funded research. Directorate-General for Research. Luxembourg: Office for Official Publications of the European Communities. Retrieved on from https://ec.europa.eu/research/social-sciences/pdf/policy reviews/policy-review-corporate-social-responsibility en.pdf
- European Economic and Social Committee (2005). Opinion of the European Economic and Social Committee on Information and measurement instruments for corporate social responsibility (CSR) in a globalised economy. Official Journal of the European Union, 2005/C 286/12. Luxembourg: Office for Official Publications of the European Communities.
- European Foundation for the Improvement of Living and Working Conditions (Eurofound). (2007a). Fourth European survey on working conditions 2005. Luxembourg: Office for

- Official Publications of the European Communities. Retrieved from http://www.eurofound.europa.eu/publications/htmlfiles/ef0698.htm
- European Foundation for the Improvement of Living and Working Conditions (Eurofound). (2007b). *Quality of work and employment in Europe*. Luxembourg: Office for Official Publications of the European Communities. Retrieved from http://www.eurofound.europa.eu/sites/default/files/ef-files/docs/ewco/tn0612036s/tn-0612036s.pdf
- European Foundation for the Improvement of Living and Working Conditions (Eurofound).

 (2011, 20 September). Working conditions. Retrieved from http://www.eurofound.europa.eu/observatories/eurwork/industrial-relations-dictionary/working-conditions
- European Foundation for the Improvement of Living and Working Conditions (Eurofound).

 (2012a). Fifth European Working Conditions Survey. Luxembourg: Publications Office of the European Union. Retrieved from http://www.eurofound.europa.eu/sites/default/files/ef_files/pubdocs/2011/82/en/1/EF_1182EN.pdf
- European Foundation for the Improvement of Living and Working Conditions (Eurofound). (2012b). Working conditions in Korea: Survey highlights. Retrieved from http://www.eurofound.europa.eu/sites/default/files/ef publication/field ef document/ef1219en.pdf
- European Foundation for the Improvement of Living and Working Conditions (Eurofund). (2013a). Third European Quality of Life Survey Quality of life in Europe: Subjective well-being. Luxembourg: Publications Office of the European Union.
- European Foundation for the Improvement of Living and Working Conditions (Eurofund). (2013b). *Women, men and working conditions in Europe*. Luxembourg: Publications Office of the European Union.
- European Foundation for the Improvement of Living and Working Conditions & European Agency for Safety and Health at Work (Eurofund & EU-OSHA). (2014). Psychosocial risks in Europe: Prevalence and strategies for prevention. Luxembourg: Publications Office of the European Union. Retrieved from: https://osha.europa.eu/en/tools-and-publications/reports/psychosocial-risks-eu-prevalence-strategies-prevention
- European Social Partners (2007). Framework Agreement on Harassment and Violence at Work. Brussels: Social partners ETUC, BUSINESSEUROPE, UEAPME and CEEP.

 Retrieved

- http://ec.europa.eu/employment social/news/2007/apr/harassment violence at work en.pdf
- European Social Partners (2008). *Implementation of the European autonomous framework agreement on work-related stress*. (Report adopted by the European Social Partners Adopted at the Social Dialogue Committee on 18 June 2008). Brussels: European social partners ETUC, BUSINESSEUROPE, UEAPME and CEEP.
- European Social Partners (2011). *Implementation of the European autonomous framework agreement on harassment and violence at work*. (Report adopted by the European Social Partners Adopted at the Social Dialogue Committee on 24 October 2011). Brussels: European social partners ETUC, BUSINESSEUROPE, UEAPME and CEEP.
- European Social Partners (2012). Final joint report by the European Social Partners adopted at the Social Dialogue Committee on 27 October 2011. Retrieved from https://www.etuc.org/sites/www.etuc.org/files/BROCHURE harassment7 2 .pdf
- Eurostat (2010). *Health and Safety at Work in Europe (1999-2007): A statistical portrait*. Eurostat Statistical books. Luxembourg: Publications Office of the European Union. doi: 10.2785/38630
- Eurostat (2015). Persons working part-time or with a second job, 2004–14: (% of total employment)

 YB16. http://ec.europa.eu/eurostat/statistics-explained/index.php/File:Persons working part-time or with a second job, 2004%E2%80%9314 (%25 of total employment) YB

 16.png
- Eurostat (2015, August). *Employment statistics*. http://ec.europa.eu/eurostat/statistics-explained/index.php/Employment statistics
- Eurostat (2015, April 15). Gender pay gap, 2013 (% difference between average gross hourly earnings of male and female employees, as % of male gross earnings, unadjusted form) YB15. Retrieved from <a href="http://ec.europa.eu/eurostat/statistics-explained/images/0/0e/Gender pay gap%2C 2013 %28%C2%B9%29 %28%25 difference between average gross hourly earnings of male and female employees%2C as %25 of male gross earnings%2C unadjusted form%29 YB15.png
- Eurostat (2015, June 3). Euro area unemployment rate at 11.1%. *Eurostat Newsrelease euroindicators,* 98/2015. Retrieved from http://ec.europa.eu/eurostat/documents/2995521/6862104/3-03062015-BP-EN.pdf/efc97561-fad1-4e10-b6c1-e1c80e2bb582

- Eweje, G., & Wu, M. (2010). Corporate response to an ethical incident: the case of an energy company in New Zealand. *Business Ethics: A European Review*, 19(4), 379-392.
- Fagan, C., & Walthery, P. (2011). Individual working-time adjustments between full-time and part-time working in European firms. *Social Politics*, *18*(2), 269–299.
- Fahlén, S. (2014). Does gender matter? Policies, norms and the gender gap in work-to-home and home-to-work conflict across Europe. *Community, Work & Family*, *17*(4), 371-391.
- Fair Labor Association (FLA) (2011). *FLA Workplace of Conduct*. Retrieved from http://www.fairlabor.org/labor-standards
- Fair-Trade Labelling Organization (FLO-CERT) (2011). Public Compliance Criteria List Hired Labour. Retrieved from http://www.flo-cert.net/flo-cert/fileadmin/user-upload/certification/requirements/en/Current-CC/PC PublicComplianceCriteriaHL ED 5.0 en.pdf
- Fair-Trade Labelling Organization (FLO-CERT) (2014). *Public Compliance Criteria List Hired Labour*. Retrieved from http://www.flocert.net/wp-content/uploads/2014/04/PC-PublicComplianceCriteriaHL-ED-6.7-en.pdf
- Faragher, E. B., Cass, M., & Cooper, C. L. (2005). The relationship between job satisfaction and health: a meta-analysis. *Occupational and environmental medicine*, 62(2), 105-112.
- Fedáková, D., & Dobeš, M. (2014). Modelling the relationships between work-to-family conflict, work and family stressors and well-being. *Človek a spoločnosť*, (3), 16-25.
- Fernandes, R. D. C. P., Assunção, A. Á., Silvany Neto, A. M., & Carvalho, F. M. (2010). Musculoskeletal disorders among workers in plastic manufacturing plants. *Revista Brasileira de Epidemiologia*, 13(1), 11-20.
- Fernández-Muñiz, B., Montes-Peón, J. M., & Vázquez-Ordás, C. J. (2009). Relation between occupational safety management and firm performance. *Safety science*, *47*(7), 980-991.
- Ferrie, J. E., Shipley, M. J., Smith, G. D., Stansfeld, S. A., & Marmot, M. G. (2002). Change in health inequalities among British civil servants: the Whitehall II study. *Journal of Epidemiology and Community Health*, *56*(12), 922-926.
- Ferrie, J. E., Shipley, M. J., Stansfeld, S. A., Smith, G. D., & Marmot, M. (2003). Future uncertainty and socioeconomic inequalities in health: the Whitehall II study. *Social Science & Medicine*, *57*(4), 637-646.

- Feveile, H., Jensen, C., & Burr, H. (2002). Risk factors for neck-shoulder and wrist-hand symptoms in a 5-year follow-up study of 3,990 employees in Denmark. *International archives of occupational and environmental health*, 75(4), 243-251.
- Fig, D. (2005). Manufacturing Amnesia: Corporate Social Responsibility in South Africa. *International Affairs*, 81(3), 599.
- Financial Times Stock Exchange (FTSE) Group. (2006). FTSE4Good Index Series: Inclusion Criteria [Electronic version]. London: FTSE International Limited. Retrieved on May, 25, 2010 from http://ftse.com/Indices/FTSE4Good Index Series/Downloads/FTSE4Good Inclusion Criteria.pdf
- Financial Times Stock Exchange (FTSE) Group. (2014). FTSE4Good Index Series: Inclusion Criteria. FTSE International Limited, London, UK. Retrieved December 17, 2014 from http://www.ftse.com/products/downloads/F4G-Index-Inclusion-Rules.pdf
- FLA. (2012). Independent Investigation of Apple Supplier, Foxconn Report Highlights
 Retrieved 11 March 2014, from
 http://www.fairlabor.org/sites/default/files/documents/reports/foxconn investigation-report.pdf
- Floderus, B., Hagman, M., Aronsson, G., Marklund, S., & Wikman, A. (2009). Work status, work hours and health in women with and without children. *Occupational and environmental medicine*, 66(10), 704-710.
- Foerstl, K., Reuter, C., Hartmann, E., & Blome, C. (2010). Managing supplier sustainability risks in a dynamically changing environment—Sustainable supplier management in the chemical industry. *Journal of Purchasing and Supply Management*, 16(2), 118-130.
- Font, X., Walmsley, A., Cogotti, S., McCombes, L., & Häusler, N. (2012). Corporate Social Responsibility: The disclosure performance gap. *Tourism Management, 33*, 1544-1553.
- Forética (2008). SGE 21: 2008 Ethical and CSR Management System. Forética, Foro para la Evaluación de la Gestión Ética, Madrid. Retrieved from http://sge21.foretica.org/wp-content/uploads/2011/11/SGE-21 2008 EN-DEF.pdf
- Forstater, M., Zadek, S., Guang, Y., Yu, K., Hong, C. X., & George, M. (2010). Corporate Responsibility in African Development: Insights from an Emerging Dialogue Retrieved from http://www.hks.harvard.edu/m-rcbg/CSRI/publications/workingpaper-60.pdf
- Fowler, S. J., and Hope, C. (2007). A Critical Review of Sustainable Business Indices and their Impact. *Journal of Business Ethics*, 76(3), 243–252.

- Frederick, W. (2008). Corporate Social Responsibility: Deep Roots, Flourishing Growth, Promising Future. In A. Crane, A. McMilliams, D. Matten, J. Moon and D. S. Siegel (Eds.), *The Oxford Handbook of Corporate Social Responsibility*, pp. 522-531. New York: Oxford University Press.
- Freeman, R. E. (1984). *Strategic management: A stakeholder approach*. Boston, MA: Pitman.
- Freeman, R. E., Wicks, A. C., & Parmar, B. (2004). Stakeholder Theory and "The Corporate Objective Revisited". *Organization Science*, *15*(3), 364–369
- Freundlieb, M., & Teuteberg, F. (2013). Corporate Social Responsibility Reporting a transnational analysis of online corporate social responsibility reports by market-listed companies: contents and their evolution. *International Journal of Innovation and Sustainable Development*, 7(1), 1-26.
- Frick, K. (2011). Worker influence on voluntary OHS management systems–A review of its ends and means. *Safety Science*, *49*(7), 974-987.
- Friedman, M. (1962). Capitalism and Freedom. Chicago, IL: University of Chicago Press.
- Friedman, M. (1970, September 13). The Social Responsibility of Business is to Increase its Profits, *The New York Times Magazine*.
- Frone, M. R. (2000). Work–family conflict and employee psychiatric disorders: The national comorbidity survey. *Journal of applied psychology*, *85*(6), 888.
- Fuentes-García, F. J., Nuñez-Tabales, J. M., & Veroz-Herradón, R. (2008). Applicability of Corporate Social Responsibility to Human Resources Management: Perspective From Spain. *Journal of Business Ethics*, *82*(1), 27-44.
- Gagnon, S., & Cornelius, N. (2006). Re-Examining Workplace Equality: The Capabilities Approach. *Human Resource Management Journal*, 10(4), 68–87.
- Gallardo-Vázquez, D., & Sanchez-Hernandez, M. I. (2014). Measuring corporate social responsibility for competitive success at a regional level. *Journal of Cleaner Production*, 72(2), 14-22.
- Gallie, D., & Russell, H. (2009). Work-family conflict and working conditions in Western Europe. *Social Indicators Research*, *93*(3), 445-467.
- Gao, Y. (2009). Corporate social performance in China: Evidence from large companies. *Journal of Business Ethics*, 89(1), 23-35.
- Garriga, E. & Melé, D. (2004). Corporate Social Responsibility Theories: Mapping the Territory. *Journal of Business Ethics*, *53*(1), 51–71.

- Gawel, A. (2006). Corporate Social Responsibility: Standards and Objectives Driving

 Corporate Initiatives. Ont.Pollution Probe, Toronto, Canada. Retrieved from

 http://www.pollutionprobe.org/old-files/Reports/csr_january06.pdf
- Gil-Monte, P. R., Carlotto, M. S., & Gonçalves Câmara, S. (2011). Prevalence of burnout in a sample of Brazilian teachers. *The European Journal of Psychiatry*, *25*(4), 205-212.
- Glinski, C. (2009). Corporate Codes of Conduct: Moral or Legal Obligation? In D. McBarnet,
 A. Voiculescu & T. Campbell (Eds.), *The New Corporate Accountability*. Cambridge:
 Cambridge University Press.
- Global Reporting Initiative (GRI). (2006a). *Indicator Protocols Set: Economic (EC)*.

 Amsterdam, The Netherlands: Global Reporting Initiative. Retrieved from https://www.globalreporting.org/resourcelibrary/G3-EconomicIndicatorProtocols.pdf
- Global Reporting Initiative (GRI). (2006b). *Indicator Protocols Set: Human Rights (HR)*.

 Amsterdam, The Netherlands: Global Reporting Initiative. Retrieved from https://www.globalreporting.org/resourcelibrary/G3-Human-Rights-Indicator-Protocols.pdf
- Global Reporting Initiative (GRI). (2006c). *Indicator Protocols Set: Labor Practices and Decent Work (LA)*. Amsterdam, The Netherlands: Global Reporting Initiative. Retrieved from https://www.globalreporting.org/resourcelibrary/G3-Labor-Indicator-Protocols.pdf
- Global Reporting Initiative (GRI). (2006d). *Indicator Protocols Set: Society (SO)*.

 Amsterdam, The Netherlands: Global Reporting Initiative. Retrieved from https://www.globalreporting.org/resourcelibrary/G3-Society-Indicator-Protocols.pdf
- Global Reporting Initiative (GRI). (2006e). *Sustainability Reporting Guidelines*. Amsterdam, The Netherlands: Global Reporting Initiative.
- Global Reporting Initiative (GRI). (2008). Reporting on Human Rights. Amsterdam, The Netherlands: Global Reporting Initiative.
- Global Reporting Initiative (GRI). (2010). *GRI Sustainability Reporting Statistics*. The Netherlands: Retrieved from https://www.globalreporting.org/resourcelibrary/GRI-Reporting-Trends-2011.pdf
- Global Reporting Initiative (GRI). (2011). Sustainability reporting guidelines: Version 3.1.

 Amsterdam, The Netherlands: Global Reporting Initiative. Retrieved from https://www.globalreporting.org/resourcelibrary/G3.1-Sustainability-Reporting-Guidelines.pdf

- Global Reporting Initiative (GRI). (2012). *GRI Second G4 Public Comment Period*. Global Reporting Initiative, Amsterdam, The Netherlands. Retrieved from https://www.globalreporting.org/resourcelibrary/G4-Exposure-Draft.pdf
- Global Reporting Initiative (GRI). (2013). *G4 Sustainability Reporting Guidelines*. Amsterdam, The Netherlands: Global Reporting Initiative.
- Godfrey, P. C., Merrill, C. B., & Hansen, J. M. (2009). The relationship between corporate social responsibility and shareholder value: An empirical test of the risk management hypothesis. *Strategic Management Journal*, *30*(4), 425-445.
- Goel, R. and Cragg, W. (2005). *Guide to Instruments of Corporate Responsibility: An overview of 16 tools.* Schulich School of Business, Toronto, Canada.
- Goh, J., Pfeffer, J., & Zenios, S. A. (2015). The Relationship Between Workplace Stressors and Mortality and Health Costs in the United States. *Management Science*.
- Gold, M. & Duncan, M. (1993). EC Health and Safety Policy Better Safe than Sorry. *European Business Journal*, *5*(4), 51-56.
- Gond, J. P., & Crane, A. (2010). Corporate Social Performance Disoriented: Saving the Lost Paradigm? *Business & Society 49*(4), 677–703.
- Good Corporation (2010). *The Good Corporation Standard: 2010*. Good Corporation and Institute of Business Ethics. Retrieved from http://www.goodcorporation.com/documents/Standard_000.pdf
- Gosling, J., Jia, F., Gong, Y., & Brown, S. (in press). The role of supply chain leadership in the learning of sustainable practice: toward an integrated framework. *Journal of Cleaner Production*.
- Grosch, J. W., Caruso, C. C., Rosa, R. R., & Sauter, S. L. (2006). Long hours of work in the US: associations with demographic and organizational characteristics, psychosocial working conditions, and health. *American Journal of Industrial Medicine*, 49(11), 943-952.
- Grzywacz, J. G., & Bass, B. L. (2003). Work, family, and mental health: testing different models of work-family fit. *Journal of Marriage and Family*, 65(1), 248-261.
- Gualandris, J., Klassen, R. D., Vachon, S., & Kalchschmidt, M. (2015). Sustainable evaluation and verification in supply chains: Aligning and leveraging accountability to stakeholders. *Journal of Operations Management*, *38*(1), 1-13.

- Hamberg-van Reenen, H.H., Proper, K.I., & van den Berg, M. (2012). Worksite mental health interventions: A systematic review of economic evaluations. *Occupational & Environmental Medicine*, 69(11), 837-45.
- Hammer, T. H., Saksvik, P. Ø., Nytrø, K., Torvatn, H., & Bayazit, M. (2004). Expanding the psychosocial work environment: workplace norms and work-family conflict as correlates of stress and health. *Journal of occupational health psychology*, 9(1), 83.
- Hansen, C. D., & Andersen, J. H. (2008). Going ill to work–What personal circumstances, attitudes and work-related factors are associated with sickness presenteeism?. *Social science & medicine*, *67*(6), 956-964.
- Hara, Y. (2014). Mental disorders among today's labor force and preventive measures.

 **Japan Labor Review*, 11(1), 5-26. Retrieved from http://www.jil.go.jp/english/JLR/documents/2014/JLR41 hara.pdf
- Härmä, M. (2006). Workhours in relation to work stress, recovery and health. *Scandinavian journal of work, environment & health, 1,* 502-514.
- Harms-Ringdahl, L., Jansson, T., & Malmén, Y. (2000). Safety, health and environment in small process plants—results from a European survey. *Journal of Safety Research*, 31(2), 71-80.
- Harrington, J. M. (2001). Health effects of shift work and extended hours of work. *Occupational and Environmental medicine*, *58*(1), 68-72.
- Hart, S. M. (2010). Self-regulation, corporate social responsibility, and the business case: Do they work in achieving workplace equality and safety?. *Journal of Business Ethics*, 92(4), 585-600.
- Hassel, A. (ed.) (2009). *CSR Instruments: A Guide for Policymakers*. Hertie School of Governance Working Papers, 38, February. Hertie School of Governance, Berlin, Germany. Retrieved from http://www.hertie-school.org/fileadmin/images/Downloads/working-papers/38.pdf
- Hauret, L., & Williams, D. (2013). *Cross-national analysis of gender differences in job satisfaction* (No. 2013-27). CEPS/INSTEAD.
- Health & Safety Executive (HSE). (2005). *Promoting health and safety as a key goal of the Corporate Social Responsibility agenda* (Research Report No. 339). Sudbury, UK: HSE Books.

- Health & Safety Executive (HSE). (2012). *Psychosocial Working Conditions in Britain in 2010*. Sudbury, UK: HSE. Retrieved from http://www.hse.gov.uk/statistics/pdf/pwc2010.pdf
- Health & Safety Executive (HSE). (2014). Stress-related and Psychological Disorders in Great Britain 2014. Sudbury, UK: HSE. Retrieved from http://www.hse.gov.uk/statistics/causdis/stress/stress.pdf
- Heintz, J. (2002). *Global labor standards: Their impact and implementation* (Working paper). Boston, MA: University of Massachusetts.
- Hemingway, H., & Marmot, M. (1999). Evidence based cardiology: psychosocial factors in the aetiology and prognosis of coronary heart disease: systematic review of prospective cohort studies. *BMJ: British Medical Journal*, *318*(7196), 1460.
- Herrero, C., Martínez, R., & Villar, A. (2012). A Newer Human Development Index. *Journal of Human Development and Capabilities*, 13(2), 247–268.
- Hobson, B., & Fahlen, S. (2009). Competing Scenarios for European Fathers: Applying Sen's Capabilities and Agency Framework to Work--Family Balance. *The ANNALS of the American Academy of Political and Social Science*, *624*(1), 214–233.
- Hobson, B., Fahlén, S., & Takács, J. (2011). Agency and capabilities to achieve a work-life balance: A comparison of Sweden and Hungary. *Social Politics*, 18(2), 168–198.
- Hoejmose, S. U., Roehrich, J. K., & Grosvold, J. (2014). Is doing more doing better? The relationship between responsible supply chain management and corporate reputation. *Industrial Marketing Management*, 43(1), 77-90.
- Hoel, H., Sparks, K., & Cooper, C. (2001). *The Cost of Violence/Stress At Work and the Benefits of a Violence/Stress-Free Working Environment* (Report commissioned by the International Labour Organization). Geneva: ILO.
- Holmqvist, M. (2009). Corporate social responsibility as corporate social control: The case of work-site health promotion. *Scandinavian Journal of Management*, *25*(1), 68-72.
- Hutchins, M. J., & Sutherland, J. W. (2008). An exploration of measures of social sustainability and their application to supply chain decisions. *Journal of Cleaner Production*, 16(15), 1688-1698.
- Hyman, R. (2010). Social dialogue and industrial relations during the economic crisis:

 Innovative practices or business as usual?. (Working Paper No. 11) Geneva:

 International Labour Office. Retrieved from http://www.oit.org/wcmsp5/groups/public/---ed dialogue/----dialogue/documents/publication/wcms 158355.pdf

- Inoue, A., Kawakami, N., Haratani, T., Kobayashi, F., Ishizaki, M., Hayashi, T., ... & Araki, S. (2010). Job stressors and long-term sick leave due to depressive disorders among Japanese male employees: findings from the Japan Work Stress and Health Cohort study. *Journal of Epidemiology and Community Health*, 64(3), 229-235.
- Institute of Social and Ethical Accountability (ISEA). (2003). *AA1000 Assurance Standard*. London: Institute of Social and Ethical Accountability.
- Instituto Ethos de Empresas e Responsabilidade Social. (2009). Indicadores Ethos de Responsabilidad Social. Sao Paulo, Brazil: Instituto Ethos de Empresas e Responsabilidade Social. Retrieved from http://www.ethos.org.br/ Uniethos/documents/INDICADORESETHOS2008-ESPANHOL.pdf
- Instituto Ethos de Empresas e Responsabilidade Social. (2011). *Indicadores Ethos de Responsabilidad Social Empresarial.* Sao Paulo, Brazil: Instituto Ethos de Empresas e Responsabilidade Social. Retrieved from http://www1.ethos.org.br/EthosWeb/arquivo/0-A-bbe2011 Indic ETHOS ESP.pdf
- Instituto Nacional de Seguridad e Higiene en el Trabajo (INSHT). 2012. VII Encuesta Nacional de Condiciones de Trabajo 2011 [VII National Survey of Working Conditions 2012] (Madrid: Instituto Nacional de Seguridad e Higiene en el Trabajo). Available at: http://www.insht.es/InshtWeb/Contenidos/Documentacion/FICHAS%20DE%20PUBLICACIONES/EN%20CATALOGO/OBSERVATORIO/Informe%20(VII%20ENCT).pdf
- International Confederation of Free Trade Unions (2006). *ICFTU annual survey of violation of trade union rights 2006*. Brussels, Belgium: ICTFU.
- International Finance Corporation (IFC). (2010). *IFC Performance Standards on Social and Environmental Sustainability.* Draft Rev- 0.1, 14 April. Washington D.C., USA: International Finance Corporation
- International Finance Corporation (IFC). (2012). *IFC Performance Standards on Environmental and Social Sustainability.* Washington D.C., USA: International Finance Corporation.
- International Labour Office (ILO). (1930). Encyclopaedia of Occupational Health and Safety. Geneva: ILO.
- International Labour Office (ILO). (1981). *C155 Occupational Safety and Health Convention,*1981 (No. 155): Convention concerning Occupational Safety and Health and the

 Working Environment. Geneva: ILO. Retrieved from

- http://www.ilo.org/dyn/normlex/en/f?p=normlexpub:12100:0::no:12100:p12100 inst rument id:312300:no
- International Labour Office (ILO). (1986). *Psychosocial factors at work: Recognition and control* (Report of the Joint International Labour Office and World Health Organization on Occupational Health, Ninth Session, Geneva, 18-24 September 1984. Occupational Safety and Health Series No. 56). Geneva: ILO.
- International Labour Office (ILO). (2000). Mental Health in the Workplace. Geneva: ILO.
- International Labour Office (ILO). (2003a). Safety in Numbers: Pointers for a Global Safety Culture at Work. Geneva: ILO.
- International Labour Office (ILO). (2003b). *Time for Equality at Work: Global Report under the Follow-up to the ILO Declaration on Fundamental Principles and Rights at Work*.

 Geneva: ILO. Retrieved from http://www.ilo.org/wcmsp5/groups/public/@dgreports/@dcomm/@publ/documents/publication/wcms-publ-9221128717_en.pdf
- International Labour Office (ILO). (2004). Facts on SafeWork. Geneva: ILO.
- International Labour Office (ILO). (2006a). *Tripartite declaration of principles concerning multinational enterprises and social policy (MNE Declaration) 4th Edition*. Geneva: ILO.
- International Labour Office (ILO). (2006b). Violence at Work 3rd Edition. Geneva: ILO.
- International Labour Office (ILO). (2007a). *Equality at work: Tackling the challenges.* Global Report under the follow-up to the ILO Declaration on Fundamental Principles and Rights at Work. Geneva: ILO.
- International Labour Office (ILO). (2007b). Facts on Disability in the World of Work.

 Geneva: ILO. Retrieved from http://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms 087707.pdf
- International Labour Office (ILO). (2009). *Health and life at work a basic human right*.

 Geneva: ILO. Retrieved from http://www.ilo.org/public/portugue/region/eurpro/lisbon/pdf/28abril 09 en.pdf
- International Labour Office (ILO). (2010a). Emerging risks and new patterns of prevention in a changing world of work. Geneva: ILO. Retrieved from http://www.ilo.org/wcmsp5/groups/public/@ed protect/@protrav/@safework/docume <a href="http://www.ilo.org/w

- International Labour Office (ILO). (2010b). List of occupational diseases (revised 2010): Identification and recognition of occupational diseases: Criteria for incorporating diseases in the ILO list of occupational diseases (Occupational Safety and Health Series, No. 74). Geneva: ILO.
- International Labour Office (ILO). (2010c). Recommendation concerning the List of Occupational Diseases and the Recording and Notification of Occupational Accidents and Diseases ILO recommendation R194 revised annex, 2010. Geneva: ILO.
- International Labour Office (ILO). (2011). *ILO introductory report: Global Trends and Challenges on Occupational Safety and Health*. Report, XIX World Congress on Safety and Health at Work, Istambul. Geneva: ILO.
- International Labour Office (ILO). (2012a). Decent Work Indicators: Concepts and definitions. Geneva: ILO.
- International Labour Office (ILO). (2012b). SOLVE: integrating health promotion into workplace OSH policies: trainer's guide. Geneva: ILO. Retrieved from http://www.ilo.org/wcmsp5/groups/public/---ed protect/----protrav/---safework/documents/instructionalmaterial/wcms_178397.pdf
- International Labour Office (ILO). (2012c). Stress Prevention at Work Checkpoints. Geneva:

 ILO. Retrieved from
 http://www.ilo.org/wcmsp5/groups/public/@dgreports/@dcomm/@publ/documents/p
 ublication/wcms 168053.pdf
- International Labour Office (ILO). (2012d). Working towards sustainable development:

 Opportunities for decent work and social inclusion in a green economy. Geneva: ILO.
- International Labour Office (ILO). (2013a). *Prevention of occupational diseases* (Governing Body 317th Session GB.317/POL/3, Geneva, 6–28 March 2013). Geneva: ILO. Retrieved from http://www.ilo.org/wcmsp5/groups/public/---ed norm/---relconf/documents/meetingdocument/wcms 204755.pdf
- International Labour Office (ILO). (2013b). *The Prevention of Occupational Diseases*.

 Geneva: ILO. Retrieved from http://www.ilo.org/wcmsp5/groups/public/---ed-protect/---protrav/---safework/documents/publication/wcms 208226.pdf
- International Labour Office (ILO). (2015a). *Applying and promoting International Labour Standards*. Retrieved from http://www.ilo.org/global/standards/applying-and-promoting-international-labour-standards/lang--en/index.htm

- International Labour Office (ILO). (2015b). *World employment and social outlook: Trends*2015. Geneva: ILO. Retrieved from http://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms 337069.pdf
- International Labour Office (ILO). (n.d.). *Decent Work Agenda*. Retrieved from http://www.ilo.org/global/about-the-ilo/decent-work-agenda/lang--de/index.htm
- International Labour Office (ILO) and World Health Organization (WHO). (2005, April 28).

 Joint Press Release ILO/WHO Number of Work related Accidents and Illnesses
 Continues to Increase. ILO and WHO Join in Call for Prevention Strategies. Geneva:

 ILO. Retrieved from http://www.ilo.org/global/about-the-ilo/media-centre/press-releases/WCMS 005161/lang--en/index.htm
- International Organization for Standardization (ISO). (2010). *ISO 26000:2010 Guidance on social responsibility.* Geneva, Switzerland: International Organization for Standardization.
- Ioannou, I., & Serafeim, G. (2012). *The Consequences of Mandatory Corporate Sustainability Reporting* (Working Paper). Available at http://ssrn.com/abstract=1799589.
- Jain A., Leka, S., & Zwetsloot, G. I. J. M. (2011). Corporate Social Responsibility and Psycho-social Risk Management in Europe. *Journal of Business Ethics*, 101(4), 619-633.
- Jain, A., Leka, S., & Zwetsloot, G. (2011). Corporate Social Responsibility and Psychosocial Risk Management in Europe. *Journal of Business Ethics*, 101(4), 619-633.
- Jain. A. (2011). Development and implementation of policies for the management of psychosocial risks: Exploring the role of stakeholders and the translation of policy into practice in Europe (Doctoral dissertation, University of Nottingham, UK). Retrieved from http://eprints.nottingham.ac.uk/12295/2/Aditya_Jain_Thesis.pdf
- Jamali, D. (2010). MNCs and International Accountability Standards Through an Institutional Lens: Evidence of Symbolic Conformity or Decoupling. *Journal of Business Ethics* 95(4), 617–640).
- Jamali, D. R., El Dirani, A. M., & Harwood, I. A. (2015). Exploring human resource management roles in corporate social responsibility: the CSR-HRM co-creation model. *Business Ethics: A European Review*, *24*(2), 125-143.
- Jenny, G.J., Brauchli, R., Inauen, A., Füllermann, Fridrich, A., & Bauer, G.F. (2015). Process and outcome evaluation of an organizational-level stress management intervention in Switzerland. *Health Promotion International*, 30(3), 573-585.

- Joensuu, M., Väänänen, A., Koskinen, A., Kivimäki, M., Virtanen, M., & Vahtera, J. (2010). Psychosocial work environment and hospital admissions due to mental disorders: a 15-year prospective study of industrial employees. *Journal of affective disorders*, 124(1), 118-125.
- Jones, M., Marshall, S., & Mitchell, R. (2007). Corporate social responsibility and the management of labour in two Australian mining industry companies. *Corporate Governance: An International Review*, 15(1), 57-67.
- Joubert, D.M. (2002). Occupational health challenges and success in developing countries:

 A South African perspective. *International Journal of Occupational and Environmental Health*, 8(2), 119-124.
- Kaliniene, G., Ustinaviciene, R., Skemiene, L., & Januskevicius, V. (2013). Associations between neck musculoskeletal complaints and work related factors among public service computer workers in Kaunas. *International journal of occupational medicine and environmental health*, 26(5), 670-681.
- Kawashita, F., Taniyama, Y., Hwi, Y. S., Fujisaki, T., Kameda, T., & Mori, K. (2005). Occupational safety and health aspects of Coporate Social Responsibility (CSR) in Japanese companies listed on the Tokyo stock exchange (TSE) first section. *Journal of Occupational Health*, 47(6), 533-539.
- Khan, Z., & Nicholson, J. D. (2014). An investigation of the cross-border supplier development process: Problems and implications in an emerging economy. *International Business Review*, 23(6), 1212-1222.
- Kim, S., Suh, C., Park, M., Kim, K., Lee, C.K., Son, B.C., et al. & Jung, H. (2014). Effectiveness of a Comprehensive Stress Management Program to Reduce Work-Related Stress in a Medium-Sized Enterprise. *Annals of Occupational & Environmental Medicine*, 28(1). 4.
- Kim, Y. S., Park, J., Rhee, K. Y., & Kim, H. M. (2015). Second Korean Working Conditions Survey: A Comparison between the Second KWCS and the First Korean Working Conditions Survey. *Safety and Health at Work*, 6(2), 85-89.
- Kivimäki, M., Leino-Arjas, P., Luukkonen, R., Riihimäi, H., Vahtera, J., & Kirjonen, J. (2002). Work stress and risk of cardiovascular mortality: prospective cohort study of industrial employees. *Bmj*, *325*(7369), 857.
- Kivimäki, M., Virtanen, M., Kawachi, I., Nyberg, S. T., Alfredsson, L., Batty, G. D., ... & Jokela, M. (2015). Long working hours, socioeconomic status, and the risk of incident

- type 2 diabetes: a meta-analysis of published and unpublished data from 222.120 individuals. *The Lancet Diabetes & Endocrinology*, *3*(1), 27-34.
- KLD Research and Analytics (2007). *Environmental, Social and Governance Ratings Criteria.*SOCRATES: The Corporate Social Ratings Monitor. Boston, MA: KLD Research & Analytics.
- Knutsson, A. (2003). Health disorders of shift workers. *Occupational Medicine*, *53*(2), 103-108.
- Kok, E., & van Steen, J. (1994). ACRONYM-Development of proposals for guidelines on safety management and safety auditing-Results of the questionnaire for companies.
- Kola-Lawal, C., Wood, M., Alo, B., & Clark, A. (2014). Factors in Organisational Environmental Management System Implementation–Developed vs. Developing Country Contexts. *Journal of Sustainable Development of Energy, Water and Environment Systems*, 2(4), 408-421.
- Kompier, M.A.J. (2006). New systems of work organization and workers' health. Scandinavian Journal of Work, Environment and Health 32(6), 421-430.
- Kompier, M.A.J., & Marcelissen, F.H.G. (1990). *Handbook of Work Stress: A Systematic Approach for Organizational Practice*. Amsterdam: NIA
- Kopp, M. S., Stauder, A., Purebl, G., Janszky, I., & Skrabski, Á. (2008). Work stress and mental health in a changing society. *The European journal of public health*, 18(3), 238-244.
- Kopp, M.S., Stauder, A., Purebl, G., Janszky, I., & Skrabski, A. (2009). Work stress and mental health in a changing society. *European Journal of Public Health, 18*(3), 238-244.
- Kortum, E., Leka, S. and Cox, T. (2010). Stress at work psychosocial risks and work-related stress in developing countries: health impact, priorities, barriers and solutions.

 International Journal of Occupational Medicine and Environmental Health, 23(3), 225 238
- Kortum, E., Leka, S. and Cox, T. (2011). Perceptions of psychosocial hazards, work-related stress and workplace priority risks in developing countries. *Journal of Occupational Health*, *55*(1), 144-155.
- Kouvonen, A., Kivimaki, M., Cox, S.J., Cox, T., & Vahtera, J. (2005). Relationship between work stress and body mass index among 45,810 female and male employees. *Psychosomatic Medicine*, *67*(4), 577-583.

- Kouvonen, A., Kivimaki, M., Elovainio, M., Pentti, J., Linna, A., Virtanen, M., & Vahtera, J. (2006). Effort-reward imbalance and sedentary lifestyle: An observational study in a large occupational cohort. *Occupational & Environmental Medicine*, 63(6), 422-427.
- KPMG, United Nations Environment Programme, Global Reporting Initiative, and Unit for Corporate Governance in Africa. (2010). Carrots and Sticks Promoting Transparency and Sustainability: An update on trends in Voluntary and Mandatory Approaches to Sustainability Reporting. Retrieved from https://www.globalreporting.org/resourcelibrary/Carrots-And-Sticks-Promoting-Transparency-And-Sustainbability.pdf
- KPMG. (2011), KPMG International Survey of Corporate Responsibility Reporting.
 Amstelveen: KPMG. Retrieved from http://www.kpmg.com/Global/en/IssuesAndInsights/ArticlesPublications/corporate-responsibility/Documents/2011-survey.pdf.
- Kristensen, P. H. (2011). Managing OHS: A route to a new negotiating order in high-performance work organizations?. *Safety Science*, *49*(7), 964-973.
- Kurucz, E., Colbert, B., & Wheeler, D. (2008). The Business Case for Corporate Social Responsibility. In A. Crane, A. McWilliams, D. Matten, J. M. Moon & D. S. Siegel (Eds.), *The Oxford Handbook of Corporate Social Responsibility* (pp. 83-112). Oxford: Oxford University Press.
- La Dou, J. (2003). International occupational health. *International Journal of Hygiene and Environmental Health*, 206(4-5), 303-313.
- Laaksonen, M., Martikainen, P., Rahkonen, O., & Lahelma, E. (2008). Explanations for gender differences in sickness absence: evidence from middle-aged municipal employees from Finland. *Occupational and Environmental Medicine*, *65*(5), 325-330.
- LaMontagne, A., Keegel, T., Louie, A., Ostry, A. & Landsbergis, P. (2007). A systematic review of the job-stress intervention evaluation literature, 1990-2005. *International Journal of Occupational and Environmental Health*, *13*(3), 268-280.
- László, K. D., Pikhart, H., Kopp, M. S., Bobak, M., Pajak, A., Malyutina, S., ... & Marmot, M. (2010). Job insecurity and health: A study of 16 European countries. *Social science & medicine*, 70(6), 867-874.
- Laufer, W.S. (2003). Social Accountability and Corporate Greenwashing. *Journal of Business Ethics* 43(3), 253-261.

- Law, W. K., Chan, A. H. S., & Pun, K. F. (2006). Prioritising the safety management elements: a hierarchical analysis for manufacturing enterprises. *Industrial Management & Data Systems*, 106(6), 778-792.
- Lee, P. (2008). A review of the theories of corporate social responsibility: Its evolutionary path and the road ahead. *International Journal of Management Reviews*, 10(1), 53-73.
- Lee, P. K., Lau, A. K., & Cheng, T. C. E. (2013). Employee rights protection and financial performance. *Journal of Business Research*, 66(10), 1861-1869.
- Leipziger, D. (2003). *The Corporate Responsibility Code Book.* Sheffield, UK: Greenleaf Publishing.
- Leipziger, D. (2010). *The Corporate Responsibility Code Book.* Sheffield, *UK:* Greenleaf Publishing, 2nd Edition.
- Leka, S. & Cox, T. (2008). The European Framework for Psychosocial Risk Management: Prima-EF. Nottingham: I-WHO Publications.
- Leka, S., & Andreou, N. J. A. (2012). Improving Occupational Health and Safety Through Policy Initiatives. In A. J. Jain, B. B. Puplampu, K. Amponsah-Tawiah & N. J. A. Andreou (Eds.), Occupational Safety & Health and Corporate Social Responsibility in Africa: Repositioning Corporate Responsibility Towards National Development. Cranfield: Cranfield Press.
- Leka, S., & Jain, A. (2010). *Health Impact of Psychosocial Hazards at Work: An Overview*. Geneva: World Health Organization.
- Leka, S., Cox, T., & Zwetsloot, G. (2008). The European Framework for Psychosocial Risk Management (PRIMA-EF) *The European Framework for Psychosocial Risk Management: PRIMA-EF*. Nottingham: I-WHO Publications.
- Leka, S., Griffiths, A., and Cox, T. (2004). Work organization & stress: Systematic problem approaches for employers, managers and trade union representatives. Geneve: World Health Organization.
- Leka, S., Hassard, J., Jain, A., Makrinov, N., Cox, T., Kortum, E., Ertel, M., Hallsten, L., Iavicoli, S., Lindstrom, K., and Zwetsloot, G. (2008). Towards the development of a psychosocial risk management framework, SALTSA. Nottingham: I-WHO publications.
- Leka, S., Jain, A., Houtman, I. L. D., McDaid, D., Park, A., Broeck, V. D., & Wynne, R. (2014). *Evaluation of policy and practice to promote mental health in the workplace in Europe* (Final Report).

- Leka, S., Jain, A., Iavicoli, S., Vartia. M., & Ertel, M. (2011). The role of policy for the management of psychosocial risks at the workplace in the European Union. *Safety Science*, 49(4), 558-564.
- Leka, S., Jain, A., Zwetsloot, G. & Cox, T. (2010). Policy-level interventions and work-related psychosocial risk management in the European Union. *Work and Stress, 24(3),* 298-307.
- Li, J., Shang, L., Galatsch, M., Siegrist, J., Müller, B. H., Hasselhorn, H. M., & NEXT Study Group. (2013). Psychosocial work environment and intention to leave the nursing profession: a cross-national prospective study of eight countries. *International Journal of Health Services*, 43(3), 519-536.
- Ligteringen, E., and Zadek, S. (2005). *The Future of Corporate Responsibility Codes, Standards and Frameworks.* Global Reporting Initiative and Accountability. Retrieved from http://www.upj.de/fileadmin/user-upload/MAIN-dateien/Themen/Debatte/gri aa futureofcrcodes 2005.pdf
- Linder, B., Sorell, T., and Steinkellner, A. (2010) *LARRGE: Labour Rights Responsibilities Guide*. Vienna, Austria: Ludwig Boltzmann Institute of Human Rights.
- Lindgreen, A., Swaen, V., & Johnston, W. J. (2009). Corporate Social Responsibility: An Empirical Investigation of U.S. Organizations. *Journal of Business Ethics*, 85(3), 303-323.
- Lippel, K. (2010). The Law of Workplace Bullying: An International Overview. *Comparative Labor Law and Policy Journal*, 32(1), 1-13.
- Liston-Heyes, C., & Ceton, G. (2009). An investigation of real versus perceived CSP in S&P-500 firms. *Journal of Business Ethics*, 89(2), 283-296.
- Lompo, K., & Trani, J.-F. (2013). Does Corporate Social Responsibility Contribute to Human Development in Developing Countries? Evidence from Nigeria. *Journal of Human Development and Capabilities*, 14(2), 241–265.
- Louette, A. (2007). Sustainability Compendium: Social and Environmental Responsibility Management Tools. Sao Paolo, Brazil: Antakarana & Willis Harman House.
- Lu, J. L. (2008). Occupational hazards and illnesses of Filipino women workers in export processing zones. *International Journal of Occupational Safety and Ergonomics*, *14*(3), 333-342.

- Lu, W., Chau, K. W., Wang, H., & Pan, W. (2014). A decade's debate on the nexus between corporate social and corporate financial performance: a critical review of empirical studies 2002–2011. *Journal of Cleaner Production*, 79(2), 195-206.
- Lubin, D. A., & Esty, D. C. (2010). The sustainability imperative. *Harvard Business Review*, 88(5), 42–50.
- Lunau, T., Bambra, C., Eikemo, T. A., van der Wel, K. A., & Dragano, N. (2014). A balancing act? Work-life balance, health and well-being in European welfare states. *The European Journal of Public Health*, 24(3), 422-427.
- Lynch-Wood, G., Williamson, D., & Jenkins, W. (2009). The over-reliance on self-regulation in CSR policy. *Business Ethics: A European Review*, *18*(1), 52-65.
- MacKay*, C. J., Cousins, R., Kelly, P. J., Lee, S., & McCAIG, R. H. (2004). 'Management Standards' and work-related stress in the UK: Policy background and science. *Work & Stress*, *18*(2), 91-112.
- Mackinsey and Company. (2004, May 11). Assessing the Global Compact's Impact.

 Retrieved from http://europeandcis.undp.org/guides/poverty/spd/ras/mckinsey_report_gc.pdf
- Mahoney, L. S., Thorne, L., Cecil, L., & LaGore, W. (2013). A Research Note on Standalone Corporate Social Responsibility Reports: Signaling or Greenwashing. *Critical Perspectives on Accounting*, 24(4-5), 350-359.
- Mamtani, R., Lowenfels, A. B., Cheema, S., & Sheikh, J. (2014). Impact of migrant workers on the Human Development Index. *Perspectives in Public Health*, 134(1), 22–24.
- Manroop, L. (2015). Human resource systems and competitive advantage: an ethical climate perspective. *Business Ethics: A European Review*, 24(2), 186-204.
- Maon, F., Lindgreen, A., & Swaen, V. (2010). Organizational stages and cultural phases: A critical review and a consolidative model of corporate social responsibility development. *International Journal of Management Reviews*, *12*(1), 20-38.
- Marchand, A., Demers, A., & Durand, P. (2005). Does work really cause distress? The contribution of occupational structure and work organization to the experience of psychological distress. *Social Science & Medicine*, *61*(1), 1-14.
- Margolis, J. D., & Walsh, J. P. (2003). Misery loves companies: Rethinking social initiatives by business. *Administrative science quarterly*, 48(2), 268-305.

- Marmot, M. G., Bosma, H., Hemingway, H., Brunner, E., & Stansfeld, S. (1997). Contribution of job control and other risk factors to social variations in coronary heart disease incidence. *The Lancet*, *350*(9073), 235-239.
- Matrix Insight (2013). Economic analysis of workplace mental health promotion and mental disorder prevention programmes and of their potential contribution to EU health, social and economic policy objectives (Specific Request EAHC/2011/Health/19 for the Implementation of Framework Contract EAHC/2010/Health/01 Lot 2) Matrix Insight, Research commissioned by the European Agency for Health and Consumers. Retrieved from:
 - http://ec.europa.eu/health/mental_health/docs/matrix_economic_analysis_mh_promotion_en.pdf.
- Matten, D., & Crane, A. (2005) Corporate Citizenship: Toward An Extended Theoretical Conceptualization. *Academy of Management Review, 30(1),* 166-179
- Mazurkiewicz, P. (2004) Corporate Environmental Responsibility: is a common CSR framework possible? Washington D.C., USA: World Bank. Retrieved from http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2008/01/22/00002
 https://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2008/01/22/00002
 https://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2008/01/22/00002
 https://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2008/01/22/00002
 https://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2008/01/22/00002
 https://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2008/01/22/00002
 https://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2008/01/22/00002
 https://www.worldbank.org/external/default/
 https://www.worldbank.org/external/default/
 https://www.worldbank.org/external/default/
 https://www.worldbank.org/external/default/
 https://www.worldbank.org/external/default/
 <a href="https://www.worldbank.org/external/d
- McBarnet, D. (2009). Corporate Social Responsibility Beyond Law, Through Law, For Law: The New Corporate Accountability. In D. Mcbarnet, A. Voiculescu & T. Campbell (Eds.), *The New Corporate Accountability* (pp. 9-56). Cambridge: Cambridge University Press. Retrieved from http://papers.ssrn.com/sol3/papers.cfm?abstract_id=1369305
- McKague, K., and Cragg, W. (2007). *Compendium of Ethics Codes and Instruments of Corporate Responsibility*. Toronto, Canada: York University. Retrieved from http://www.yorku.ca/csr/files/file.php?fileid=fileCDOICwJiei&filename=file Codes Compendium Jan 2007.pdf
- McKee-Ryan, F., Song, Z., Wanberg, C. R., & Kinicki, A. J. (2005). Psychological and physical well-being during unemployment: a meta-analytic study. *Journal of applied psychology*, 90(1), 53.
- McWilliams, A., & Siegel, D. (2001). Corporate social responsibility: A theory of the firm perspective. *Academy of management review*, *26*(1), 117-127.
- McWilliams, A., Siegel, D. S., & Wright, P.M. (2006). Corporate Social Responsibility: Strategic Implications. *Journal of Management Studies*, *43(1)*, 1-18.

- Miao, Z., Cai, S., & Xu, D. (2012). Exploring the antecedents of logistics social responsibility: A focus on Chinese firms. *International Journal of Production Economics*, 140(1), 18-27.
- Michie, S., & Williams, S. (2003). Reducing work related psychological ill health and sickness absence: A systematic literature review. *Occupational and Environmental Medicine*, 60(1), 3-9.
- Milieu Consulting (2013). Occupational health concerns: Stress-related and psychological problems associated with work. European Parliament: Directorate-General for Internal Policies. Retrieved from European Parliament webpage http://www.europarl.europa.eu/RegData/etudes/etudes/join/2013/507455/IPOL-EMPL ET(2013)507455 EN.pdf
- Mills, P.R., Kessler, R.C., Cooper, J., & Sullivan, S. (2007). Impact of a health promotion program on employee health risks and work productivity. *American Journal of Health Promotion*, 22(1), 45-53.
- Min, J. Y., Park, S. G., Kim, S. S., & Min, K. B. (2014). Workplace injustice and self-reported disease and absenteeism in South Korea. *American Journal of Industrial Medicine*, *57*(1), 87-96.
- Ministerio de Salud, Dirección del Trabajo and Instituto de Seguridad Laboral (MINSAL, DT and ISL). (2011). Encuesta Nacional de Empleo, Trabajo, Salud y Calidad de Vida de los Trabajadores y Trabajadoras en Chile ENETS 2009-2010: Informe Interinstitucional [ENETS 2009-2010: First National Survey on Work, Health and Quality of Life of Chilean Workers: Interagency report]. Santiago, Chile: Instituto de Seguridad Laboral y Dirección del Trabajo, Gobierno de Chile. Retrieved from http://www.isl.gob.cl/wp-content/uploads/2011/09/Informe-Final-ENETS-Interinstitucional.pdf
- Ministerio de Salud. (2006). *II Encuesta de Calidad de Vida y Salud* [II Survey of Quality of Life and Health]. Santiago, Chile: Subsecretaría de Salud Pública, Gobierno de Chile. Retrieved from http://epi.minsal.cl/wp-content/uploads/2012/07/Informe-Final-Encuesta-de-Calidad-de-Vida-y-Salud-2006.pdf
- Ministry of Health, Labour, and Welfare (MHLW). (2011). Survey on the Prevention of Industrial Accidents. Tokyo: MHLW. Retrieved from http://www.mhlw.go.jp/toukei/list/dl/h23-46-50 121025 03.pdf
- Ministry of Health, Labour, and Welfare (MHLW). (2012). *Year Book of Labour Statistics* 2012. Tokyo: MHLW. Retrieved from http://www.mhlw.go.jp/english/database/db-yl/2012/05.html

- Miraglio, M., Hunter, P. Iucci, L., & Pinoargote, P. (2007). International Instruments and Corporate Social Responsibility. A Booklet to Accompany Training The Labour Dimension of CSR: from Principles to Practice. Geneve: Switzerland: International Labour Office. Retrieved from http://www.ilo.org/wcmsp5/groups/public/@ed emp/@emp ent/@multi/documents/instructionalmaterial/wcms 101247.pdf
- Montano, D., Hoven, H., & Siegrist, J. (2014). Effects of organisational-level interventions at work on employees' health: a systematic review. *BMC public health*, *14*(1), 135.
- Montero, M.J., Araque, R.A., & Rey, J.M. (2009). Occupational health and safety in the framework of Corporate Social Responsibility. *Safety Science*, *47*(10), 1440-1445.
- Moore, A., Parahoo, K., & Fleming, P. (2010). Managers' understanding of workplace health promotion within small and medium-sized enterprises: a phenomenological study. *Health Education Journal*, 70(1), 990-101.
- Morataya-Ávila, J. P., Monroy-Estrada, G., and Pineda, M. P. (2008). *IndiCARSE: Sistema de Indicadores de RSE para la Región Centroaméric*a. Guatemala: CARSE Red Centroamericana de la RSE. Retrieved from http://www.aedcr.com/required/descargaArchivo.php?des=48 libro indicarse.pdf
- Morse, J. (1998). What's wrong with random selection? [Editorial]. *Qualitative Health Research* 8(6), 733-735.
- Muller, A., & Kolk, A. (2010). Extrinsic and intrinsic drivers of corporate social performance: Evidence from foreign and domestic firms in Mexico. *Journal of Management Studies*, 47(1), 1-26.
- Nabe-Nielsen, K., Tüchsen, F., Christensen, K. B., Garde, A. H., & Diderichsen, F. (2009). Differences between day and nonday workers in exposure to physical and psychosocial work factors in the Danish eldercare sector. *Scandinavian journal of work, environment & health*, 35/(1), 48-55.
- Nahrgang, J.D., Morgenson, F.P., & Hofmann, D.A. (2011). Safety at work: A meta-analytic investigation of the link between job demands, job resources, burnout, engagement, and safety outcome. *Journal of Applied Psychology*, 96(1), 71-94.
- Naito, S. (2013). Workplace Bullying in Japan, in The Japan Institute for Labour Policy and Training (ed.): *Workplace Bullying and Harassment, JILPT REPORT No. 12*, 113-133. Tokyo: JILPT. Retrieved from http://www.jil.go.jp/english/reports/documents/jilpt-reports/no.12.pdf

- Nakao, M. (2010). Work-related stress and psychosomatic medicine. *BioPsychoSocial Medicine*, *4*(1), 4. Retrieved from http://www.biomedcentral.com/content/pdf/1751-0759-4-4.pdf
- National Institute for Occupational Safety and Health (NIOSH). (2002). The changing organisation of work and the safety and health of working people: Knowledge gaps and research directions. Cincinnati, OH: DHHS (NIOSH).
- National Institute for Occupational Safety and Health (NIOSH). (2004). *Worker Health Chartbook*. Cincinnati, OH: NIOSH Publications Dissemination. Retrieved from: http://www.cdc.gov/niosh/docs/2004-146/pdfs/2004-146.pdf
- National Institute for Occupational Safety and Health (NIOSH). (2012). What is Total Worker Health? Retrieved from http://www.cdc.gov/niosh/ twh/totalhealth.html
- Netterstrøm, B., Conrad, N., Bech, P., Fink, P., Olsen, O., Rugulies, R., & Stansfeld, S. (2008). The relation between work-related psychosocial factors and the development of depression. *Epidemiologic Reviews*, *30*(1), 118-132.
- Newell, P. (2006). Corporate Accountability and Citizen Action: Communities and Companies in India. In R. Mohanty & R. Tandon (Eds.), *Participatory Citizenship: Identity, Exclusion, Inclusion* (pp. 129-150). New Delhi: Sage.
- Niedhammer, I., Chastang, J. F., & David, S. (2008). Importance of psychosocial work factors on general health outcomes in the national French SUMER survey. *Occupational Medicine*, *58*(1), 15-24.
- Niedhammer, I., Chastang, J. F., Sultan-Taïeb, H., Vermeylen, G., & Parent-Thirion, A. (2013). Psychosocial work factors and sickness absence in 31 countries in Europe. *The European Journal of Public Health*, 23(4), 622-629.
- Niedhammer, I., Malard, L., & Chastang, J. F. (2015). Occupational factors and subsequent major depressive and generalized anxiety disorders in the prospective French national SIP study. *BMC public health*, *15*(1), 200.
- Niedhammer, I., Sultan-Taïeb, H., Chastang, J. F., Vermeylen, G., & Parent-Thirion, A. (2012). Exposure to psychosocial work factors in 31 European countries. *Occupational medicine*, *62*(3), 196-202.
- Niedhammer, I., Sultan-Taïeb, H., Chastang, J. F., Vermeylen, G., & Parent-Thirion, A. (2014). Fractions of cardiovascular diseases and mental disorders attributable to psychosocial work factors in 31 countries in Europe. *International archives of occupational and environmental health*, 87(4), 403-411.

- Niedhammer, I., Tek, M. L., Starke, D., & Siegrist, J. (2004). Effort-reward imbalance model and self-reported health: cross-sectional and prospective findings from the GAZEL cohort. *Social science & medicine*, *58*(8), 1531-1541.
- Nielsen, K., Randall, R., & Christensen, K.B. (2010). Developing new ways of evaluating organizational-level interventions. In J. Houdmont & S. Leka (Eds.) *Contemporary Occupational Health Psychology: Global perspectives on research and practice* (Vol. 1), pp. 21-45. Chichester, England: Wiley-Blackwell.
- Nisim, S., & Benjamin, O. (2008). Power and size of firms as reflected in cleaning subcontractors' practices of social responsibility. *Journal of Business Ethics*, 83(4), 673-683.
- Njå, O., & Fjelltun, S. H. (2010). Managers' attitudes towards safety measures in the commercial road transport sector. *Safety science*, *48*(8), 1073-1080.
- Nordestgaard, M., & Kirton-Darling, J. (2004). Corporate social responsibility within the European sectoral social dialogue. *Transfer: European Review of Labour and Research*, 10(3), 433-451.
- Norman, K., Floderus, B., Hagman, M., Toomingas, A., & Wigaeus Tornqvist, E. (2008). Musculoskeletal symptoms in relation to work exposures at call centre companies in Sweden. *Work: A journal of Prevention, Assessment and rehabilitation*, 30(2), 201-214.
- Nussbaum, M. (1995). Human Capabilities, Female Human Beings. In M. C. Nussbaum & J. Glover (Eds.), *Women, Culture, and Development: A Study of Human Capabilities* (pp. 61–104). Oxford: Oxford University Press.
- Nussbaum, M. (1999). Women and equality: The capabilities approach. *International Labour Review*, 138(3), 227–245.
- Nussbaum, M. (2000). Women's Capabilities and Social Justice. *Journal of Human Development*, 1(2), 219–247.
- Nyam, A. (2006). *National Occupational Safety and Health Profile of Mongolia*. Geneva:

 International Labour Organization. Retrieved from http://www.ilo.org/asia/whatwedo/publications/WCMS BK PB 303 EN/ILang--en/index.htm
- Öberseder, M., Schlegelmilch, B. B., & Murphy, P. E. (2013). CSR practices and consumer perceptions. *Journal of Business Research*, 66(10), 1839-1851.

- Oh, C. H., Park, J. H., & Ghauri, P. N. (2013). Doing right, investing right: Socially responsible investing and shareholder activism in the financial sector. *Business Horizons*, 56(6), 703-714.
- Okechukwu, C. A., Souza, K., Davis, K. D., & de Castro, A. B. (2014). Discrimination, harassment, abuse, and bullying in the workplace: Contribution of workplace injustice to occupational health disparities. *American journal of industrial medicine*, *57*(5), 573-586.
- Oldenziel, J. (2005). The added value of the UN Norms: A comparative analysis of the UN Norms for Business with existing international instruments. Amsterdam, The Netherlands: SOMO Centre for Research on Multinational Corporations.
- Organización Iberoamericana de Seguridad Social & Instituto Nacional de Seguridad e Higiene en el Trabajo (OISS & INSHT). 2012. *I Encuesta Centroamericana de Condiciones de Trabajo y Salud*. Madrid, Spain: OISS. Retrieved from http://oiss.org/estrategia/encuestas/lib/iecct/ENCUESTA DEFINITIVA IECCTS.pdf
- Organization for Economic Co-operation and Development (OECD). (2008). OCED Guidelines for Multinational Enterprises. Paris, France: OECD Publishing.
- Organization for Economic Co-operation and Development (OECD). (2009). Overview of Selected Initiatives and Instruments Relevant to Corporate Social Responsibility. In OECD (Ed.) *Annual Report on the OECD Guidelines for Multinational Enterprises 2008 Employment and Industrial Relations* (pp. 235-260). Paris, France: OECD Publishing.
- Organization for Economic Co-operation and Development (OECD). (2011). *OECD Guidelines for Multinational Enterprises*. Paris, France: OECD Publishing.
- Organization for Economic Co-operation and Development (OECD). (2012). Sick on the job?: myths and realities about mental health and work. Paris, France: OECD Publishing.
- Organization for Economic Co-operation and Development (OECD). (2014). *Preventing unemployment and underemployment from becoming structural*. Paris, France: OECD Publishing. Retrieved from http://www.oecd.org/g20/topics/employment-and-social-policy/OECD-Preventing-unemployment-and-underemployment-from-becoming-structural-G20.pdf
- Orlitzky, M., Schmidt, F. L., & Rynes, S. L. (2003). Corporate social and financial performance: A meta-analysis. *Organization studies*, *24*(3), 403-441.
- Owen, D.L. and O'Dwyer, B. (2008). Corporate Social Responsibility: The reporting and assurance dimension. In A. Crane, A. McWilliams, D. Matten, J. Moon, and D. Siegel

- (Eds.) The Oxford Handbook of Corporate Social Responsibility, (pp. 384-409). New York, USA: Oxford University Press.
- Oxenstierna, G., Ferrie, J., Hyde, M., Westerlund, H., & Theorell, T. (2005). Dual source support and control at work in relation to poor health. *Scandinavian journal of public health*, *33*(6), 455-463.
- Paine, L., Deshpande, R. Margolis, J.D., & Bettcher, K.E. (2005). Up to code: Does your company's conduct meet world-class standards? *Harvard Business Review*, 83(12), 122-133.
- Park, B. I., & Ghauri, P. N. (2015). Determinants influencing CSR practices in small and medium sized MNE subsidiaries: A stakeholder perspective. *Journal of World Business*, *50*(1), 192-204.
- Park, B. I., Chidlow, A., & Choi, J. (2014). Corporate social responsibility: Stakeholders influence on MNEs' activities. *International Business Review*, *23*(5), 966-980.
- Park, J. B., Nakata, A., Swanson, N. G., & Chun, H. (2013). Organizational factors associated with work-related sleep problems in a nationally representative sample of Korean workers. *International archives of occupational and environmental health*, 86(2), 211-222.
- Park, S. G., Min, K. B., Chang, S. J., Kim, H. C., & Min, J. Y. (2009). Job stress and depressive symptoms among Korean employees: the effects of culture on work. *International archives of occupational and environmental health*, 82(3), 397-405.
- Parra, C. M. (2008). Quality of Life Markets: Capabilities and Corporate Social Responsibility. *Journal of Human Development*, 9(2), 207–227.
- Pavalko, E. K., Mossakowski, K. N., & Hamilton, V. J. (2003). Does perceived discrimination affect health? Longitudinal relationships between work discrimination and women's physical and emotional health. *Journal of Health and social Behavior*, 44(1), 18-33.
- Pedersen, E. R. (2010). Modelling CSR: How managers understand the responsibilities of business towards society. *Journal of Business Ethics*, *91*(2), 155-166.
- Pejtersen, J. H., & Kristensen, T. S. (2009). The development of the psychosocial work environment in Denmark from 1997 to 2005. *Scandinavian journal of work, environment & health*, *35*(4), 284-293.

- Peltzer, K., Shisana, O., Zuma, K., Van Wyk, B., & Zungu-Dirwayi, N. (2009). Job stress, job satisfaction and stress-related illnesses among South African educators. *Stress and Health*, *25*(3), 247-257.
- Perrini, F. & Russo, A. (2010). Investigating Stakeholder Theory and Social Capital: CSR in Large Firms and SMEs. *Journal of Business Ethics*, *91*, 207–221
- Perrini, F., Pogutz, S. & Tencati, A. (2006). *Developing Corporate Social Responsibility: A European Perspective*. Edward Elgar Publishing, Cheltenham, UK.
- Phillips, R, Freeman R. E., & Wicks, A. C. (2003). What Stakeholder Theory Is Not. *Business Ethics Quarterly*, 13(4), 479-502.
- Pohlman, J. T., & Leitner, D. W. (2003). A comparison of ordinary least squares and logistic regression. *Ohio Journal of Science*, *103*(5) (2003), 118–125
- Porter, M., & Kramer, M. R. (2006). Strategy & Society The Link Between Competitive Advantage and Corporate Social Responsibility. *Harvard Business Review*, 84(1), 78-92.
- Porter, M., & Kramer, M. R. (2011). Creating Shared Value. *Harvard Business Review,* 89(1/2), 1-17.
- Preuss, L., Haunschild, A. and Matten, D. (2009). The rise of CSR: implications for HRM and employee representation. *The International Journal of Human Resource Management* 20(4), 959-973.
- Prieto-Carrón, M., Lund-Thomsen, P., Chan, A., Muro, A., & Bhushan, C. (2006). Critical Perspectives on CSR and Development: What we Know, What we Don't Know and What we Need to Know. *International Affairs*, 85(2), 977-987.
- Puig-Barrachina, V., Vanroelen, C., Vives, A., Martínez, J. M., Muntaner, C., Levecque, K., ... & Louckx, F. (2014). Measuring employment precariousness in the European Working Conditions Survey: the social distribution in Europe. Work AJ Prev Assess Rehabil, 49, 143-161.
- Puttonen, S., Härmä, M., & Hublin, C. (2010). Shift work and cardiovascular disease—pathways from circadian stress to morbidity. *Scandinavian journal of work, environment & health*, 96-108.
- Quinlan, M., & Bohle, P. (2009). Overstretched and unreciprocated commitment: reviewing research on the occupational health and safety effects of downsizing and job insecurity. *International Journal of Health Services*, 39(1), 1-44.

- Raj-Reichert, G. (2013). Safeguarding labour in distant factories: Health and safety governance in an electronics global production network. *Geoforum*, 44(1), 23-31.
- Rasche, A. (2009). Toward a Model to Compare and Analyze Accountability Standards The Case of the UN Global Compact. *Corporate Social Responsibility and Environmental Management*, 16(4), 192–205.
- Rasche, A. (2010). The limits of corporate responsibility standards. *Business Ethics: A European Review, 19*(3), 280-291.
- Renouard, C. (2011). Corporate Social Responsibility, Utilitarianism, and the Capabilities Approach. *Journal of Business Ethics*, *98*(1), 85–97.
- Reuter, C., Goebel, P., & Foerstl, K. (2012). The impact of stakeholder orientation on sustainability and cost prevalence in supplier selection decisions. *Journal of Purchasing and Supply Management*, 18(4), 270-281.
- Rhoades, L., & Eisenberger, R. (2002). Perceived organizational support: a review of the literature. *Journal of applied psychology*, *87*(4), 698.
- Ridge, M., Bell, M., Kossykh, Y. & Woolley, N. (2008). *An empirical analysis of the effect of health on aggregate income and individual labour market outcomes in the UK*. (Research Report 639, Health & Safety Executive). Sudbury, UK: HSE.
- Ripa, D. & Jain, A. (2014, April). *An analysis of the coverage of psychosocial factors at work in Corporate Social Responsibility standards*. Paper presented at the 13th European Academy of Occupational Health Psychology Conference, London, UK. Abstract retrieved from http://www.eaohp.org/uploads/1/1/0/2/11022736/eaohp2014 book of proceedings.p
- Ripa, D., & Herrero, J. H. (2012). Corporate Social Responsibility: Standards and Instruments. In A. Jain, B. B. Puplampu, K. Amponsah-Tawiah & N. J. A. Andreou (Eds.), Occupational Safety & Health and Corporate Social Responsibility in Africa: Repositioning Corporate Responsibility Towards National Development (pp. 71-87). Cranfield, UK: Cranfield Press.
- Ripa, D., Herrero, J. and Gracia, E. (2010, July). Análisis de los indicadores e instrumentos utilizados en la medición de los aspectos psicosociales y comunitarios de la Responsabilidad Social Corporativa [Poster]. VII Congreso Iberoamericano de Psicología, Oviedo, Spain.

- Ripa, D., Jain, A., Herrero, J., & Leka, S. (2012, April). *Corporate Social Responsibility instruments and tools to measure psychosocial health and Occupational Health and Safety at work*. Paper presented at the 12th European Academy of Occupational Health Psychology Conference, Zurich, Switzerland. Abstract retrieved from http://www.eaohp.org/uploads/1/1/0/2/11022736/eaohp2012 book of proceedings 2012.pdf
- Ripa, D., Jain, A., Herrero, J., & Leka, S. (2012, March). *Good psychosocial practices at work: A thematic analysis of Corporate Social Responsibility tools and instruments.*Paper presented at the 30th Congress of the International Commission on Occupational Health, ICOH, Cancun, Mexico. Abstract retrieved from https://icoh.confex.com/icoh/2012/webprogram/Handout/id279/FP31.4 A1298.pdf
- Ripa, D., Jain, A., Leka, S., & Herrero, J. (2013, May). *Analyzing the Relationship Between Employers' External Image and OSH Initiatives in Europe*. Paper presented at 10th International Conference on Occupational Stress and Health NIOSH, Los Angeles, USA. Abstract retrieved from http://www.apa.org/wsh/program/2013-abstracts.zip
- Ritchie J., & Spencer J. (1994). Qualitative data analysis for applied policy research. In A. Bryman, & R.G. Burgess (Eds.), *Analysing qualitative data* (pp.173-194). London: Routledge.
- Robeyns, I. (2003). Sen's Capability Approach and Gender Inequality: Selecting Relevant Capabilities. *Feminist Economics*, 9(2-3), 61-92.
- Rugulies, R., & Krause, N. (2008). Effort–reward imbalance and incidence of low back and neck injuries in San Francisco transit operators. *Occupational and environmental medicine*, 65(8), 525-533.
- Rugulies, R., Aust, B., Burr, H., & Bültmann, U. (2008). Job insecurity, chances on the labour market and decline in self-rated health in a representative sample of the Danish workforce. *Journal of Epidemiology and Community Health*, 62(3), 245-250.
- Rugulies, R., Bültmann, U., Aust, B., & Burr, H. (2006). Psychosocial work environment and incidence of severe depressive symptoms: prospective findings from a 5-year follow-up of the Danish work environment cohort study. *American Journal of Epidemiology*, 163(10), 877-887.
- Rydstedt, L. W., Johansson, G., & Evans, G. W. (1998). A longitudinal study of workload, health and well-being among male and female urban bus drivers. *Journal of occupational and organizational psychology*, 71(1), 35-45.
- Saastamoinen, P., Laaksonen, M., Leino-Arjas, P., & Lahelma, E. (2009). Psychosocial risk factors of pain among employees. *European Journal of Pain*, *13*(1), 102-108.

- Safe Work Australia (2012). The cost of work-related injury and illness for Australian employers, workers and the community: 2008–09. Canberra: Safe Work Australia. Retrieved from http://www.safeworkaustralia.gov.au/sites/swa/about/publications/pages/cost-injury-illness-2008-09
- Safe Work Australia (2013). The incidence of accepted workers' compensation claims for mental stress in Australia. Canberra, Safe Work Australia. Retrieved from http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/769/T he-Incidence-Accepted-WC-Claims-Mental-Stress-Australia.pdf
- Safe Work Australia (2014). *Australian Workers' Compensation Statistics, 2012–13*.

 Canberra: Safe Work Australia . Retrieved from http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/897/a ustralian-workers-compensation-statistics-2012-13.pdf
- Safe Work Australia (2015a). *Key Work Health and Safety Statistics, Australia, 2015*.

 Retrieved from http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/910/key-whs-stat-2015.pdf
- Safe Work Australia (2015b). *Psychosocial health and safety and bullying in Australian workplaces: Indicators from accepted workers' compensation claims.* (Annual Statement, 2nd Edition). Retrieved from http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/857/Psychosocial-bullying-statement.pdf
- Saijo, Y., Ueno, T., & Hashimoto, Y. (2008). Twenty-four-hour shift work, depressive symptoms, and job dissatisfaction among Japanese firefighters. *American journal of industrial medicine*, *51*(5), 380-391.
- SAM Research. (2009/2011). *Corporate Sustainability Assessment Questionnaire*. Zurich: SAM Research AG. Retrieved from http://www.sustainability-index.com/07_htmle/assessment/infosources.html
- Sánchez-Toledo, A. Fernández, B., Montes, J.M. & Vázquez, C.J. (2009). Spanish survey reveals motivations, obstacles and benefits of OHSAS 18001 certification. *ISO Management Systems July-August*, pp. 35-40.

- Schuler, D. A., & Cording, M. (2006). A corporate social performance–corporate financial performance behavioral model for consumers. *Academy of Management Review*, *31*(3), 540-558.
- Schwartz, M. S., & Carroll, A. B. (2003). Corporate social responsibility: A three-domain approach. *Business Ethics Quarterly*, *13*(4), 503-530.
- Segal, J. P., Sobczak, A., & Triomphe, C. E. (2003). *CSR and working conditions*. Dublin, Ireland: European Foundation for the Improvement of Living and Working Conditions. Retrieved

 from http://eurofound.europa.eu/sites/default/files/ef files/pubdocs/2003/28/en/1/ef0328e
 n.pdf
- Sen, A. (1995). Gender Inequality and Theories of Justice 1. In M. C. Nussbaum & J. Glover (Eds.), *Women, Culture, and Development: A Study of Human Capabilities* (pp. 259–273). Oxford: Oxford University Press.
- Sen, A. (1999). Development as freedom. New York: Oxford University Press
- Sen, A. (2003). Development as Capability Expansion. In S. Fukuda-Parr & A. S. Kumar (Eds.), *Readings in Human Development: Concepts, Measures and Policies for a Development Paradigm* (pp. 41–58). New Delhi; New York: Oxford University Press.
- Sen, A. (2005). Human Rights and Capabilities. *Journal of Human Development, 6,* 151–166.
- Seuring, S. (2013). A review of modeling approaches for sustainable supply chain management. *Decision support systems*, *54*(4), 1513-1520.
- Shields, M. (2006). Stress and depression in the employed population. *Health Reports*, 17(4), 11-29.
- Siegrist, J. (1996). Adverse health effects of high-effort/low-reward conditions. *Journal of Occupational Health Psychology*, 1(1), 27–41.
- Siegrist, J., Starke, D., Chandola, T., Godin, I., Marmot, M., Niedhammer, I., & Peter, R. (2004). The measurement of effort-reward imbalance at work: European comparisons. *Social science & medicine*, *58*(8), 1483-1499.
- Simmons, L. A., & Swanberg, J. E. (2009). Psychosocial work environment and depressive symptoms among US workers: comparing working poor and working non-poor. *Social psychiatry and psychiatric epidemiology*, *44*(8), 628-635.
- Siu, O. L., Phillips, D. R., & Leung, T. W. (2003). Age differences in safety attitudes and safety performance in Hong Kong construction workers. *Journal of Safety Research*, *34*(2), 199-205.

- Slany, C., Schütte, S., Chastang, J. F., Parent-Thirion, A., Vermeylen, G., & Niedhammer, I. (2014). Psychosocial work factors and long sickness absence in Europe. *International journal of occupational and environmental health*, 20(1), 16-25.
- SLIC- The Committee of Senior Labour Inspectors (SLIC) (2012). *Psychosocial risk assessments SLIC Inspection Campaign 2012*. Available from: http://www.av.se/dokument/inenglish/European Work/Slic 2012/SLIC2012 Final report.pdf
- Smith, A. (2000). The scale of perceived occupational stress. *Occupational Medicine*, *50*(5), 294-298.
- Sobeih, T., Salem, S., Genaidy, A., Daraiseh, N., & Shell, R. (2006). Psychosocial factors and musculoskeletal disorders in the construction industry: A systematic review. Theoretical Issues in Ergonomics Science, 7(3), 329-344
- Social Accountability International (SAI). (2004). *Guidance Document for Social Accountability 8000 (SA8000)*. New York: SAI. Retrieved from http://www.sa-intl.org/data/n-0001/resources/live/2004SAIGuidanceFinal.pdf
- Social Accountability International (SAI). (2008). *Social Accountability 8000: International Standard SA8000:2008*. New York: SAI. Retrieved from http://www.sa-intl.org/data/n-0001/resources/live/2008StdEnglishFinal.pdf
- Sowden, P., & Sinha, S. (2005). *Promoting health and safety as a key goal of the corporate social responsibility agenda*. Sudbury, UK: HSE Books.
- Sparks, K., Cooper, C., Fried, Y., & Shirom, A. (1997). The effects of hours of work on health: A meta-analytic review. *Journal of occupational and organizational psychology*, 70(4), 391.
- Sparks, K., Faragher, B. and Cooper, C. L. (2001), Well-being and occupational health in the 21st century workplace. *Journal of Occupational and Organizational Psychology*, 74, 489–509. doi: 10.1348/096317901167497
- Standing, G. (2007). *Decent workplaces, self-regulation and CSR: From puff to stuff*? UN DESA Working Paper No. 62. New York: United Nations Department of Economic and Social Affairs.
- Stansfeld, S. A., Fuhrer, R., Shipley, M. J., & Marmot, M. G. (1999). Work characteristics predict psychiatric disorder: prospective results from the Whitehall II Study. *Occupational and environmental medicine*, *56*(5), 302-307.

- Stanton, E. A. (2007). *The human development index: A history* (PERI Working Papers, 85). Amherst: University of Massachussets. Retrieved from http://scholarworks.umass.edu/cgi/viewcontent.cgi?article=1101&context=peri_workingpapers
- Statistics Canada. (2009). *Stress and well-being. Health Reports* (Canada, Statistics Canada Catalogue).
- Steiber, N. (2009). Reported levels of time-based and strain-based conflict between work and family roles in Europe: A multilevel approach. *Social Indicators Research*, *93*(3), 469-488.
- Stewart, F. (2013). *Capabilities and Human Development: Beyond the individual the critical role of social institutions and social competencies* (UNDP-HDRO Occasional Papers, No. 03).
- Stevens, J. P. (2012). *Applied multivariate statistics for the social sciences*. London: Routledge.
- Sultan-Taïeb, H., Chastang, J. F., Mansouri, M., & Niedhammer, I. (2013). The annual costs of cardiovascular diseases and mental disorders attributable to job strain in France. *BMC public health*, *13*(1), 748.
- Sundin, L., Hochwälder, J., Bildt, C., & Lisspers, J. (2007). The relationship between different work-related sources of social support and burnout among registered and assistant nurses in Sweden: a questionnaire survey. *International Journal of Nursing Studies*, 44(5), 758-769.
- Sutherland, V.J., & Cooper, C.L. (2000). *Strategic Stress Management: an Organizational approach*. New York: Palgrave.
- Taneja, S. S., Taneja, P. K., and Gupta, R. J. (2011). Researches in Corporate Social Responsibility: A Review of Shifting Focus, Paradigms, and Methodologies. *Journal of Business Ethics*, 101(3), 343-364.
- Tasho, W., Jordan, J., & Robertson, I. (2005). Case Study: Establishing the business case for investing in stress prevention activities and evaluating their impact on sickness absence levels. Sudbury, UK: HSE Books.
- Tate, W. L., Ellram, L. M., & Kirchoff, J. F. (2010). Corporate Social Responsibility reports: A thematic analysis related to supply chain management. *Journal of Supply Chain Management*, 46(1), 19-44.
- Tencati, T. Perrini, F., and Pogutz, S. (2004). New Tools to Foster Corporate Socially Responsible Behavior. *Journal of Business Ethics*, *53*(1-2), 173–190.

- Tennant, C. (2001). Work-related stress and depressive disorders. *Journal of Psychosomatic Research*, *51*(5), 697–704.
- Tetrick, L.E., & Qucik, J.C. (2003). Prevention at Work: Public Health in Occupational settings (pg. 3-18). In J.C. Quick & L.E. Tetrick *Handbook of Occupational Health Psychology* (pg. 3-18). Washington: American Psychology Association.
- The Leon H. Sullivan Foundation (1999). *The Global Sullivan Principles of Corporate Social Responsibility*. Retrieved from http://thesullivanfoundation.org/about/global-sullivan-principles
- The Sigma Project (2006). *The Sigma Guidelines- Toolkit: Sigma guide to sustainability issues*. Retrieved from http://www.projectsigma.co.uk/Toolkit/SustainabilityIssuesGuide.pdf
- Thomas, D. (2006). A General Inductive Approach for Analyzing Qualitative Evaluation Data. *American Journal of Evaluation*, 27(2), 237-246.
- Thompson, L. J. (2008). Gender equity and corporate social responsibility in a post-feminist era. *Business Ethics: A European Review, 17*(1), 87–106.
- Toch, M., Bambra, C., Lunau, T., van der Wel, K. A., Witvliet, M. I., Dragano, N., & Eikemo, T. A. (2014). All part of the job? The contribution of the psychosocial and physical work environment to health inequalities in Europe and the European health divide. *International Journal of Health Services*, 44(2), 285-305.
- Touboulic, A., & Walker, H. (2015). Theories in sustainable supply chain management: a structured literature review. *International Journal of Physical Distribution & Logistics Management*, 45(1/2), 16-42.
- Tunlid, S. (2014). Work-family conflict in Sweden and Germany: A study on the association with self-rated health and the role of gender attitudes and family policy.
- Udayasankar, K. (2008). Corporate social responsibility and firm size. *Journal of Business Ethics*, 83(2), 167-175.
- Umehara, K., Ohya, Y., Kawakami, N., Tsutsumi, A., & Fujimura, M. (2007). Association of work-related factors with psychosocial job stressors and psychosomatic symptoms among Japanese pediatricians. *Journal of Occupational Health*, 49(6), 467-481.
- Umlas, E. (2009). Corporate Human Rights Reporting: An Analysis of Current Trends. Amsterdam, The Netherlands: GRI.

- Unión General de Trabajadores (UGT). (2013). Costes Socio-Económicos de los Riesgos Psicosociales Balance de situación actual y propuestas metodológicas para avanzar en su medición o cálculo. Madrid, Spain: Secretaría de Salud Laboral y Medio Ambiente UGT-CEC. Retrieved from http://www.observatorio-rse.org.es/Publicaciones/GuiaCostes.pdf
- United Nations (UN) (2000). The Ten Principles of the United Nations Global Compact.

 Retrieved from http://www.unglobalcompact.org/abouttheqc/thetenprinciples/index.html
- United Nations (UN) General Assembly (2007). Business and Human Rights: Mapping International Standards of Responsibility and Accountability for Corporate Acts. Report of the Special Representative of the Secretary-General (SRSG) on the issue of human rights and transnational corporations and other business enterprises. Human Rights Council, Fourth Session, 9 February. Retrieved from www.business-humanrights.org/Documents/SRSG-report-Human-Rights-Council-19-Feb-2007.pdf
- United Nations (UN) Office of the High Commissioner (2011) UN Guiding Principles on Business and Human Rights: Implementing the United Nations "Protect, Respect and Remedy" Framework. New York and Geneva: United Nations.
- Vahtera, J., Pentti, J., & Kivimäki, M. (2004). Sickness absence as a predictor of mortality among male and female employees. *Journal of Epidemiology & Community Health*, 58(4), 321–326.
- van den Berg, T.I.J., Elders, L.A.M., de Zwart, B.C.H., & Burdorf, A. (2009). The effects of work-related and individual factors on the Work Ability Index: A systematic review. *Occupational and Environmental Medicine*, 66(4), 211-220.
- Van Gyes, G., & Szekér, L. (2013). *Impact of the Crisis on European Working Conditions:*Assembling National Trends and Reports. Dublin: Eurofound.
- Van Oosterhout, J. V. & Heugens, P. P. (2008). Much Ado about Nothing. A conceptual critique of CSR. In A. Crane, A. McMilliams, D. Matten, J. Moon & D. S. Siegel (Eds.), *The Oxford Handbook of Corporate Social Responsibility, pp. 197-223*. New York: Oxford University Press.
- Vedung, E. (1998). Policy instruments: typologies and theories. In M-L. Bemelmans-Videc, R.C.Rist and E. Vedung (Eds.), *Carrots, Sticks, and Sermons: Policy Instruments and Their Evaluation* (pp. 21-58). New Brunswick, NJ: Transaction Publishers.

- Veríssimo, J., & Lacerda, T. (2015). Does integrity matter for CSR practice in organizations? The mediating role of transformational leadership. *Business Ethics: A European Review*, 24(1), 34-51.
- Vilanova, M. Lozano, J.M., and Dinares, M. (2006). *Accountability: Comunicación y reporting en el ámbito de la RSE*. Madrid: Cuadernos Forética, 6.
- Virtanen, M., Heikkilä, K., Jokela, M., Ferrie, J. E., Batty, G. D., Vahtera, J., & Kivimäki, M. (2012). Long working hours and coronary heart disease: a systematic review and meta-analysis. *American journal of epidemiology*, *176*(7), 586-596.
- Virtanen, M., Kivimäki, M., Joensuu, M., Virtanen, P., Elovainio, M., & Vahtera, J. (2005). Temporary employment and health: a review. *International journal of epidemiology*, 34(3), 610-622.
- Virtanen, P., Vahtera, J., Kivimäki, M., Pentti, J., & Ferrie, J. (2002). Employment security and health. *Journal of epidemiology and community health*, *56*(8), 569-574.
- Viswesvaran, C., Sanchez, J. I., & Fisher, J. (1999). The role of social support in the process of work stress: A meta-analysis. *Journal of vocational behaviour*, *54*(2), 314-334.
- Vogel, D. (2006). Preface in Perrini, Francesco, Pogutz, Stefano, and Tencati, Antonio (2006) *Developing Corporate Social Responsibility: A European Perspective*.

 Northampton, MA: Edward Elgar Publishing
- Vogel, D. (2007). The market for virtue: The potential and limits of corporate social responsibility. Washington D.C.: Brookings Institution Press.
- Vogt, C. P. (2005). Maximizing human potential: Capabilities theory and the professional work environment. *Journal of Business Ethics*, *58*(1), 111–123.
- Vuontisjärvi, T. (2006). Corporate Social Reporting in the European Context and Human Resource Disclosures: An Analysis of Finnish Companies. *Journal of Business Ethics*, 69(4), 331-354.
- Vyas, M. V., Garg, A. X., Iansavichus, A. V., Costella, J., Donner, A., Laugsand, L. E., ... Hackam, D. G. (2012). Shift work and vascular events: systematic review and meta-analysis. *Bmj*, *345*, e4800.
- Waddock, S. (2008). Building a new institutional infrastructure for Corporate Responsibility. *Academy of Management Perspectives, 22(3),* 87-108.

- Wagner, T., Bicen, P., & Hall, Z. R. (2008). The dark side of retailing: towards a scale of corporate social irresponsibility. *International Journal of Retail & Distribution Management*, 36(2), 124-142.
- Walsh, G., Mitchell, V. W., Jackson, P. R., & Beatty, S. E. (2009). Examining the antecedents and consequences of corporate reputation: A customer perspective. *British Journal of Management*, 20(2), 187-203.
- Walters, D. (2011). Worker representation and psycho-social risks: A problematic relationship?. *Safety Science*, *49*(4), 599-606.
- Walters, D. and Nichols, T. (2007) *Worker Representation and Workplace Health and Safety*. Basingstoke: Palgrave Macmillan.
- Walters, D., & James, P. (2011). What motivates employers to establish preventive management arrangements within supply chains?. *Safety Science*, *49*(7), 988-994.
- Wang, X. S., Armstrong, M. E. G., Cairns, B. J., Key, T. J., & Travis, R. C. (2011). Shift work and chronic disease: the epidemiological evidence. *Occupational medicine*, *61*(2), 78-89.
- Webley, S., & More, E. (2003). *Does business ethics pay: Ethics and Financial performance.*London, UK: The Institute of Business Ethics. Retrieved from www.ibe.org.uk/userfiles/doesbus ethicpaysumm.pdf
- Welford, R., Chan, C., & Man, M. (2008). Priorities for corporate social responsibility: a survey of businesses and their stakeholders. *Corporate Social Responsibility and Environmental Management*, 15, 52-62. doi: 10.1002/csr.166
- Werhane, P. H. (2010). From the founding Editor: Principles and Practices for Corporate Responsibility. *Business Ethics Quarterly*, *20(4)*, 695-701.
- Westerlund, H., Theorell, T., & Alfredsson, L. (2004). Organizational instability and cardiovascular risk factors in white-collar employees. *The European Journal of Public Health*, 14(1), 37-42.
- Wick, I. (2005). Workers' tool or PR ploy? A guide to codes of international labour practice. Friedrich-Ebert-Stiftung and Institut für Ökonomie und Ökumene, Siegburg and Bonn, Germany.
- Wiezer, N., Nielsen, K., Pahkin, K., Widerszal-Bazyl, M., de Jong, T., Mattila-Holappa, P., and Mockallo, Z., (2011). *Exploring the link between restructuring and employee wellbeing*. Warsaw, Poland: Central Institute for Labour Protection, National Research Institute.

- Wood, D. J. (1991). Corporate Social Performance Revisited. *Academy of Management Review*, *16*(4), 691-718.
- Wood, D. J. (2010). Measuring Corporate Social Performance: A Review. *International Journal of Management Reviews*, 12(1), 50-84.
- Wooten, L. P. (2008). Guest editor's note: Breaking barriers in organizations for the purpose of inclusiveness. *Human Resource Management*, *42*(2), 191-197.
- World Business Council for Sustainable Development (WBCSD). (2000). *CSR: Meeting changing expectations*. Geneva: WBCSD.
- World Business Council for Sustainable Development and International Finance Corporation (WBCSD and IFC). (2008). *Measuring Impact Framework Methodology: Understanding the business contribution to society.* Geneva: WBCSD & IFC. Retrieved from http://www.wbcsd.org/work-program/development/measuring-impact.aspx
- World Commission on Environment & Development (1987). *Our common Future: Report of the World Commission on Environment and Development*. Oxford: Oxford University Press.
- World Health Organisation (WHO). (2008). PRIMA-EF: Guidance on the European Framework for Psychosocial Risk Management: A Resource for Employers and Worker Representatives. (Protecting workers' health series, no. 9.) Geneva: World Health Organisation.

 Retrieved from http://www.who.int/occupational health/publications/Protecting Workers Health Series No 9/en/index.html
- World Health Organization (WHO). (2002). World Health Report 2002 Reducing risks, promoting healthy life. Geneva: World Health Organization.
- World Health Organization (WHO). (2003). Work organization and stress. Geneva: World Health Organization.
- World Health Organization (WHO). (2007). Raising Awareness of Stress at Work in Developing Countries: A modern hazard in a traditional working environment. Advice to employer and worker representatives. (Protecting Workers' Health Series No. 6). Geneve, Switzerland: World Health Organization.
- World Health Organization (WHO). (2010). *Healthy workplaces: a model for action for employers, workers, policy-makers and practitioners*. Geneva: World Health Organization.

- Xu, X., & Gursoy, D. (2015). A conceptual framework of sustainable hospitality supply chain management. *Journal of Hospitality Marketing & Management*, *24*(3), 229-259.
- Yang, H., Schnall, P. L., Jauregui, M., Su, T. C., & Baker, D. (2006). Work hours and self-reported hypertension among working people in California. *Hypertension*, *48*(4), 744-750.
- Yiengprugsawan, V., Strazdins, L., Lim, L. L. Y., Kelly, M., Seubsman, S. A. & Sleigh, A. C. (2015). Physically and psychologically hazardous jobs and mental health in Thailand. *Health promotion international*, 30(3), 531-541.
- Yoo, C. Y., & Pae, J. (in press). Corporate Charitable Contributions: Business Award Winners' Giving Behaviors. *Business Ethics: A European Review*.
- Zheng, Q., Luo, Y., & Maksimov, V. (2014). Achieving legitimacy through corporate social responsibility: The case of emerging economy firms. *Journal of World Business*, *50*(3), 3898-403.
- Zwetsloot, G. I. J. M. (2003). From Management Systems to Corporate Social Responsibility. *Journal of Business Ethics*, *44*(2-3), 201-207.
- Zwetsloot, G. I. J. M., & Leka, S. (2010). Corporate culture, health, and well-being. In S. Leka & J. HOudmont (Eds.) *Occupational Health Psychology*, (pp.250-268). Oxford: Balckwell-Wioley.
- Zwetsloot, G. I., Aaltonen, M., Wybo, J. L., Saari, J., Kines, P., & De Beeck, R. O. (2013). The case for research into the zero accident vision. *Safety science*, *58*(1), 41-48.
- Zwetsloot, G.I.J.M. & Ripa, D. (2012). Corporate Social Responsibility and Safety and Health at Work Changing Business Responsibilities in a Turbulent Environment. In A.K. Jain, B.B. Puplampu, K Amponsah-Tawiah & N.J.A Andreou (Eds), *Occupational Safety & Health and Corporate Social Responsibility in Africa: Repositioning Corporate Social Responsibility Towards National Development* (pp. 53-74). Cranfield, Bedfordshire: Cranfield Press.

10. CONCLUSIONES (Castellano)

Esta investigación presenta las siguientes conclusiones:

- 1. El análisis de los estándares de Responsabilidad Social Corporativa (RSC) ha mostrado que incluyen las áreas fundamentales de los derechos humanos y laborales (horarios de trabajo, seguridad y salud en el trabajo, sistema de representación de los trabajadores, erradicación del trabajo infantil y del trabajo forzoso, eliminación de la violencia en el trabajo y de la discriminación), en concordancia con los estándares y regulaciones laborales internacionales. Lamentablemente, en muchos países, especialmente en los países en desarrollo, no se ha ratificado todavía la legislación internacional, por lo que sus legislaciones nacionales no cubren muchas de las áreas anteriores. En este caso, un enfoque voluntario dentro de las empresas, como el que permite el implementar los estándares de RSC, puede ayudar a promover buenas prácticas en el trabajo (Estudio 1, parte 1).
- 2. El análisis de los estándares de RSC ha mostrado que incluyen nuevas áreas y temas relacionados con la seguridad y salud en el trabajo y el bienestar psicosocial, con requerimientos para las empresas que van más allá de la legislación básica internacional en materia de derechos fundamentales. Algunos ejemplos encontrados en esta investigación incluyen políticas adecuadas y justas en materia de recursos humanos (p. ej.: selección de personal, promoción, formación, salarios, despidos) y acciones dirigidas a atender las necesidades de los grupos más vulnerables, para las que algunos estándares de RSC plantean acciones específicas (ej.: diseñar un perfil de diversidad en la organización, declaraciones y políticas organizacionales, evitar la discriminación en las políticas de recursos humanos, políticas de

discriminación positiva, mecanismos de protección y presentación de quejas o denuncias en casos de discriminación, sensibilización, etc.), y fomentar la empleabilidad de los trabajadores y su aprendizaje a lo largo de su vida, fomentando un envejecimiento activo (Estudio 1, Parte 1). En relación a los riesgos psicosociales, los factores de riesgo psicosocial relativos a horarios de trabajo, control sobre el trabajo, medio ambiente físico y equipamientos, desarrollo profesional y relación entre el trabajo y el hogar aparecen en al menos varios estándares de RSC. Desde este punto de vista, es esperable que la implementación de políticas de RSC en las organizaciones puede incrementar el desarrollo de unas condiciones de trabajo justas y el bienestar de los trabajadores a nivel mundial.

3. Mientras todos los estándares de RSC analizados en nuestra investigación incluían ampliamente las cuestiones relacionadas con la seguridad y salud en el trabajo (SST) (formación, participación, prevención, cultura de SST, protección, acciones para evaluar y remediar los errores detectados, sistemas de gestión integrales, combatir los incumplimientos legales detectados, implementar buenas prácticas en SST), otras áreas de las condiciones de trabajo presentan una cobertura más limitada dentro de estos estándares de RSC. En relación a los factores de riesgo psicosocial, no hay apenas cobertura en los estándares de RSC de los factores relacionados con el contenido del trabajo (como falta de variedad en el trabajo, falta de significado o tareas fragmentadas sin sentido, tareas por debajo de las destrezas del trabajador), y de los factores relativos al rol organizacional (como ambigüedad de rol, conflicto de rol o responsabilidad sobre otras personas). En sub-temas específicos, como cultura y funcionamiento organizacional, el foco de los estándares de RSC está en evitar la discriminación, mientras que en lo relativo a factores de riesgo como relaciones interpersonales en el trabajo, su

cobertura se limitaba a acoso laboral, bullying y violencia en el trabajo y, parcialmente, a aislamiento físico y social. Factores de riesgo como el ritmo de trabajo, bajos niveles de apoyo en resolución de problemas y desarrollo profesional, pobres relaciones con los superiores, o falta de apoyo social, no fueron apenas encontrados en la revisión realizada de estándares de RSC. Dada esta evidente disparidad, se desarrolló un marco de evaluación que incluía 6 áreas, 30 temas y 99 subtemas. Posteriormente, este marco de evaluación fue testeado en una muestra global de 100 compañías que implementaron iniciativas de RSC y que se encontraban dentro del índice FT500. Este marco de evaluación incluye una visión comprehensiva de las áreas relativas a las condiciones de trabajo abordadas en los estándares de RSC (Estudio 1, Parte 1).

4. Después de aplicar el marco de evaluación a 100 compañías globales del FT500 Index, se puede concluir que gestionar adecuadamente las condiciones de trabajo es entendido por las empresas como un tema central de la RSC. La mayoría de las áreas que componen el marco de evaluación construido son consideradas por una proporción significativa de las empresas analizadas (aproximadamente un 90 por ciento). Una notable excepción aparece en dos de las áreas analizadas: relaciones laborales y derechos humanos. Las empresas analizadas informan en sus informes de RSC de menos iniciativas relativas a los subtemas comprendidos en las áreas de relaciones laborales y derechos humanos comparado con el resto de subtemas de otras áreas. Además, no todos los subtemas analizados recibieron el mismo nivel de consideración en los informes de RSC. Formación y desarrollo profesional y clima organizacional y comunicación interna fueron los dos temas más declarados por las empresas en sus iniciativas de RSC, seguido por dos áreas que cuentan con una amplia legislación existente, como son la prevención y

fortalecimiento de la seguridad y salud en el trabajo y las iniciativas en materia de igualdad de género y no discriminación (Estudio 1, Parte 1).

- 5. Las empresas situadas en las regiones de América y Europa mostraron ser las que informaban de más iniciativas de RSC desarrolladas. Europa sobresalía sobre otras regiones al ser la que presentaba iniciativas de RSC más consistentes y basadas en buenas prácticas y recomendaciones. Las organizaciones en el Sudeste Asiático también actuan adecuadamente en materia de RSC según este estudio. Las empresas africanas tuvieron resultados por encima de las expectativas, aunque hay que considerar que todas las organizaciones analizadas estaban situadas en Sudáfrica y operaban a nivel internacional en otras regiones del mundo. El nivel más bajo de iniciativas desarrolladas dentro de las empresas en materia de RSC fue encontrado en las organizaciones situadas en la región del Mediterráneo Oriental. Por otra parte, en sectores con peores condiciones de trabajo existe un riesgo más tangible (p. ej., fábricas de producción) y, como consecuencia, hay un mayor número de regulaciones legales. Esto conduce a que las empresas en estos sectores parece que desarrollan más firmemente las iniciativas de RSC que tienen que ver con esas regulaciones y con los riesgos más tangibles (Estudio 1, Parte 2).
- 6. Los stakeholders externos (clientes o consumidores) son importantes motivadores para implementar sistemas de gestión de seguridad y salud en el trabajo (SST) y de gestión de riesgos psicosociales dentro de las empresas europeas. Además, el interés en mejorar la imagen de la empresa y su reputación corporativa parece conducir a un mayor desarrollo de la gestión de SST y de riesgos psicosociales dentro de las empresas. No obstante, el efecto

de estas presiones externas de los stakeholders está de alguna forma condicionado a la existencia de legislación coherente en algunos países en el ámbito de la SST y del tamaño de los establecimientos empresariales. Las organizaciones situadas en los viejos estados miembros de la UE (miembros anteriores a 2004) y en Suiza y Noruega, las empresas públicas y los establecimientos con 50 o menos trabajadores implementan más probablemente medidas para incluir sistemas de gestión de riesgos psicosociales y de seguridad y salud en el trabajo. Por lo tanto, la RSC puede ser usada para promover la seguridad, salud y bienestar de los trabajadores, suplementando las iniciativas en materia de regulación legal ya existentes (Estudio 2).

7. En relación al bienestar psicosocial de los trabajadores, la mayoría de factores de riesgo psicosocial parecen tener un impacto sobre la auto-percepción de salud de los trabajadores europeos. Así, la salud autopercibida, según esta investigación, es mejor cuando los trabajadores realizan tareas más variadas en sus trabajos, reciben más apoyo de sus compañeros de trabajo, están más satisfechos con el balance entre su vida laboral y otras áreas de su vida y en consecuencia se sienten menos preocupados por el trabajo cuando no están trabajando, tienen más satisfacción con su salario, sienten mayor satisfacción laboral y, finalmente, cuando trabajan en condiciones de bajo riesgo físico para la salud. La falta de seguridad económica y el estrés económico y financiero puede contribuir, por su parte, a empeorar la salud percibida. La influencia de estas variables se mantuvo después de controlar por sexo, edad en años, nivel educativo, estrés económico, tamaño de la localidad de residencia, y estado civil (Estudio 3).

- 8. A nivel nacional, el desarrollo humano que un país ha logrado para sus ciudadanos parece tener influencia en el impacto de los riesgos psicosociales sobre la salud subjetiva. Así, en países con alto nivel en el Índice de Desarrollo Humano (Human Development Index, HDI), la satisfacción con el balance entre el trabajo y otras áreas de la vida parece influir en la salud en mayor grado que en los países con bajo nivel de desarrollo según el HDI. Por el contrario, la percepción de los trabajadores de la existencia de riesgos físicos en su trabajo tiene un mayor impacto sobre la salud subjetiva en países con bajo nivel de HDI. Las variables nacionales y de macro-nivel deben ser consideradas cuando se analizan los factores de riesgo psicosocial y su impacto sobre la salud de los trabajadores. Así, el nivel de desarrollo humano de un país influye cómo los trabajadores perciben los factores de riesgo psicosocial y, potencialmente, cómo experimentan el estrés en el trabajo y sus efectos sobre la salud (Estudio 3).
- 9. Los estándares de RSC incluyen derechos humanos y labores fundamentales pero, más allá, incluyen requerimientos básicos en otras áreas de las condiciones de trabajo que son necesarios para encarar los riesgos psicosociales y promover la salud de los trabajadores. Las iniciativas de RSC en el trabajo parecen incluir áreas y temas significativos en relación a las condiciones de trabajo. Además, la carencia de regulaciones legalmente vinculantes a nivel internacional sugiere que las iniciativas de RSC pueden usarse en el lugar de trabajo para mejorar las condiciones de trabajo y reducir los riesgos psicosociales. Las presiones y requerimientos de los clientes y el interés por mejorar la reputación corporativa son también aspectos que impulsan y promueven de manera significativa la implementación de la gestión de seguridad y salud y de los riesgos psicosociales en el trabajo. Como consecuencia, la implementación de políticas de RSC en las empresas y su

extensión a través de la cadena de distribución y de proveedores tiene potencial para promover la seguridad y salud en el trabajo y el bienestar psicosocial de los trabajadores a nivel mundial.