



Measures to prevent psychosocial risks (PSRs): the case of two Algerian companies CAPREF-CSBA in Algiers and GLOVES LATEX INDUSTRIES

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Abstract ;

The prevention of psychosocial risks (PSR) is a crucial issue for companies. These work-related risks refer to a category of occupational risks. They are distinguished by their impact on the psychological and mental sphere of the employee before they can affect their health. However, the impacts of psychosocial risks affect not only the employee but the entire work team, thereby influencing the company's performance. Therefore, prevention against these risks is essential to ensure a healthy work environment. Our objective is to verify the existence of preventive measures at CAPREF-CSBA in Algiers and top gloves latex industries in ain-temouchent.

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1. Introduction

Different professional activities involve several occupational risks that affect the health and physical or moral integrity of workers. Mental health at work is a crucial issue that impacts not only the well-being of employees but also the productivity and overall performance of the company. Psychosocial risks, known by the acronym PSR, are now an unavoidable reality in the world of work. These risks, which affect almost all sectors of activity, take several forms, such as stress, workplace violence, burnout, etc. They are linked to the organization of work, the social environment, and professional interactions.

Psychosocial risks can have a negative impact not only on the mental, physical, and social health of workers, but also on the overall performance of companies. Faced with these challenges, the prevention of psychosocial risks in Algeria, as elsewhere, is a powerful lever for ensuring a healthy, balanced, and sustainable professional environment.

The objective of our article, which deals with "measures to prevent psychosocial risks (PSRs) in companies with reference to the cases of the Algerian company CAPREF-CSBA in Algiers and the company TOP GLOVES LATEX INDUSTRIES," fits into this framework. We are particularly interested in the existence of measures to prevent these PSRs within these two Algerian companies.

To this end, our main question focuses on the measures to prevent psychosocial risks that are actually implemented by these two companies, which we formulate as follows:

Are there any measures in place to prevent psychosocial risks in the two Algerian companies?

We support this main question by formulating the following working hypothesis:

Among psychosocial risks, stress remains the main psychosocial risk in the workplace of Algerian companies, which requires the implementation of prevention measures.

To examine this research question, we support our main question with the following three (03) sub-research questions:

1. What are the most significant psychosocial risk factors in the two organizations studied?
2. Do existing preventive measures fall under a primary approach or a secondary/tertiary approach?
3. Is there a difference in the psychosocial risk prevention policy between the two companies?

To answer the research question and test the working hypothesis, as well as to address the three sub-questions, we adopted a research methodology focused on both literature review and field research. The presentation of our research results follows an outline comprising

the following points:

I. Review of previous studies;

II. Conceptual and methodological framework;

III. PSR prevention measures in the case of two Algerian companies.

2. Review of previous studies :

Several previous studies have focused on identifying and measuring psychosocial risks without evaluating the existence or effectiveness of the prevention measures implemented. Indeed, the dissertations by Benmessaoud (2008) and Chemma (2009) analyzed the prevention of stress and burnout in healthcare settings but did not examine organizational responses to these phenomena.

More recently, Bellal (2024) measured the impact of psychosocial risks on quality of life at work within Yasmine Diary SARL (Algiers). The author highlights the absence of structural measures for the prevention of psychosocial risks.

However, none of these studies has focused on the existence and nature of preventive measures in Algerian companies. It is precisely this gap that our article aims to fill by selecting the two companies in question.

3. Conceptual and methodological overview

Psychosocial risks (PSRs) include all factors related to working conditions, work organization, and professional relationships that are likely to cause stress, conflict, or harm to the psychological health and well-being of employees. This perspective is supported by the definitions of Coutrot and Mermilliod (2010), who describe these risks as "threats to mental and physical health generated by social and psychological mechanisms related to work," and by Jégo and Guillo (2016), who consider PSRs to be "risks to mental and physical health created at least in part by work through social and psychological mechanisms." It is in this sense that we develop the following points in this first section:

1. The difficulties in establishing the concept of psychosocial risks;
2. The elements of the definition of psychosocial risks;
3. The main factors contributing to psychosocial risks;
4. The consequences and effects of psychosocial risks;
5. The prevention of psychosocial risks;
6. Prevention of psychosocial risks in Algerian companies.

3.1 The difficulties in establishing the concept of psychosocial risks:

For a long time, the terms "stress," "suffering at work," and "moral harassment" were used to describe psychosocial risks. There are several reasons for the difficulties in establishing this concept. These include:

- The recent increase in expertise on mental health issues at work among prevention professionals. In fact, the issues considered to be central were much more related to the physical health of workers;
- Professionals expressed concerns about how psychosocial risks were being handled within companies.
- The terms used were ambiguous. They could refer to both the cause of a problem and its effects, such as the term "stress," which can describe pressure at work or the resulting state of discomfort.

The emergence of this concept is therefore a recent development (E. Montreuil, 2014, p.7). It reflects advances in scientific research, changes in regulations, and companies' growing awareness of the need to address stress, ill-being, violence, etc. as part of occupational risk prevention.

3.2 Elements of the definition of psychosocial risks:

To date, there is still no recognized definition of psychosocial risks. As such, the definitions reserved for psychosocial risks show that the term "psychosocial risks" remains polysemic. Several definitions are therefore consistent with this. One such definition is given by:

- G. Vallery and S. Leduc (2023, p.8) define psychosocial risks as a concept "at the interface between the individual and their work situation, hence the term psychosocial risk. The term psychosocial risks refers to "stress" but also "internal violence" ("moral harassment," "sexual harassment") and "external violence" (exerted by people outside the company against employees).
- Brun et al (2007, p. 2) define psychosocial risks as "disorders that can be characterized by the appearance in one or more people of more or less noticeable signs which, if left unattended, can gradually worsen until they become pathological";
- M. Gollac and M. Bodier (2011, p. 13) define psychosocial risks as risks to mental, physical, and social health caused by employment conditions and organizational and relational factors that may interact with mental functioning.

These definitions show that psychosocial risks are risks that:

- Are invisible;
- Have no direct relationship with physical hazards (tools, equipment, products, etc.);
- Origin in the organization of work;
- Result from the confrontation between, on the one hand, the employee's expectations and, on the other hand, the demands of their work situation.

These psychosocial risks thus include risks arising from the interaction between the individual, their professional activity, and their relationships with others. The most common risks can take several forms, such as:

- **Stress**, which is the imbalance between a person's perception of the constraints of their work environment and their perception of their own resources to cope with them. From a biological point of view, stress is a process that characterizes the body's response to a situation that could harm its integrity;

- **Burnout**, which is a syndrome of physical, mental, and emotional exhaustion that occurs when a person struggles with professional fatigue. In this case, the worker gradually becomes exhausted due to the efforts made to maintain their body in the face of prolonged exposure to a stressful situation;
- **Antisocial behavior at work**, which is a psychosocial risk involving both:
 - Physical aggression (violence), which manifests itself in behaviors that harm the physical integrity of others;
 - Harassment, which manifests itself in discriminatory behavior, mockery, and intrusion into private life, damaging the psychological integrity of the employee.

3.3 The main factors of psychosocial risks:

A psychosocial risk factor is a characteristic of working conditions or work organization that may have a negative impact on the psychological, social, or physical health of employees. Bourbonnais and Vézina (2006) define psychosocial risk factors as "all organizational factors and interpersonal relationships in the workplace that may have an impact on health."

Identifying these factors is the first step toward better protecting employees and building a healthier work environment. These psychosocial risks stem from factors related to:

- **Work intensity and hours**: when the workload becomes too heavy, it can exhaust employees mentally, physically, and emotionally. They then feel overburdened without having enough energy to keep up. This constant pressure can also compromise their safety: fatigue or urgency sometimes cause them to neglect instructions, which increases the risk of accidents;
- **Emotional demands**: these correspond to the emotions that must be concealed and those that must be adopted in certain working conditions. Fear can be part of the emotional burden of work.
- **Lack of autonomy**: employee autonomy is considered a necessary condition for job satisfaction. Indeed, health is at risk when people are deprived of the opportunity to act, think, and debate, which are necessary conditions for developing, perfecting, and expanding their skills. Autonomy at work is therefore a source of satisfaction, knowledge enrichment, and control over one's career path.

But if you have no room for maneuver, you start to doubt yourself. Sometimes, it's as if you were nothing more than a machine: you have to put aside your own professional values and play along by displaying forced consent to the company's methods.
- **Social relationships**: a lack of recognition of an employee's efforts and contributions can lead to feelings of demotivation and disengagement.
- **Value conflicts**: these conflicts arise from demands that conflict with the professional or social norms of workers.
- **Workplace insecurity**: a work environment marked by conflict, harassment, or tense interpersonal relationships can increase stress.

3.4 The consequences and effects of psychosocial risks:

Psychosocial risks have a significant human impact. They profoundly affect the health and safety of workers while also negatively impacting the company's performance. This double penalty makes psychosocial risks a real scourge for everyone's well-being. These psychosocial risks are therefore harmful to:

- **Workers**, causing headaches, sleep disorders, high blood pressure, depression, and many other ailments. In general, psychosocial risks for workers can manifest themselves in emotional, behavioral, or physical symptoms, which we summarize in the table below:

Emotional symptoms	Behavioral symptoms	Physical symptoms
- Stress - Burnout - Depression - Feeling of unease or suffering - Nervous breakdowns or crying spells at work.	- Serious conflicts - Violence - Moral harassment - Sexual harassment - Alcohol and drug abuse - Use of psychoactive drugs - Suicide	- Pain (muscle or joint pain, headaches) - Musculoskeletal disorders (MSDs) - Sleep disorders - Digestive symptoms - Recurrent infections - High blood pressure - Cardiovascular disease

- **The company** causes absenteeism, decreased productivity and quality of work, as well as other consequences. These can manifest themselves at the workplace level and result in a deterioration of the work environment, which generates a multifaceted economic cost that can be immediate or long-term. This cost is related to the expense of:
 - Managing absenteeism and staff turnover;
 - Replacing staff;
 - Workplace accidents and occupational illnesses;
 - Decreased productivity (staff demotivation, waste, malfunctions, etc.) and strikes;
 - Poor quality of products or services;
 - Deterioration of the social climate and damage to the company's image.

3.5 Prevention of psychosocial risks:

Preventing psychosocial risks involves all the measures put in place to protect the mental health and well-being of employees at work. It must be an integral part of the overall occupational risk prevention process.

The principle of prevention is based on three distinct levels: primary, secondary, and tertiary. This distinction was established by the WHO in the early 1950s (G. Vallery, S. Leduc, 2023, pp. 94-95).

Primary prevention consists of combating risks at source. It acts upstream of psychosocial risk factors to eliminate them or, failing that, reduce them. It focuses on work and its organization, and refers to a collective risk prevention approach (e.g., regulating workload, ensuring clarity of responsibilities, etc.).

Secondary prevention involves individual management of psychosocial risks. The aim is to strengthen employees' resistance to psychosocial risk factors through coaching, stress management training, etc. Secondary prevention does not address the root causes of the problem and its effects may not be long-lasting.

Tertiary prevention, which involves caring for employees who are suffering, is intended to provide an emergency response to prevent their health from deteriorating.

3.6 Prevention of occupational risks in Algerian companies:

After conducting various research projects on Algerian regulations dealing with occupational health and safety, we have found that there are no laws directly addressing the mental health of workers. However, there are laws that address aspects of occupational health, safety, and medicine¹. Our research focused primarily on fundamental laws, in particular:

- Law 88-07 of January 26, 1988, relating to occupational health, safety, and medicine;
- Executive Decree No. 88-07 of January 18, 1988, relating to the role of occupational physicians in Algeria;
- Article 03 of Executive Decree No. 05-09 of January 8, 2005, which deals with joint committees and health and safety officers.

It is through these various regulatory texts that occupational risk prevention has been taken into consideration and integrated as a key element of occupational health and safety. In this context, given the importance of occupational risk prevention in Algerian companies, its development must therefore be addressed both within and outside the company. According to Algerian regulations on the subject, several actors are involved. Indeed, in:

- **Law 88-07 of January 26, 1988**, on occupational health, safety, and medicine (JORA No. 4 of 1988), the company manager is considered solely responsible for the safety and health protection of workers. He is therefore primarily responsible for prevention in the workplace. He ensures the health and safety of his employees by implementing the necessary measures;
- **Executive Decree No. 88-07 of January 18, 1988**, on the role of occupational physicians in Algeria. Occupational physicians support and advise employers and employees on the implementation of occupational risk prevention measures. Their main role is to provide medical supervision of employees by conducting regular visits and monitoring working conditions.
- **Article 03 of Executive Decree No. 05-09 of January 8, 2005**, on joint committees and health and safety officers (JORA No. 4 of January 9, 2005), where the joint health and safety committee (CHS), referred to as "the works council," plays an essential role in preventing occupational risks and strengthening the safety culture within the company.

This committee acts as an intermediary between management and employees. It plays a fundamental role in protecting the health and safety of workers within companies. It is composed of representatives of employers and employees. It is considered an essential forum for dialogue for identifying and resolving work-related issues. This committee must be established within each organization. It is composed of nine (09) employees with permanent employment contracts.

Given its important role in the prevention of occupational risks, pursuant to Article 03

¹ Algeria has a legislative framework for occupational health and safety, but it is often perceived as incomplete in light of changes in the world of work, requiring the development of specific provisions under Law 88-07 of January 26, 1988, for new risks and better enforcement of existing legislation.

of Executive Decree No. 05-09 of January 8, 2005, it is responsible for:

- Assessing occupational risks by working to identify the specific risks in each sector of activity, such as chemical, biological, or psychosocial risks;
- Proposing improvements to working conditions. This is done in close collaboration with company management and operational teams;
- Raising awareness, training, and informing staff about good safety and hygiene practices in the workplace. To this end, awareness-raising sessions on improving the prevention of accidents and occupational illnesses must be organized on a regular basis.

4. PSRs prevention measures in two Algerian companies:

In this article, we have chosen to focus on two Algerian companies. This choice is mainly motivated by the nature of each company's activity. The study covers:

- The Algerian company CAPREF-CSBA in Algiers;
- The company TOP GLOVES LATEX INDUSTRIES.

Before presenting the results of our research, we will first outline our research methodology, then describe the two companies studied, and finally present our findings.

4.1 Presentation of the research methodology:

We followed a research methodology based on both documentary research and practical case studies. For the documentary research, we consulted various writings, including:

- Books on occupational health and safety from the library of the Faculty of Economics, Business, and Management Sciences at Mouloud MAMMERI University in Tizi-Ouzou;
- Articles from scientific journals on psychosocial risks;
- Texts of laws and articles governing regulations, particularly those related to hygiene, health, and safety at work in the Algerian context;
- Scientific articles available online.

The literature review enabled us to define and synthesize the basic concepts useful for our practical case study of two companies: CAPREF-CSBA located in Algiers and TOP GLOVES LATEX INDUSTRIES located in Ain Temouchent.

To study these two companies, we collected information by conducting a survey that we began in February 2025 and completed in May 2025. To this end, we relied on:

- A targeted investigation on the professional platform LinkedIn, which we used as a source of information on the two companies surveyed;
- The use of a digital questionnaire designed with Google Forms for its ease of use and ability to easily structure and export data;

This questionnaire includes closed questions to facilitate processing by company managers and open questions to report the opinions and views of the managers of the two companies studied. This questionnaire is distributed to managers in charge of the Health, Safety, and Environment department.

4.2 Presentation of the companies studied:

CAPREF-CSBA (CABines PREFabriquées-Structures préfabriquées en Bois Alger) is a company specializing in the strategic business area of "Prefabricated Cabins and Chalets" and located in Algiers.

The company is currently known as **Divindus CAPREF Spa**. It was created through the merger and absorption of seven (07) former subsidiaries of the DIVINDUS Group. The core business of these subsidiaries is the manufacture of "wooden cabins and prefabricated structures."

Its purpose is the production and marketing, in accordance with quality and safety standards, of:

- prefabricated permanent chalets for the tourism sector;
- mobile Saharan cabins perfectly suited to the needs of government institutions, local authorities, oil companies, public works, and even private individuals.

The company's main objective is to provide its customers with the best products and services while ensuring their complete satisfaction through its commitment to quality and innovation.

TOP GLOVES LATEX INDUSTRIES is a limited liability company operating in the pharmaceutical sector. Located in Ain Témouchent, Algeria, the company has been operating since 2016, mainly in the design, production, and marketing of gloves for medical and surgical use, making it the leader in the national market. Its goal is to satisfy its customers by offering products that comply with international quality standards.

4.3 Presentation of the results obtained:

The processing of the responses obtained from the HSE managers of the two companies CAPREF-CSBA in ALGIERS and TOP GLOVES LATEX INDUSTRIES enabled us to present the results of this research in the following three points:

- The situation of companies in relation to psychosocial risks;
- PSR prevention measures;
- Actions to improve the prevention of psychosocial risks.

a. The situation of companies in relation to psychosocial risks:

Today, in Algerian companies, psychosocial risks are a major issue for employee health and safety. Indeed, the HSE managers of both companies state that psychosocial risks have gradually emerged in their companies. They argue that employee exhaustion is evident in several aspects of the company. These generally include:

- Stress, which is often linked to low self-esteem and pressure. Work-related stress has become a real problem with many negative repercussions, not only on the health and well-being of employees but also on the productivity of the company.
- Moral or sexual harassment;
- Overwork;
- Loss of motivation;
- Hyper-empathy;
- Internal conflicts between management and employees or external conflicts with a service provider or customer.

Before examining existing prevention measures, it is necessary to describe the situation of the two companies regarding psychosocial risks, that is, to identify the types of risks observed, their perceived severity, their main causes, and their consequences for employees and the organization.

A1. The prevalence of psychosocial risks in the two companies:

Work-related stress, internal conflicts, and loss of motivation are the three most prevalent risks in the two companies surveyed (see Table 1).

Table 1: Types of psychosocial risks observed by HSE managers (No. 2).

Type of psychosocial risk	CAPREF-CSBA	TOP GLOVES	Average
Work-related stress	Yes	Yes	100%
Burnout/exhaustion	Yes	No	50%
Moral harassment	No	Yes	50%
Internal conflicts	Yes	Yes	100%
Loss of motivation	Yes	Yes	100%

Source: Compiled by us.

These three risks are followed by the other two types of risks, namely burnout in the case of CAPREF-CBA and workplace bullying in the case of TOP GLOVES. We conclude that stress is therefore not an isolated risk.

A2. Existence and nature of preventive measures:

Preventive measures are nonexistent at TOP GLOVES; consequently, there is no dominant approach to preventing **psychosocial** risks within the company, and there is not even an active joint health and safety committee (see Table 2).

Table 2: Status of psychosocial risk prevention measures.

Indicator	CAPREF-CSBA	TOP GLOVES
Existing preventive measures	Yes (partially)	No
Dominant approach	Secondary	None
Joint Health and Safety Committee	Yes	No

Source: Compiled by us.

At CAPREF-CSBA, however, some preventive measures are in place, including the

establishment of a joint health and safety committee that is active within the company.

A3. Causes of stress:

Work overload is the primary stress factor in both companies. This primary factor is followed by a lack of recognition at CAPREF-CSBA and hierarchical pressure at TOP GLOVES (see Table 3).

Table 3: Stress factors ranked by importance (1 being the most important)

Causes	CAPREF-CSBA	TOP GLOVES	Average
Excessive workload	1	1	1
Lack of recognition	2	3	2.5
Pressure from management	3	2	2.5
Conflicts with clients/the public	4	4	4

Source: Compiled by us

Conflicts with customers or the public are the fourth most common source of stress cited by both CAPREF-CSBA and TOP GLOVES.

A4. Observed consequences

Table 4: Observed consequences in both companies.

Consequences	CAPREF- CSBA	TOP GLOVES	Average
Increased absenteeism	Yes	Yes	100%
High turnover	Yes	No	50%
Decrease in productivity	Yes	Yes	100%
Internal conflicts	Yes	Yes	100%
Absences due to stress/burnout	No	Yes	50%

SOURCE: compiled by us

The consequences of psychosocial risks manifested themselves in a decline in operational activity and a deterioration of the work environment. Indeed, the decline in operational activity led to a drop in productivity in both companies.

As for the deterioration of the work environment, this led to absenteeism and internal conflicts, not to mention staff turnover at CAPREF-CSBA and work stoppages at TOP

GLOVES.

In summary, the results of our survey, conducted among HSE managers at both companies, reveal that occupational stress is reported in **100%** of cases (2 out of 2 companies). However, internal conflicts and loss of motivation are also present in **100%** of the organizations surveyed. Regarding preventive measures, **only one in two companies (50%)** reports having partial measures in place that are exclusively secondary in nature (symptom management) rather than primary (prevention of causes). Neither of the two companies has implemented systematic assessment of psychosocial risks using quantitative indicators (absenteeism rates, turnover, etc.). These results show that while stress is indeed a major issue, the lack of structured prevention applies to all psychosocial risks, not just stress.

b. Preventive measures for psychosocial risks under consideration:

The managers of both companies are considering implementing preventive measures such as:

- Providing managers with tools to identify symptoms of stress, burnout, or isolation among their employees;
- Ergonomically designing workstations to prevent fatigue and physical stress;
- Ensuring a balanced distribution of tasks to prevent overload;
- Conducting internal surveys on well-being at work;
- Adjusting workloads to employees' abilities and resources;
- Rethink the organization of work to make it more motivating;
- Ensure that tasks and responsibilities are well distributed;
- Create a participatory dynamic around the changes that affect them;
- Establish transparent communication about the company's roadmap to reassure teams;
- Strengthen cooperation between all stakeholders in the company;
- Monitor employees' mental health through regular surveys and audits to anticipate and prevent psychosocial risks.

c. Actions to support the planned measures for preventing psychosocial risks:

HSE managers believe that additional measures are needed to ensure the implementation of psychosocial risk prevention measures. To this end, they suggest:

- **Improving social dialogue within the company** by encouraging open communication between management and employees, which will enable several problems to be resolved quickly and effectively and create a healthy and prosperous working environment;
- **The implementation of employee assistance programs** offering support resources, particularly for stress management. These programs will take the form of:
 - training sessions on stress management;
 - initiatives to improve well-being at work, such as creating pleasant workspaces;
 - relaxation techniques such as meditation, yoga, walking, etc.;

- **Clearly defining the company's expectations of its employees.** Indeed, management's clear definition of the objectives expected of its staff greatly reduces uncertainty and, consequently, stress at work, as the responsibilities and roles of each employee will be clearly defined;
- **Implementing measures that promote a work-life balance for employees.** These measures will include, among other things, adjusting working hours by:
 - Encouraging flexible working hours;
 - Defining regular work breaks;
 - Improving leave policies.

However, implementing all these measures to improve the prevention of psychosocial risks requires other measures to ensure that the prevention measures are successful. These consist of:

- Training human resources managers and those responsible for health, safety, and the environment (HSE) within the company;
- Raising awareness among managers about their employees' working conditions;
- Improving internal communication within the company and listening to psychological suffering at work.

5. Conclusion

Changes in the overall business environment have had an impact on the socio-economic status of employees. Indeed, the increasing focus on overall performance (economic, environmental, and social) has led to a search for employees who are increasingly qualified and, above all, committed and dedicated to achieving the company's objectives. This situation has created a working environment that is certainly motivating and competitive, but also stressful and exhausting.

However, a stressful and tiring work environment has consequences for both the physical and mental health of employees and their professional performance, thus affecting the overall performance of the company.

The physical and mental health of employees is now an important issue that is taken into consideration by companies and governments in view of the psychosocial risks that have become a reality in today's world of work. Psychosocial risks, known by the acronym PSR, manifest themselves in several forms, such as stress, workplace violence, burnout, overwork, loss of motivation, hyper-empathy, and conflicts between management and employees or between employees and a service provider or customer.

Failure to take these risks into account exposes the company to risks of loss of performance and profitability. For this reason, addressing PSRs is essential for a calm and efficient working environment.

In Algeria, psychosocial risk management is considered a key factor in ensuring a professional, healthy, balanced, and sustainable working environment.

As part of the survey we conducted at two Algerian companies, CAPREF-CSBA in Algiers and TOP GLOVES LATEX INDUSTRIES, the responses to the questionnaire distributed to

managers at both companies confirm our working hypothesis that *stress remains the main psychosocial risk in the Algerian workplace*.

To prevent these risks, particularly stress, the HSE managers of both companies plan to implement key actions such as:

- Identifying the source of stress and tension in the workplace;
- Training employees in stress management and how to achieve a work-life balance;
- Involving employees in decision-making and in discussing and resolving work-related issues.

All these actions being considered by the managers of both companies lead us to the answer to our main question, namely that measures to prevent psychosocial risks have not yet been implemented, so it is up to managers to implement these planned measures.

Bibliography List :

1. ALIS D, DUMAS M. (2010). Risks and suffering at work: new constraints, new remedies. Dunod Editions, Paris.
2. BENMESSAOUD H. (2008) Burnout Syndrome Among Nursing Staff at Two Hospitals: the Algiers University Hospital and the CPMC. Doctoral Dissertation in Medical Sciences. Specialization: Occupational Medicine.
3. BRUN J.P., BIRON C. and IVERS H., (2007). Strategic approach to preventing mental health problems at work, IRSST Report R-514.
4. CHEMAA F. (2009). Identification and Analysis of Occupational Stress Factors Among Healthcare Workers. Doctoral Thesis in Medical Sciences. Specialization: Occupational Medicine. Constantine.
5. CHOUANIERE D, LANGEVIN V. (2011). Occupational risk prevention: stress and psychosocial risks. Engineering techniques. France.
6. COUTROT T, MERILLIOD C. (2010). Psychosocial risks at work: available indicators. DARES Report No. 081. France.
7. DUFOUR N, DIARD C, BENCHEIKH A. (2021). Prevention of psychosocial risks and accidents at work. Maxima Editions, Paris.
8. JEGO S.GUILLO C, (2016). Teachers facing psychosocial risks: comparison of teachers with certain private and public sector managers in 2013. Directorate for Evaluation, Forecasting and Performance (DEPP), Ministry of National Education, France.

9. HAUBOLD B. (2008). Psychosocial risks: identifying, analysing, and preventing human risks. Organization's Editions, Paris.
10. HARGUEM Basma, HADJ MABROUK Habib (2015). Knowledge management: contribution to the analysis, assessment, and prevention of psychosocial risks at work. Communication and Management Review No. 1/2015.
11. INRS. Psychosocial risks: key points to remember. <https://www.inrs.fr/risques/psychosociaux/ce-qu-il-faut-retenir.html> (accessed on 12/15/2024).
12. Gollac M., Bodier M. (2011), Measuring psychosocial risk factors at work in order to control them, Report to the Minister of Labour, Employment, and Health - https://travailemploi.gouv.fr/IMG/pdf/rapport_SRPST_definitif_rectifie_11_05_10.pdf (accessed on 11/20/2024).
13. KAID TLILANE Nouara. (2009), Health and safety at work, development and globalization, proceedings of ^{the} second health economics symposium. Editions EL AMEL, Bejaia, Algeria.
14. KARNANI Samir (2016). Psychosocial risks and organizational democracy: an observatory for Algeria. Doctoral thesis in management sciences, CNAM, France.
15. MACHADO T. (2015), the prevention of psychosocial risks: concepts and intervention methodologies. University Presses of Rennes.
16. MONTREUIL Elodie (2014). Preventing psychosocial risks: tools for addressing hardship and preserving health at work. Dunod Publishing, Paris.
17. VALLERY Gérard, LEDUC Sylvain (2023). Psychosocial risks. Edition Que sais-je ?^{4th} edition, Paris.
18. CAPREF-CSBA available on the website <https://www.divindus-capref.dz/units>. (accessed on 04/20/2025).
19. TOP GLOVES LATEX INDUSTRIES available at <https://topgloves-latexind.com/> (accessed on 20/04/2025).
20. ZAWIEJA P. (2014), Dictionary of psychosocial risks. Editions of Seuil. Paris.