NETHERLANDS: WORKFORCE DIVERSITY, CULTURE CHANGE AND PSYCHOSOCIAL RISK PREVENTION

Introduction

This case study presents a holistic approach to addressing psychosocial risks (PSRs), diversity and inclusion, illustrated through three concrete examples that demonstrate different preventive approaches.

The first example explores the activities of several organisations in the Netherlands, including the Social and Economic Council, which has developed a Diversity in Business initiative and a PSRs assessment tool focused on social and psychological safety to address the impact of PSRs on diversity and inclusion. The second example looks at how PSR factors and risk assessment have been incorporated into the recommendations and guidelines developed by the Commission on Sexually Inappropriate Behaviour in the Netherlands, which places a strong focus on cultural change in the workplace. The third example describes a successful healthcare sector initiative aimed at improving safety and security for workers by addressing both internal and external safety concerns and introducing a new focus on culture change.

The 2023 Dutch Working Conditions Survey (Mars et al., 2024) conducted by Statistics Netherlands (CBS) and the Netherlands Organisation for Applied Scientific Research (TNO) in collaboration with the Ministry of Social Affairs and Employment, found that 15 % of employees experienced stress at work, 19 % showed symptoms of burnout and 38 % indicated that additional measures were needed to reduce work pressure and work-related stress. Absenteeism due to poor health is most prevalent among women and in the healthcare sector. Additionally, 6.8 % of employees reported experiencing work-life imbalance (very) frequently, while 6.1 % were more likely to neglect their family or family activities because of work. Almost 1 in 10 employees (8.7 %) reported doing emotionally demanding work. Emotional strain was most prevalent in the healthcare (19 %) and education (16 %) sectors, and adversely affected women more than men.

The survey also revealed that 11 % of employees reported experiencing discrimination at work in the previous 12 months. Discrimination was most commonly based on origin, skin colour or nationality (2.9 %), age (2.6 %) and gender, including pregnancy (2.1 %). Overall, 21 % of female employees reported experiencing inappropriate behaviour (such as unwanted sexual attention, harassment, physical violence or bullying) in the previous year, compared to 12 % of male employees. The highest rates of inappropriate behaviour occurred in sectors that predominantly employ women, particularly in healthcare.

Furthermore, according to Eurostat data for the Netherlands (2021), 41 % of women with work experience have encountered sexual harassment in the workplace. Of these women, 7 % encountered sexual harassment in the last 12 months, and 19 % in the past five years. Younger women experience higher levels of sexual harassment than their older counterparts.

Key takeaways and transferability

- A holistic approach offers several advantages. It prevents issues of workforce diversity and PSRs from being treated as separate policy areas, ensuring that each domain supports the other. This ensures that matters related to diversity and sexual harassment are integrated into PSR assessments, rather than being regarded as additional or separate concerns.
- This approach also reflects the importance of workplace initiatives and campaigns being carried out alongside broader societal initiatives.
- A key takeaway from the initiatives discussed is the importance of dialogue in the workplace, particularly within work teams, which is a vital element of raising awareness. Moreover, this approach benefits from the involvement of trade unions, which highlights the important role that social partners can play in reaching workplace agreements.

- It is crucial to follow up on issues or concerns reported by employees relating to PSRs regarding stress, violence and harassment. Only then will employees feel sufficiently supported to report more frequently.
- Shifting the focus to prevention and changing organisational culture is essential for preventing PSRs, including sexually inappropriate behaviour. A focus on learning and implementing cultural change must be created and implemented at all levels of an organisation, and this must be grounded in a robust legal and policy framework.
- A consistent approach is needed to create a safe work culture. A key lesson from the approach taken in the Netherlands is that addressing PSR factors such as sexually inappropriate behaviour can establish strong foundations for a safe working environment and a culture of respect for all workers.
- This approach can be adopted by any EU Member State, taking into account the varying legal frameworks governing PSR assessments, as well as equality and diversity.

Overview of the legal and policy context

Under Section 3 the Working Conditions Act and Article 2.15 of the Working Conditions Decree, employers are required to implement policies to prevent psychosocial workload and ensure psychosocial safety. This includes PSR factors such as work pressure, work-related stress, sexual harassment, aggression, violence, bullying and discrimination. Employers must also implement protocols for handling undesirable behaviours, including those from third parties. These issues are managed through a mandatory risk assessment and evaluation (RI&E), with an action plan aimed at preventing or reducing PSRs. Workers must be informed about the risks and the preventive measures implemented by the organisation, and employers need to demonstrate that these measures are effectively in place. According to the definition set out in Article 1 of the Working Conditions Act, sexual harassment is classified as part of the psychosocial workload. According to Article 2.15(1) and (2) of the Working Conditions Decree, workers must be provided with information and training.

Work to promote diversity, equality and inclusion (DEI) has been facilitated through a decree of coordination between OSH and equal treatment legislation, and more specifically the General Equal Treatment Act (AWGB), the Law on the Equal Treatment of People with Disabilities or Chronic Illnesses, the Law on the Equal Treatment of Men and Women, and the Law on the Equal Treatment in Employment of People of Different Ages. Section 1a(3) of the Dutch Equal Treatment Act contains the following definition [of sexual harassment]: 'Any form of verbal, non-verbal or physical conduct with a sexual connotation that has the purpose or effect of violating the dignity of the person, in particular when a threatening, hostile, abusive, humiliating or offensive environment is created.'

Furthermore, the Sexual Offences Act, which came into effect on 1 July 2024, provides victims of sexual violence and sexually inappropriate behaviour with better protection under criminal law. Sexual harassment (both offline and online) and 'sexchatting'[1] are punishable offences, and rape cases cannot become time-barred. A nationwide campaign commenced in 2024 to inform people about the Act.

The Social and Economic Council of the Netherlands has developed a range of guidance materials to promote workforce diversity, including:

- Guide to psychosocial safety, diversity and inclusion, which focuses on practical ways to create diverse and inclusive workplaces and promotes social and psychological safety. It suggests developing an action plan to enhance safety at work and promote diversity and inclusion (D&I), which is defined as being 'about differences within your workforce, for example in terms of working ability, racial and ethnic identity or cultural background, age, gender and LGBTIQ background');
- Guidance materials on Diversity Charters and Knowledge Platforms2 have been developed, focusing on multiple dimensions of diversity including ethnic, cultural and religious diversity, gender, LGBTIQ background, age, disability or chronic illness;

[1] Sexchatting ('sekschatten' in Dutch), sometimes referred to as 'sexting', is sexually explicit online communication that is unlawful, because it is non-consensual, coercive, harassing, or involves a minor. Examples include sending sexual messages, images, or propositions online; continuing sexual chat after refusal or clear discomfort; pressuring someone into sexual online interaction.

[2] See: https://www.ser.nl/nl/thema/diversiteitinbedrijf/english.

- Guidance on corporate culture and creating a working climate that is inclusive of all cultures and religions, so that all workers feel comfortable and valued. It suggests that a zero-tolerance approach to discrimination is essential and should be included in the psychosocial workload (PSW), as set out.in the Working Conditions Act since 2009.

Description of the intervention

Example 1: Guidance on diversity and psychosocial safety

This first example demonstrates the importance of taking a holistic approach, using practical tools and campaigns, which are carried out against the backdrop of a robust legal framework on OSH, equal treatment and non-discrimination. The Dutch Social-Economic Council (SER), which is the national consultative body for tripartite cooperation, has developed a range of diversity initiatives.

The SER Diversity in Business initiative supports companies in increasing diversity and inclusion in the workplace by helping employers establish, implement and monitor diversity plans. The initiative aims to encourage companies and public and semi-public organisations in the Netherlands to sign the EU Diversity Charter. Companies that sign the charter commit to promoting diversity and inclusion in the workplace. A list of these companies is publicly available on the SER website. The Diversity Charter Monitor is an annually published report on the diversity and inclusion policies introduced by the signatories of the Diversity Charter (SER, 2022).

The guidance drawn up by the SER as part of the implementation of the Dutch Diversity Charter focuses on corporate culture and the creation of a working environment that is inclusive of all cultures, where every employee feels comfortable and valued, regardless of their ethnic background, culture or religion. The guidance addresses the question: 'How do we get from cultural diversity in the workplace to an inclusive business climate?'. It argues that zero tolerance towards discrimination is essential, on the basis that discrimination in the workplace is more common than employers and employees may think. As discrimination in the workplace is covered by the psychosocial workload framework, employers must address the risk of discrimination, as provided for in the Working Conditions Act.

A knowledge platform[3] has been developed to raise awareness of the five dimensions of diversity (gender, age, LGBTIQ, disabilities or chronic illnesses and ethnic, cultural and religious background) and to foster an open organisational culture that values differences, resulting in stronger, more effective organisations. The platform offers the target audience unique and valuable opportunities to share real-life examples and best practices in areas such as diverse recruitment and inclusive management, drawing on research evidence, expert reports and case studies.

SER's Diversity in Business initiative has developed a wealth of guidance materials. One of these is the **Guidelines on dealing with unacceptable behaviour at work**, which covers sexual harassment and online bullying (SER, 2020). Unacceptable behaviour is defined as including bullying, discriminatory remarks, harassment (sexual and otherwise), and aggression from colleagues and managers. The definition also includes 'microaggressions', which are small and subtle, everyday forms of (unconscious) discrimination and undesirable behaviour that are often dismissed when flagged. These behaviours, which can include side comments, interruptions, jokes and assumptions, send a message that someone does not belong. The guide contains recommendations for preventing and addressing undesirable behaviour, focusing on encouragement, monitoring and enforcement. In particular, employers are encouraged to promote discussion of unwelcome behaviour by fostering a culture in which all employees, from top to bottom, can openly address and discuss these issues with one another. Good practice includes appointing confidential counsellors in the workplace to provide workers with confidential advice and support. They serve as the first point of contact for individuals experiencing PSRs, such as bullying, sexual harassment or discrimination. Campaigns and information initiatives have also helped to focus attention on respectful communication and behaviour.

A second set of relevant guidelines for PSR assessment is the **Guide on social and psychological safety: Safe together, moving forward together** (SER, 2024). It provides practical advice on creating diverse and inclusive workplaces, with a focus on social and psychological safety. The guide acknowledges that workers often encounter undesirable behaviour, such as bullying, discrimination, (sexual) harassment and aggression, and recognises that these issues disproportionately affect vulnerable people and minority groups. The guide is based on the premise that undesirable behaviour often occurs due to a lack of social and psychological safety within the organisation. It then takes

[3] SER Knowledge Platform: https://www.ser.nl/nl/thema/diversiteitinbedrijf/english/knowledge-platform.

employers and safety experts through the steps involved in identifying risks and drawing up an action plan to increase safety with the aim of 'creating a working environment in which all employees, regardless of their background, feel safe, respected and valued' (2024:1).

Practical guidance is provided on establishing diverse and inclusive workplaces. Diversity and inclusion (D&I) are defined as encompassing differences within the workforce in areas such as work ability, ethnic or cultural background, age, gender, and LGBTIQ background. The guide provides tools that enable employers to map the current situation (policies and measures introduced), carry out a Risk Inventory & Evaluation (RI&E) of occupational risks and plan with measures to address factors related to the psychosocial workload, and psychological and social safety. As a starting point, it is recommended that employers conduct a baseline survey (for example, through employee satisfaction surveys, focus group discussions, exit interviews or other confidential methods) so that progress can be measured. In addition to a confidential counsellor, a company's occupational health / social worker can also provide psychosocial support. The guide suggests developing an action plan to enhance safety at work and promote diversity and inclusion (D&I), which is defined as being 'about differences within your workforce, for example in terms of working ability, ethnic-cultural background, age, gender and LGBTIQ background').

The role of managers in promoting psychological safety and countering undesirable behaviour is emphasised and recommendations are given to:

- Provide information and training to ensure that all managers facilitate dialogue and actively encourage different perspectives. For example, managers should pose specific questions to team members from different backgrounds;
- Promote shared norms and values and explain why it is essential to counter undesirable behaviour;
- Recognise that safety is perceived and experienced differently by different people and recognise the need to respond positively and listen attentively when someone speaks up;
- Invest in diversity at the level of management and leadership positions to ensure that workers from diverse backgrounds feel safe and welcome;
- Be aware of the social and psychological safety of employees at board and management level. Employees ho find themselves in such positions often feel unsafe and their dissatisfaction may permeate other parts of the organisation, whether consciously or unconsciously;
- Address sensitive topics and consider using an external discussion leader for this purpose;
- Recruit and select managers who promote psychological safety, diversity and inclusion. Look for characteristics such as prioritising the common good, demonstrating reliability and integrity, exhibiting empathy and friendliness, and possessing modesty, emotional intelligence, intercultural sensitivity and a commitment to diversity and inclusion;
- Assess managers on these qualities and their commitment to diversity and inclusion, providing positive incentives such as bonuses;
- Create an open work culture.

Support for labour inspectors

The Dutch approach also involves the Labour Inspectorate, which is instrumental in promoting new and non-traditional areas of labour inspection. The self-inspection Stress Assessment Tool for Work Pressure and Undesirable Behaviour was developed specifically for the Dutch Labour Inspectorate. For more information on the Dutch approach to labour inspection, see the case study on labour inspection and diversity.

TNO guidance materials on psychosocial workload and discrimination

Guidance materials, including a guide on handling pressure at work, have been drawn up by TNO, the Dutch Organisation for Applied Scientific Research, to support ongoing work in this area.[4] The guide is a practical tool that assists organisations in identifying risks, such as psychosocial strain and its causes, and reducing psychosocial strain. The guide offers tools to help organisations identify

[4] Psychosociale arbeidsbelasting op het werk: https://psychosocialearbeidsbelasting.tno.nl/.

workload-related risk factors among vulnerable groups, including those linked to gender differences in workload experience, emotional labour, autonomy and social support.

TNO has also developed a website for employers, employees, managers, prevention officers, occupational health and safety professionals, and HR staff. This provides information and tools to help organisations tackle PSRs at work, including knowledge about the circle of psychosocial workload, as well as fact sheets, reports and articles. Examples of work pressure or undesirable behaviour cited by TNO include sexual harassment or aggression and violence by colleagues (internal) or people outside the organisation (external), such as customers, patients or students. TNO has also developed a guidance tool on ending discrimination in the workplace,[5] which is designed for victims of discrimination, bystanders and managers/HR staff and aims to help them recognise and identify discrimination. The tool addresses three core themes: defining discrimination, recognising it, and identifying ways to respond.

TNO is currently developing a chain approach to demonstrate how a holistic, integrated approach could also be applied at regional level. This approach engages social partners, multiple sectors and employers, providing practical insights for local implementation. The key added value at the regional level is that it integrates different domains and stakeholders, addresses PSRs, diversity, and inclusion simultaneously, is holistic and systemic, tackling barriers at multiple levels, and creates a practical learning and collaboration approach that aligns interventions with the needs of vulnerable groups (in this case, single mothers).

Example 2: The Commission on sexually inappropriate behaviour addresses the workplace

In the Netherlands, the #MeToo movement played a significant role in raising awareness of sexually inappropriate behaviour (sexual harassment) after numerous reports of abuse emerged from different sectors, including personal accounts high-profile media figures. A high-profile case involving a popular TV show, The Voice of Holland, proved particularly notable. It triggered a national dialogue about work-related sexual harassment, leading to a significant shift in policy and the approach to preventing the problem. In response, national initiatives have included establishing a Commission on sexually inappropriate behaviour, a national action programme for tackling sexually inappropriate behaviour and sexual violence (both of which address workplace safety), and the Van Rijn Committee on inappropriate behaviour in public broadcasting.

The high-level Commission to Address Sexually Inappropriate Behaviour was established in 2022. It is led by Mariëtte Hamer, who was appointed Government Commissioner for Sexually Inappropriate Behaviour and Sexual Violence.

Following this, in 2023 the Dutch Government published a National Action Programme for tackling sexually inappropriate behaviour and sexual violence, including in the workplace. The programme places an emphasis on concrete actions aimed at changing societal norms and culture. Amongst a wide range of provisions designed to trigger change in culture and social norms, the programme addresses the need for organisations to implement processes to prevent, detect and monitor cases of sexually inappropriate behaviour. This includes concrete measures designed to create a safe work culture that takes into account the varying needs of the different sectors.

In 2023, the Commission addressed the issue of sexually inappropriate behaviour in the workplace and published the first edition of a handbook for organisations on how to deal with reports of such behaviour. In 2024, the second edition of the handbook was published which adopted a broader approach, placing greater emphasis on prevention strategies and cultural change within organisations (Regeringscommissaris seksueel grensoverschrijdend gedrag en seksueel geweld, 2024). The latest edition draws on insights from experts and professionals, as well as the experiences of twenty companies of different sizes and from different sectors. The handbook provides tools for cultural change across three pillars designed to create a safe organisational culture:

- Culture of interaction: organisational culture that may revolve around deep-seated patterns of behaviour on the part of managers and employees, or men and women. This culture is based on shared patterns of behaviour, norms and images within a group;

[5] https://psychosocialearbeidsbelasting.tno.nl/wp-content/uploads/sites/12/2022/11/TNO-Wegwijzer-Discriminatie.pdf.

- Organisational structure: the six key risk factors for organisational structures are unequal power and hierarchy, insecure positions and dependence, the nature of the work performed, how work is organised, and a lack of diversity and inclusion. There may also be a lack of time and a high degree of dependency, which are risk factors for sexually inappropriate behaviour and sexual violence;
- Support system: measures aimed at preventing and addressing sexually inappropriate behaviour and sexual violence. These include follow-up reports, accessible confidential expert advisors, a widely supported code of conduct and managers' knowledge and skills.

The objective is to prevent sexually inappropriate behaviour by tackling the underlying risk factors within an organisation. These risk factors are referred to as a 'breeding ground' for sexually inappropriate behaviour. Diversity is central to driving culture change within an organisation. The handbook makes recommendations for employers in both the upper stream (visible elements, such as employees' knowledge and skills, as well as the organisation's goals and processes) and the lower stream (experiences, emotions, impressions, expectations, and beliefs) within the organisation.

The handbook also sets out the four steps involved in the risk assessment process:

- Step 1: Carrying out a risk analysis based on the three pillars outlined above;
- Step 2: Clarifying responsibilities for tasks and functions within the organisation;
- Step 3: Drawing up an action plan;
- Step 4: Promoting and communicating the action plan, as well as emphasising the importance of paying attention to sexually inappropriate behaviour within the organisation.

Overall, risk assessment is considered a vital tool for helping organisations to identify their vulnerabilities with regard to sexually inappropriate behaviour. A range of tools, including anonymous culture surveys and one-to-one interviews, are to be used in the risk assessment. In addition, suggestions are provided for questions to guide risk assessments at organisational and team level.

Questions for the whole organisation include:

- Is it common to touch each other a lot, such as kissing when greeting one another?;
- Are there many informal occasions where people are more likely to touch each other?;
- Is there inequality in the way we treat each other?;
- Are people categorised based on gender, ethnicity, sexual orientation and age;
- Are people open to relationships in the workplace?

Question for an individual team within an organisation include:

- Can employees hold each other accountable for their behaviour, regardless of their position in the organisation?
- Can employees speak up about how they feel, even if they face unwanted sexual innuendo?
- Do employees trust each other?
- Do employees offer each other support and ask each other for help?
- Does the manager encourage others to ask questions, admit mistakes and raise issues? Does he or she do so themselves?
- Is the atmosphere inclusive?
- Is the atmosphere informal or businesslike, and what effect does it have?
- Do people treat each other respectfully, even when jokes are made?
- Is the dividing line between work and private life respected?
- What expectations do men and women have of each other?

The handbook also provides guidance on the content of codes of conduct, drawing on a model developed by the Ministry of Social Affairs and Employment.[6]

[6] https://www.arboportaal.nl/documenten/publicatie/2020/02/10/handreiking-gedragscode-ongewenste-omgangsvormen.

The handbook also provides detailed examples of risk factors and methods for mitigating them. To illustrate this, the textbox below provides an example of risk factors related to the absence of diversity and inclusion within an organisation.

Risk factors relating to the absence of diversity and inclusion	Suggested measures to mitigate the risks and promote diversity and inclusion
▪ The working environment is dominated by a highly homogeneous group that holds higher positions and/or receives higher rewards; ▪ The composition of staff does not accurately reflect the make-up of society; ▪ There are unequal proportions of population groups in the workplace, including the number of men and women; ▪ Positions are unequally distributed among population groups, including in terms of the number of men and women; ▪ The structure reflects a traditionally male-dominated organisation or one in which positions are largely held by women; ▪ Care and support positions are only held by women.	▪ Prevent and discontinue discrimination within the organisation; ▪ Put in place an inclusive hiring policy aimed achieving a representative staff composition; ▪ Ensure equal opportunities for all population groups in terms of promotion and advancement opportunities; ▪ Ensure greater diversity at senior and middle management level, including more women in leadership roles; ▪ Make diversity and inclusion an explicit responsibility of directors and managers ▪ Monitor and analyse the progress of diversity and inclusion within the organisation, adjusting policy based on this analysis.

The model highlights the role of all members of an organisation, including bystanders . However, employers and managers are ultimately responsible for preventing and addressing sexually inappropriate behaviour. Overall, culture change is expected to result in three primary outcomes.

- firstly, an increase in awareness of the impact of sexually inappropriate behaviour and sexual violence, including how it interplays with sexism, racism, discrimination, bullying and aggression and violence;
- secondly, staff who have appropriate knowledge and skills to respectfully deal with each other's needs and boundaries, both verbally and non-verbally;
- thirdly, a culture of open conversation, where employees feel safe enough to discuss their wishes and boundaries with one another and where such discussions are integral to organisational culture.

Notably, the guidance highlights the importance of recognising social norms and different perceptions of sexually inappropriate behaviour and cultural diversity among victims, accused persons, and all employees in the organisation. It also acknowledges differences in gender perceptions of what constitutes sexually inappropriate behaviour. For example, variations in sexual and relational norms can be observed between heterosexual and LGBTIQ groups, as well as within these groups themselves, alongside differences arising from cultural diversity. The guidance also identifies risks for workers in precarious positions or insecure contracts, as well as self-employed workers, interns and trainees. These workers are less likely to report sexually inappropriate behaviour or intervene as bystanders. The same applies when people in an organisation are highly dependent on others for promotion, career progression and job security.

Example 3: Safe Healthcare initiative

The Netherlands faces a range of healthcare challenges arising from a highly feminised sector, an ageing workforce, and a high number of workers leaving due to harassment and an adverse working environment. These issues have made safety, well-being and cultural change in healthcare a priority. The Safe Healthcare (Veiligezorg) initiative is an innovative method designed to prevent PSRs, with a particular focus on tackling aggression, violence and harassment in Dutch hospitals. Safe Healthcare

is managed by the Foundation for the Labour Market in Hospitals (StAZ), a partnership between hospital employers and trade unions. The initiative has played a pivotal role in incorporating these issues into collective agreements within the hospital sector.

Safe Healthcare takes a proactive and preventive approach to reducing violence and harassment, including sexual harassment, in the workplace through risk assessment, training and specific protocols. It originated from concerns about increasing levels of aggression from third parties in hospital environments, and more recently shifted focus to include internal violence and harassment.

The initiative has played a key role in the introduction of standards for safe healthcare, including a strong emphasis on enhancing safety and security measures, which has led to cooperation with the police and the public prosecution service. The model was first piloted in a hospital in partnership with the North Holland police in 2001 and has since been mainstreamed to nearly all hospitals in the Netherlands. The Safe Healthcare training programme and handbook provide hospitals with a step-by-step guide to reducing aggression and creating a safe working environment. In addition, the Safe Healthcare handbook (StAZ/Safe Healthcare, 2021) provides guidance on the steps to preventing and responding to aggression, the actions to be taken after an incident involving aggression, and best practices. It also includes a template for agreements with the police and the Public Prosecution Service, as well as a model code of conduct for organisations to adopt and implement. According to the model code of conduct:

- All incidents should be registered, for example, using reporting cards or a dedicated form available on the intranet;
- Where aggression occurs, a member of staff should address the behaviour indicate that it is not tolerated;
- If a person continues to misbehave, security should be engaged immediately. They will then decide whether to issue a warning (yellow card) or deny access to the premises (red card);
- If access is denied, the police should be called. Legal prosecution may be initiated in cases involving physical violence, discrimination, sexual harassment, threats, possession of prohibited weapons, theft and vandalism;
- Violence, harassment and discrimination are not permitted. Discrimination is defined as ridiculing, scolding or putting another person at a disadvantage based on their origin, religion, gender, age, behaviour, appearance or clothing;
- The actions that employees should take if they witness discrimination, aggression, violence or harassment occurs include confronting the person(s) responsible about their behaviour, where appropriate together with security. If the behaviour persists, security should be called to handle the situation. The incident should be registered and detailed in the duty report.

Recently, Safe Healthcare has been exploring new ways to promote and enhance culture change within healthcare organisations. Following the successful implementation of the model in Dutch hospitals, the StAZ and Safe Healthcare have shifted their focus to internal safety and culture change in hospitals. This shift in focus has been prompted by the #MeToo movement. Initiatives such as the Commission on Sexually Inappropriate Behaviour, and a national dialogue about the need for a change in culture, and campaigns by trade unions and feminist organisations, have had a significant impact on the healthcare sector, which employs many women and overseas/migrant workers. In Dutch hospitals, culture change has been challenging to implement owing to the size, hierarchical structure and complexity of the organisations. Collaboration with Safe Healthcare has helped to bridge this gap by providing resources and expertise, as well as a mechanism to coordinate activities across university hospitals. Funding has been leveraged from the university/teaching hospital insurance fund (SoFoKleS) and the StAZ.

An important starting point was that hospitals across the Netherlands recognised the need to change norms and culture. This has led to workplace conversations about what constitutes normal behaviour in modern workplaces. These discussions have focused on helping staff consider ways to reduce boundaries that often tolerate abusive behaviour and encouraged them to ask themselves what the ‘line that we should not cross’ is. Safe Healthcare has provided the tools needed to implement a meaningful culture change and build capacity and knowledge.

Mixed workshops with employees from all professional and staff groups were a key focus. Although most hospitals have implemented internal regulations, this ‘bottom-up’ approach was found to have a

significantly greater impact on the workforce and foster broader cultural change. The training resources, including videos[7] and a leadership training programme,[8] have helped employees to recognise and report inappropriate behaviour. Using theatre and role-playing has proved an effective way of addressing these issues in a less confrontational manner. It has allowed us to explore the impact of unacceptable behaviours and how to model respectful behaviour in the workplace. In addition, the focus was on changing culture within specific teams rather than across the entire organisation. These team initiatives then inspire other teams to follow suit. One of the success factors contributing to the success of this model has been the development of collaborative culture change initiatives. These initiatives included four national meetings in 2025, which aimed to support hospitals in their efforts to change their organisational culture. The meetings benefited from the participation of national experts and provided opportunities for mutual learning and sharing good practices across the hospital sector.

The Safe Healthcare model, which was initially adopted by the hospital sector, has also served as a blueprint that has subsequently been adopted by the mental health and long-term care sectors, ensuring a consistent approach across the entire healthcare sector. In the long-term care sector, funding and support from the AOVVT (a partnership between employers and employees in the nursing, elderly care, home care, and youth health sectors, known as the VVT sector), has led to regional meetings for occupational safety and health coordinators, HR professionals, works council members, confidential counsellors and managers. These meetings provide an opportunity to learn from invited speakers and experts and receive practical guidance, information and tools. A variety of valuable resources are available online.[9] These include the Safe Healthcare manual, as well as guidelines and a tool for reporting, recording and managing incidents, guidelines on providing support after an incident of aggression, guidelines on creating safe workplaces through safe design and buildings, as well as a podcast series and videos featuring members of the VVT occupational health and safety committee, managers and long-term care workers. In addition, the ‘colour method’ was developed for the sector as a practical tool to identify spaces where employees feel safe or unsafe to work. It has since been integrated into risk assessments to enrich understanding of potential risks. It is a hands-on, collaborative approach that identifies where and why employees feel unsafe, and empowers teams to raise concerns, build consensus and implement safety improvements. In the mental health sector, Safe Healthcare has been supported by the O&O-fonds GGZ (a collaborative fund by social partners in the Dutch mental healthcare sector, GGZ) and has adopted a similar approach.[10]

Success factors

- The holistic approach in the Netherlands is underpinned by specific PSR-at-work legislation and a high-level national programme on sexually inappropriate behaviour, which covers the workplace. A key feature of the Dutch approach is its reliance on national tripartite cooperation and strong social partnership.
- This approach successfully coordinates OSH and equal treatment laws, integrating diversity with the prevention of PSR factors. It is innovative in its collaborative and partnership-based focus on PSR factors associated with undesirable behaviour collaboratively, and more recently, its systematic focus on broad culture change in the workplace that is inclusive of, and respectful towards, workforce diversity.
- Key elements of the Dutch approach include: a strong focus on cultural change and integrating diversity issues into risk assessments for PSRs. These assessments cover risk factors such as work pressure, bullying, sexual harassment and TPVH. The approach also emphasises creating an open and supportive workplace culture where employees feel safe speaking up and reporting their concerns.
- Specific guidance on risk assessment, including holding participatory consultations with workers, is innovative and could be a valuable learning resource for other countries. This is because there are currently limited risk assessment tools available that are specifically designed to assess the risk of sexually inappropriate behaviour;
- Another success factor is the emphasis placed on training managers and staff at all levels in the workplace, as well as safety and health experts, labour inspectors and trade union

[7] https://www.staz.nl/veiligezorg/module-1-wat-is-ongewenst-of-grensoverschrijdend-gedrag/.
[8] https://www.staz.nl/onderwerpen/duurzame-inzetbaarheid/activiteiten-voor-hr-medewerkers/training-sociale-veiligheid-in-teams/.
[9] https://www.aovvt.nl/activiteiten/veiligezorg/.
[10] https://www.oofggz.nl/thema/veiligheid/.

representatives, in building capacity and increasing awareness of workforce diversity to prevent PSR and encourage cultural change.

- In particular, the Commission on Sexually Inappropriate Behaviour has helped to focus attention on the need for workplace policies and changes in workplaces that address workplace culture and the root causes of sexually inappropriate behaviour as part of risk assessment and mitigation measures.
- This has already had an impact across the Netherlands, for example by giving a new focus to the role of culture change in Dutch workplaces, including under the Safe Healthcare programme.
- Social dialogue and worker involvement have played a central role in the initiatives discussed in this case study. On this basis, workers and trade unions can contribute their expertise to finding solutions to PSR factors in the workplace. Implementing social dialogue through collective bargaining agreements in specific sectors and at workplace level has also helped to build engagement through a partnership approach, as demonstrated by the successful Safe Healthcare programme in the hospital sector.
- This approach has helped to build strong engagement with managers and employees across the hospitals sector as part of the Safe Healthcare initiative. Furthermore, effective follow-up and networking have been maintained at the regional and national levels, including through regular networking meetings. The Safe Healthcare model benefits from having clear guidelines and security protocols for cooperation with the police in cases of violence, aggression or threats.
- Another success of the Safe Healthcare model is that it has been successfully rolled out across Dutch hospitals and, more recently, has been adopted by the mental healthcare and long-term care sectors. This allows Safe Healthcare to operate uniformly throughout the entire healthcare sector. Overall, the Safe Healthcare programme has resulted in positive change, fostering a culture of discussion and conversation that has led to a greater number of employees speaking out about inappropriate behaviour in the workplace.

Challenges

- In the context of a diverse workforce being increasingly exposed to PSR factors, including incidents of third-party violence, harassment and undesirable behaviour in the labour market, it is difficult to address these issues systematically.
- Although the SER guidelines support an inclusive approach to diversity and inclusion, the success of this approach depends on how well employers integrate gender and diversity into workplace risk analysis. Without clear indicators specifically targeting discrimination, harassment or intersectionality, there is no guarantee that these issues will be addressed systematically.
- The initiatives, particularly relating to culture change and addressing the structural causes of PSRs, including sexually inappropriate behaviour, represent long-term objectives that are difficult to achieve without a sustained approach that is reinforced by ongoing guidance, training and awareness raising.
- A systematic and long-term approach is required for culture change, involving employees from the bottom up while ensuring governance and accountability from the top down.

References

Government of the Netherlands. (2023). *Recognising, acknowledging and respecting each other's wishes and boundaries. National Action Programme for tackling sexually inappropriate behaviour and sexual violence*, https://www.government.nl/documents/reports/2023/03/30/recognizing-acknowledging-and-respecting-each-others-wishes-and-boundaries.

Mars, G.M.J. et al. (2024). Nationale Enquête Arbeidsomstandigheden (NEA) 2023 – Onderzoeksbeschrijving, https://www.cbs.nl/nl-nl/longread/rapportages/2024/nationale-enquete-arbeidsomstandigheden--nea---2023-onderzoeksbeschrijving.

Regeringscommissaris seksueel grensoverschrijdend gedrag en seksueel geweld (Government Commissioner for Sexual Misconduct and Sexual Violence). (2024). *Handreiking. Cultuurverandering op de werkvloer Over preventie en de aanpak van seksueel grensoverschrijdend gedrag.* (Handbook. Culture change in the Workplace. On preventing and dealing with sexual inappropriate behaviour), https://www.rcgog.nl/actueel/nieuws/2024/03/13/nieuwe-handreiking-tegen-seksueel-grensoverschrijdend-gedrag-zet-in-op-cultuurverandering-op-de-werkvloer.

Social and Economic Council of the Netherlands (SER). (2020). *Handreiking ongewenst gedrag op de werkvloer* (Guidance on dealing with undesirable behaviour in the workplace), https://www.ser.nl/-/media/ser/downloads/thema/diversiteitinbedrijf/publicaties/2022/Handreiking-ongewenst-gedrag.pdf.

Social and Economic Council of the Netherlands (SER). (2022*). Fact sheet: Diversity Charter Monitor 2022*, https://www.ser.nl/-/media/ser/bestand/2024/ser-dib-fact-sheet-diversity-charter-monitor-2022-regioplan.pdf.

Social and Economic Council of the Netherlands (SER). (2024). *Samen veilig, samen vooruit* (Safe together, moving forward together), https://www.ser.nl/nl/thema/diversiteitinbedrijf/kennisplatform/aan-de-slag-met-d-en-i/sociale-psychologische-veiligheid.

StAZ/Safe Healthcare (2021) *Handboek Veiligezorg* (Training Handbook): https://www.staz.nl/wp-content/uploads/2021/06/handboek_Veiligezorg.pdf.

Interviews were held with representatives of Safe Healthcare and TNO.

Author: Jane Pillinger.

Project management: Maurizio Curtarelli and Sarah Copsey, European Agency for Safety and Health at Work (EU-OSHA).

This case study was commissioned by the European Agency for Safety and Health at Work (EU-OSHA). Its contents, including any opinions and/or conclusions expressed, are those of the authors alone and do not necessarily reflect the views of EU-OSHA.