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Psychosocial risks and relational distress in the Salvadoran workforce

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Abstract: The purpose of this research is to understand, from the perspective of workers in Salvadoran organisations, the impact of exposure to psychosocial risks on their physical and psychosocial health. The study uses a mixed-methods, descriptive, and exploratory approach with a sample of 212 participants. The findings reveal the presence and exposure to six types of psychosocial risks associated with relational distress, with women, public sector employees, and on-site workers reporting a higher prevalence. The results highlight an urgent need for organisational decision-makers to implement preventive and corrective measures to safeguard worker well-being, which is vital for the productivity, competitiveness, and resilience of the country's businesses.

Keywords: psychosocial risks; relational distress; occupational health; organisational intervention; Salvadoran companies.

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1 Introduction

In the workplace, the term psychosocial risks refers to conditions that affect workers, resulting from poor design, organisation and management of work activities, and a social environment that is harmful to productive activities. These conditions can trigger psychological, physical, economic and social issues to the detriment of the workers. And it is in line with what was previously stated that ILO (n.d.), University of Valencia (n.d.) and the National Institute of Work Security and Health (INSST) (2024) agree in pointing out that psychosocial risks are situations arising from the poor design, organisation and social environment of the workplace, which end up harmfully affecting the mental and physical health of workers.

Definitely, the psychosocial risks and their repercussion on the workers' physical and psychological health pose some of the most challenging situations to control within the security and health environment at the workplace. These are harmful consequences to the workers' health, both individually and collectively, leaving no doubt that there is an impact on the company's performance, productivity, resilience and competence, and therefore, on the overall economy [European Agency for Safety and Health at Work (EU-OSHA), n.d.b].

The harm on the workers' physical and psychological health occur due to a variety of emerging risks that imply new challenges to security and health at work, where psychosocial risks at the workplace are recognised as emerging risks that must be identified, analysed, assessed and treated (INSST, 2018).

Therefore, this issue is really becoming more discouraging with time. As a result, some institutions across the world are promoting regulations to contribute to a safer and healthier workplace environments for all workers. They have embarked on the task of persuading organisations about the need to preserve the psychosocial wellbeing of their workers (Jiménez, n.d.).

In this regard, the European Agency for Safety and Health at Work (EU-OSHA) (2021) has stated that workers suffering from work stress may present health complications. The harmful impacts on the worker also impact the company and society at large. In this regard, the Framework Directive on Safety and Health at Work (Directive 89/391 EEC), approved in 1989, establishes regulations to undertake the improvement and security of work environments.

Nowadays, across the world, there are efforts to develop a comprehensive approach to provide mental health to workers with the idea that by implementing such an approach effectively, concrete actions will be taken to achieve a positive impact on the workers' psychosocial health, and therefore, on society at large (European Commission, n.d.).

The European Union typifies working people's psychosocial health as an issue that must be addressed using a comprehensive approach to prevent and manage successfully the psychosocial risks regardless of the company's size or sector. Managing psychosocial

risks related to productive activities is not only a moral duty and a good investment for employers, but it is also a legal duty as established in the Framework Directive 89/391/EEC, that addresses the issue of work-related stress, and harassment and violence at the workplace (EU-OSHA, n.d.a).

What is at issue is exposure to psychosocial risks in harmful work settings where the workers perform their job, and that surely have an impact on their psychic and physical health, as well as on the quality and results of their work. Using an analogy, it can be understood that it is impossible to get the same result if you cut metal with a manual saw compared to a power saw. The same applies to workers if they do not have work setting that meets their needs to perform their job; therefore, the product of their labour will fail to meet expectations (Jiménez, n.d.).

Every productive activity has its own risks for the person who performs it. That is why it is necessary and urgent to identify, analyse, and assess the psychosocial risks related to the job position, in order to determine the ways that the psychosocial risk factors of its demands, the emotions that arise from it, the relationships or social support, and the technology upset the physical and psychosocial health of workers (Vaquerano et al., 2024).

For example, research conducted on this topic in Ecuador highlights job insecurity, work overload, and a lack of opportunities for professional development as the main factors driving the deterioration of workers' psychosocial health. These findings clearly demonstrate the importance of designing and developing assessments consistent with the impact of psychosocial risks, as well as planning interventions to prevent and mitigate their effects (Orozco Moreno et al., 2024).

Certainly, there are episodes of stress when the workers are exposed to risk factors in the workplace such as psychosocial and/or physical risks that may originate from emotional factors such as feeling nervous or irritated; cognitive, like reduced attention and perception and forgetfulness; behavioural such as acting aggressively, impulsively, or making mistakes; and physiological, like increased heart-rate, high blood pressure and hyperventilation (Hassard and Cox, 2015).

There is no doubt that the changing world of work and psychosocial risks are directly influenced by the nature of the work environment and the type of job performed. Regarding psychosocial risks, they have to do with actual suffering like work-related stress, and violence and harassment in the work environments. These situations pose a real challenge to ensure the workers' health and security (Hupke, 2022).

In line with the previous statements, the EU-OSHA (2021) in 1989, established measures to encourage innovations in processes to improve the safety and health of workers at the workplace, including the following:

- a The term 'working environment' was set in accordance with International Labor Organization (ILO) Convention No. 155 and defines a modern approach, taking into account technical safety as well as general prevention of ill-health.
- b A baseline on security and health levels was established to benefit workers with the purpose of unifying criteria.
- c It is mandatory for the employers to take appropriate preventive measures to make work safer and healthier at the workplace.

- d The introduction of the risk assessment principle centred around hazard identification, worker participation, introduction of adequate measures with a priority on eliminating risk at the source, documentation and periodical re-assessment of workplace hazards.
- e Putting in place prevention measures implicitly stresses the importance of new forms of safety and health management as part of general management processes of the organisations.
- f Adjusting national legal frameworks due to inadequate national legislation not meeting the new directives.

In that sense, the most appropriate measures to manage psychosocial risks effectively are those included in a preventive, holistic and systematic program, focused on identifying, analysing, assessing and treating the main promoting factors, the barriers and the support needs (EU-OSHA, n.d.).

In fact, many workers express being highly motivated by the challenges they face in their work environments. However, when there is time pressure due to the job requirements, as well as other type of situations – like the stressing factors –, it turns extended and unmanageable, compared to the capacity to deal with the context, leading to stress episodes. These ailments originate from the pressure and the unsurmountable and extended demands that surpass the resources, capacities and skills of the worker, which causes considerable deterioration of their physical and psychosocial health (Hassard and Cox, 2015).

On the same line, the INSST (2023) states that close to 32% of the population surveyed expressed dealing with time pressure or work overload. These are psychosocial risk factors that are harmful to their psychosocial health. Also, the INSST (2023) revealed the psychosocial risk factor of having difficult relations with clients, patients, students, etc., as stated by 16% of the working people surveyed.

These are examples of work contexts that imply some type of psychosocial risks for the workers: excessive work overload, contradictory demands and lack of clarity in the roles, lack of participation in making decisions that affect the worker, lack of influence on how to carry out the job, poor management of organisational structure changes, precariousness, inefficient communication systems, lack of support from management or co-workers, psychological or sexual harassment, and complicated internal and external clients, to name a few (EU-OSHA, n.d.a).

According to Hupke (2022) the International Labor Organization (ILO) defined psychosocial risks, in 1986, in terms of their interactions among job content, work organisation and management, and other environmental and organisational conditions, on the one hand; and, on the other, working people's competencies and needs.

In line with that, Quirónprevención (2018) states that, in view of the fact that addressing psychosocial risks is a complex task, they can be grouped as follows:

- a Stress is the most generalised because it is an overall response to all psychosocial factors. Stress is characterised by high levels of excitement and response, and the common feeling of not being able to cope with them. When there is chronic stress, the worker reaches a state of job exhaustion or burnout.

- b Violence in the workplace, exercised from a position of power against an individual or group of workers in a job-related environment. Violence is typified as physical and psychological violence.
- c Workplace harassment, closely linked to a poor organisational and toxic climate, as well as harmful behaviours amongst the workers at all levels.
- d Sexual harassment, characterised by sexual blackmail arising from a hostile work environment.
- e Contractual insecurity, related to the uncertainty caused by work instability and its ever-changing circumstances.
- f Conflict between work and family, manifested both in the family-work combination as well as work-family.

The University of Valencia (n.d.) proposes that the psychosocial risk factors are triggered by work conditions where some of the following characteristics are present:

- a Considerable work loads or time pressure.
- b Contradictory demands.
- c Lack of clarity in relation to the job roles.
- d Inappropriate communication systems.
- e Poor management of structure changes within the organisation.
- f Lack of support from management or co-workers.
- g Disagreements in personal relationships.
- h Harassment, aggression and violence.
- i Problems balancing work and personal responsibilities.

Vaquerano et al. (2023) indicate that the Healthy Talent Model© proposal is based on the study of psychosocial risks considering three conceptual pillars:

- a Psychosocial factors linked to the management of psychosocial conditions at work, such as the philosophy, policies, organisational culture, work relations, work conditions, the job position design, and the quality of work.
- b Psychosocial risk factors, meaning the psychosocial aspects that may become psychosocial risks if not addressed. The factors related to the workers are called relational distress, and have to do with feelings of aggressiveness, guilt, dignity and time use. Those factors related to the job position are called operational distress and include the demands, emotions, social support and technology. Finally, there are factors related to the organisation that are grouped as environmental distress, meaning the work climate, conciliation, precariousness, and promotion.
- c Psychosocial risks or circumstances imply the possibility of significant harm to the workers' psychosocial health at the companies, when they are not addressed adequately, and effectively.

This is a real problem. According to the existing research and in line with Hassard and Cox's (2015) statements there are four theories that explain stress as it relates to work environments:

- a The person-environment fit theory suggests that one of the main sources of stress is on one hand, the failure to match the workers' skills, resources and capacities; and on the other, the demands of the work environment.
- b The job demand control theory suggests that work pressure results from the interaction between the psychological demands of work activities and having control over the work done.
- c The effort-reward imbalance model suggests that the stress related to the imbalance between effort and reward arises from an unclear job contract or when the worker perceives very few options of alternative job opportunities. In that sense, the viable options left for the worker are: to accept the imbalance under the justification with the expectation of better working conditions in the future, or to face the job requirements with a high level of commitment.
- d The transactional model is based on the interaction between the workers and their environment, highlighting the underlying psychological and physiological components that support it. This model notes that stress can be expressed physiologically, psychologically, behaviourally and socially, with harmful results both for the worker and the company. This is due to the relation between the psychosocial risks and health outcomes as mediated by diverse factors that intertwine in a complex correlation between the workers and their work environment.

Therefore, it is important to emphasise that, from a personal standpoint, a worker may imagine occupational stress as a result of the interpersonal relations that must be built or performed at the workplace. Consequently, if workers perceive they are treated with violence and/or develop some level of guilt related to job circumstances that are not, in any way, part of their job roles and, as such, are not expected; situations contributing to damage their personal and/or professional dignity; and/or are not allowed to manage their own work time adequately to deliver the expected outcomes, then, this leads to an unintended deterioration of their psychosocial health (Echeverría et al., 2023).

As mentioned before, there are negative consequences for the company. They range from an overall decline in organisational performance to an increase of absenteeism and presenteeism, which is when workers show up while sick, affecting their productivity. There is more and more staff turnover and the accident and injury indicators are higher. It is noteworthy to point out that sick leaves related to workers' psychosocial health tend to be longer than those related to other causes. Moreover, job-related psychosocial risk factors are a significant component of increased early retirement rates. As a result, the costs for the organisation and society at large become significant, as they represent thousands of millions of monetary units for the economies at a global level (EU-OSHA, n.d.b).

It is of utmost importance to be aware that the relation between psychosocial risks and the effects on health are clearly organised by a series of factors. Organisational culture and psychosocial risks have become a very important research topic focused on making workplace settings healthier and more productive, meaning work environments that are free of psychosocial risks (Vaquerano and Rosales, 2025).

The effective management of work-related stress requires the design of strategies focused on the worker and the workplace to ensure the highest wellbeing possible to the worker. According to Vaquerano et al. (2023) the Healthy Talent Model© proposes three types of interventions:

- a Primary prevention is based on the absence or low presence of psychosocial risk factors and/or psychosocial risks. It is a proactive intervention for the entire worker population.
- b Secondary intervention occurs when there is moderate presence of psychosocial risk factors and/or psychosocial risks. It proposes a reactive intervention when the at the first sign of symptoms in workers exposed.
- c Secondary intervention occurs when there is moderate presence of psychosocial risk factors and/or psychosocial risks. This is a remedial intervention to address the negative impact on the psychosocial health of the affected workers.

As proposed by Hassard and Cox (2015) this is a comprehensive stress management and prevention effort. This implies designing and implementing comprehensive strategies to address the causes of work stress; meaning, psychosocial risks and their effects on the workers' health. The strategies must consider the type of treatments that are appropriate for the three levels of interventions explained in the previous paragraphs.

Psychosocial risks must be identified, analysed, assessed and managed adequately, considering workers' participation and involvement throughout the entire process as one of its key elements. It is a priority to sensitise and inform all workers and to ensure their participation for the proper management of psychosocial risks. The idea is to apply a participatory approach where business owners, executives and workers get involved in the comprehensive management of psychosocial risks (University of Valencia, n.d.).

It is a fact that workers' health deteriorates due to exposure to psychosocial risks. This situation has led to collect extensive evidence to support such a relation. More specifically, it has been confirmed that exposure to psychosocial risks in work environments causes a harmful impact on the workers' physical, psychological and social health; and, at the same time, on the health and resilience of companies (Hupke, 2022).

Psychosocial risks in the work environment are the result of defective organisation of work and a negative social environment that causes harmful effects on the workers' physical, psychic, and social health (Quirónprevencion, 2018).

Consequently, it is necessary and urgent for the organisations to manage psychosocial risks effectively, and identifying, analysing, and assessing psychosocial risks is considered the best strategy to fight them. There is no doubt that identifying, analysing and assessing psychosocial risks is a necessary step to detect, prevent and/or correct the potential problematic conditions that such risks create. The process, in general, implies a process with multiple factors that considers elements of the productive activity, the work organisation, the work environment and performance, to mention the most relevant (University of Valencia, n.d.).

As stated by the National Institute of Work Security and Health-INSST (2022) the task that has been postponed by many companies worldwide is identifying, analysing, and assessing the psychosocial risk factors with the intent to eliminate, mitigate and/or control them to stop or reduce their negative effect on workers' health.

Echoing the statements of the European Agency for Safety and Health at Work (2025) in order for work environments to be free from psychosocial risks, it is fundamental to discuss the psychosocial, cultural and work environment where the workers perform their jobs. This, keeping in mind that one of the core pillars of such discussion is to certify the physical and psychosocial safety in the activities performed by the workers, instead of focusing solely on the job duties, and only later, on the psychosocial and cultural health in work settings.

In conclusion, according to the European Agency for Safety and Health at Work (2024) there are many factors putting pressure on the job, mainly in the current changing reality where the use of technology is being imposed as a competitive strategy. This context in many cases hurts the workers' psychological and physiological health. However, some companies are using an approach centred on workers' participation from the early stages of adopting and implementing technology to minimise the risks to their psychosocial health.

2 Research methodology

This study followed a series of steps described below:

- a Step 1: Designing the data collection tool. The tool was designed on a Google Form, making sure that the questions matched the binary answers requested.

It is important to point out that each of the 17 questions comprising the body of the data-collection tool aimed to find out the level of exposure of workers in El Salvador to psychosocial risks linked to relational distress at the workplace.

The survey questions were grouped in four major categories, as detailed below:

- Questions associated to the aggressiveness factor: this category includes the first three questions aiming to learn about the exposure to the psychosocial risk of personal violence.
- Questions associated to the guilt factor: these are questions 4 to 10 in the survey, aimed to determine the presence of the psychosocial risks of low-severity abusive behaviours and psychological harassment or mobbing.
- Questions associated to the dignity factor: this category covers questions 11 to 13 in the survey, focused on identifying the presence of the psychosocial risks of discriminatory harassment and sexual harassment.
- Questions associated to time use: these are questions 14 to 17 in the survey, aiming to find out the exposure to the psychosocial risk of work addiction or *workaholism*.

Table 1 shows the tool used to collect the data. This was validated by consulting experts to evaluate each of the 17 questions in the survey to test their understandability, ambiguity and clarity.

Table 1 Tool to collect data on the psychosocial factor and risk of relational distress

#	Questions	Associated factor	Psychosocial risks
1	I am aware of episodes of aggressive communication that have caused harm and/or discomfort deliberately.	Aggressiveness	Personal violence
2	I am aware of episodes of actual violence (physical and/or psychological) or in the form of a threat.		
3	I am aware of recurring behaviours of disobeying work regulations and/or abusing the work material.		
4	I am aware of episodes of disrespect and/or a lack of courtesy.	Guilt	Low-severity abusive behaviours
5	I am aware of relations that put at risk or deteriorate the quality of social relations.		
6	I am aware of episodes of hostile statements or attitudes with the manifest intention of doing harm.		
7	I am aware of episodes of aggressive behaviours or actions attempting against moral integrity and dignity.		
8	I am aware of repetitive and prolonged psychological violence behaviours.	Dignity	Psychological harassment/mobbing
9	I have had feelings of being undervalued or of being pressured to quit my job.		
10	I have felt guilty or ashamed, whether in public and/or in private.		
11	I have felt excluded from my work team.		
12	I have learned of offensive behaviours of sexual nature.		
13	I have learned of discriminatory behaviours based on racial/ethnic, religion and/or disability reasons.	Use of time	Discriminatory harassment
14	I have worked more hours than those mandated by my job contract.		
15	My job allows me to disconnect at the end of the work day.		
16	My dedication to work has affected negatively my personal, family and/or social life.		
17	I have worked over 44 (ESA) hours per week without extra compensation.	Work addiction/workaholism	Work addiction/workaholism

Source: Vaquerano et al. (2023)

Furthermore, it should be noted that the 17 questions comprising the data collection instrument were designed, tested, and implemented by the Talentfullness Institute of Spain using the HTMetrics PCAS Tool©. Furthermore, to be included in the selected

sample, a worker must meet the criteria of being formally hired by a company and performing their duties in person, from home, or in a hybrid format.

Also, it is important to point out that, in order to design the survey, the answers to the questions had to be binary. This type of answer is more appropriate to measure the level of psychosocial risk of experiencing relational distress in a specific workplace setting. This situation implied providing answers with only two options: yes or no.

The questions included in the survey assessed the presence of psychosocial risks of relational distress in the workers of El Salvador at their workplace environments.

It is also important to emphasise that the approach developed here focuses on a descriptive and exploratory quantitative and qualitative approach, which definitively allows for documenting the prevalence and characteristics of psychosocial risks in the workplaces of Salvadoran organisations. This is because experience indicates that this method is the most appropriate for pioneering research in this context, as it seeks to establish an initial perspective and lay the groundwork for future research of greater scope, without attempting to identify causal or correlational relationships between variables.

- b Step 2: Primary data collection. Data collection was done using the survey form designed in Google Form and by using the snowball strategy. The strategy identified a small group of workers from public and private companies in El Salvador who met the basic criteria to participate in the data collection sample. Then, the small group was asked to share the survey with other coworkers successively until the sample was complete.
- c Step 3: setting a time line: It is relevant to emphasise that the time line for data collection was set between March and August 2022.
- d Step 4: selecting and reviewing secondary sources of information. This was done by reviewing an extensive and diversified selection of reliable publications on the research topic.
- e Step 5: Sampling. The research was done at the national level while the sample was selected in a weighted manner using as reference the Statistics Annual Journal of the *Instituto Salvadoreño del Seguro Social (ISSS)*, as well as the representation in the public and private working sector as of October 2021 (ISSS, 2021). The sample included 212 participants working at a company in person, from home, or in a hybrid fashion; with 63 people from the public sector and 149 from the private sector. The statistic parameters used to calculate the sample were 2.5% of confidence level (Z); 95% of population's attribute sampling acceptance (p); 5% of population's attribute rejection sampling (q) and 2.5% of estimated research error margin (e).
- f Step 6: Data analysis For the data analysis process, the tables presented in the study results section were processed by cross-referencing each of the following classification variables:
 - worker gender
 - worker generation
 - productive sector of the company where they work

- size of the institution where they work
- position within the organisation
- work modality.

There is no doubt that the importance of doing this type of study is identifying the impacts on the workers' physical and psychosocial health. Moreover, this serves as a basis for decision makers to start ongoing improvement processes to impact positively in the prevention of psychosocial risks related to relational distress. This is about promoting a relation between employer and worker based on the principle of well-being at the workplace, committed to the protection of occupational health in their workplace.

On the other hand, this is a mixed study, as it is quantitative-qualitative-descriptive-exploratory. According to Barrantes (2014) this study falls into the naturalist scientific paradigm or interpretative humanist-naturalist paradigm, because it centres around the analysis of the interpretation of the results derived from human actions and life in society. Likewise, according to Abarca et al. (2012) one must consider that regardless of its discrepancies, both qualitative and quantitative data have an equivalent epistemological value because they are collected using accurate techniques and methods. In the same line, following Hernández et al. (2014) this is an effort of quantitative and qualitative research because it proposes dissemination of the findings that can be generalised to an entire universe. It is descriptive because it is centred in determining the singularities or characteristics of the population studied. It is exploratory because it is a phenomenon that in the reality of the Salvadoran context has not been studied, whereby the results cannot be defined as totally conclusive.

3 The psychosocial risks of relational distress among working people in El Salvador

The information presented in this section centres, first, on indicating the introductory aspects associated with the psychosocial factors and risks of relational distress in the Salvadoran workplace environments. Subsequently, the findings from the perceptions of workers of Salvadoran companies based on their gender, generation, productive sector, size of the organisation and the position they have in the company are shared.

3.1 Introduction

The prolonged existence of psychosocial risks resulting from relational distress in the work settings is harmful for a healthy workplace environment because it causes the workers to suffer some type of physical or psychosocial ailment that in the end, hurts the companies as well.

These are relational distress ailments that, according to Vaquerano et al. (2023) are related to the following psychosocial risk factors:

- *Aggressiveness*: This is a behavioural factor that becomes normal in specific contexts and is triggered by different moods. It is usually in response to survival needs, without destroying the opponent. However, if aggressiveness is analysed as a psychosocial risk factor in the workplace environment, it becomes evident that the workers who suffer from it express aggressive behaviour when trying to impose their

point of view, indicate a challenge, claim their rights, or meet their needs. This may lead them to engaging in practices that result in mistrust, guilt, or shame, characterised by using some type of physical or verbal violence. The psychosocial risk arising from the psychosocial risk factor of aggressiveness is *personal violence*.

- *Guilt*: This is an organisational cause of stress that has a negative impact on the workers' physical health and emotional wellbeing as it causes negative emotions on their psychological wellbeing by deteriorating self-esteem and/or deteriorating work satisfaction, and performance as it causes tension, reduces collaboration, trust and commitment (Moronia and Dabos, 2014). Consequently, psychosocial risks arising from this factor are known as low-severity abusive behaviours, and psychological harassment or *mobbing*.
- *Dignity*: Concerning dignity in the workplace environment, the first thing to acknowledge is that workers are autonomous human beings who can think, decide and act; and therefore, are accountable for their actions and decisions. In light of that statement, having dignity requires being treated as the end receiver of respect and not as a means to achieve something, regardless of the circumstance or situation. In the workplace context, when dignity is mentioned as a psychosocial risk factor, it is about workers experiencing psychosocial risks such as discriminatory harassment and sexual harassment.
- *Time use*: The focus of this psychosocial risk factor is on how workers benefit from their available time, meaning, the dedicated breaks to pursue a social or personal activity. If the psychosocial risk factor of how they use time is analysed from the workplace environment perspective, it is fundamental to be aware that all workers perform their jobs within the period of their daily schedule, which requires planning their time to make the most out of it. Therefore, it is valid to say that all workers in an organisation will examine the best distribution of the amount of their available time so that they meet the expected outcomes by maximising their performance. In the Salvadoran workplace environments, as well as in other parts of the world, the workers' use of time as a psychosocial risk factor translates to the psychosocial risk of work addiction or workaholism.

Thus, it is important for decision makers in Salvadoran companies and around the world, to be aware of the psychosocial risks of relational distress faced by their workers. These risks must be identified, analysed, assessed and addressed as an organisational problem and not as a challenge posed by the workers. It is the responsibility of the organisations to manage any type of harmful risk to occupational health, security, and hygiene in the workplace in a timely and adequate manner.

It is essential to clarify that, in order to determine the type of intervention required based on the prevalence of psychosocial risk factors and the psychosocial risks, this study is using the talentfullness Institute scale illustrated in Table 2 and Table 3.

It is also important to emphasise that the findings presented in this section are the cross-references based on the data collected about the psychosocial risk factors of relational distress experienced by workers in Salvadoran companies. They were analysed using gender, age, sector, company size, job position and work modality as independent variables; and the dependent variables were the 17 questions in the survey.

Table 2 Type of intervention suggested according to the prevalence level of psychosocial risk factors of relational distress

<i>F.P.</i>	<i>Psychosocial risk factors</i>	<i>F.P.</i>	<i>Primary intervention</i>	<i>Secondary intervention</i>	<i>Tertiary intervention</i>
0.058823	Aggressiveness	0.3300	≤ 0.33	$0.33 < X < 0.66$	≥ 0.66
0.058823	Guilt	0.1428	≤ 0.4284	$0.4284 < X < 0.714$	≥ 0.714
0.058823	Guilt	0.1428	≤ 0.4284	$0.4284 < X < 0.714$	≥ 0.714
0.058823	Dignity	0.3300	≤ 0.33	$0.33 < X < 0.66$	≥ 0.66
0.058823	Dignity	0.3300	≤ 0.33	$0.33 < X < 0.66$	≥ 0.66
0.058823	Use of time	0.2500	≤ 0.25	$0.25 < X < 0.75$	≥ 0.75

Source: Vaquerano et al. (2023)

Table 3 Type of intervention suggested according to the prevalence of psychosocial risk factors of individual or relational distress

<i>F.P.</i>	<i>Psychosocial risks</i>	<i>F.P.</i>	<i>Primary intervention</i>	<i>Secondary intervention</i>	<i>Tertiary intervention</i>
0.058823	Personal violence	0.3300	≤ 0.33	$0.33 < X < 0.66$	≥ 0.66
0.058823	Low-severity abusive behaviours	0.5000	< 0.50	$0.50 \leq X < 100$	100
0.058823	Psychological harassment/mobbing	0.2000	≤ 0.20	$0.20 < X < 0.60$	≥ 0.60
0.058823	Discriminatory harassment	0.5000	< 0.50	$0.50 \leq X < 100$	100
0.058823	Sexual harassment	1.0000	-	-	$X \leq 100$
0.058823	Work addiction or workaholism	0.2500	≤ 0.25	$0.25 < X < 0.75$	≥ 0.75

Source: Vaquerano et al. (2023)

3.2 Results of cross-referencing relational distress and workers' gender

When analysing the results of relational distress psychosocial risks, the first thing that is evident is that the perceptions of women regarding five of the six risks associated to four psychosocial factors of distress have higher percentages compared to those of their male counterparts, as can be seen on Table 4.

Based on the results from the exchanges with Salvadoran workers with a formal contract at private and public companies, presented on Table 4, it is safe to conclude that there is a considerable scale of episodes of aggressiveness as a psychosocial risk factor, and therefore, there is a psychosocial risk of personal violence. In line with the proposed interventions on Table 2 and Table 3, a primary intervention is strongly suggested, meaning proactive attention for all the workers to address and prevent episodes of aggressiveness and their negative impacts on occupational wellbeing.

Table 4 Results of psychosocial risks and factors of relational distress analysed by gender

#	Associated factor	Psychosocial risks	Response	Gender		Average percentage score of positive responses	Type of intervention suggested
				Men	Women		
1	Aggressiveness	Personal violence	Yes	29%	32%	31%	Primary intervention
2	Guilt	Low-severity abusive behaviours	No	71%	68%	51%	Secondary intervention
			Yes	45%	57%		
		Psychological harassment/mobbing	No	55%	43%	26%	Secondary intervention
			Yes	21%	31%		
3	Dignity	Discriminatory harassment	No	79%	69%	16%	Primary intervention
			Yes	12%	21%		
		Sexual harassment	No	88%	79%	11%	Tertiary intervention
			Yes	9%	12%		
4	Use of time	Work addiction or workaholism	No	91%	88%	51%	Secondary intervention
			Yes	52%	50%		
			No	48%	50%		

Source: Created by Author

Table 5 Results of psychosocial risks and factors of relational distress analysed by generation

#	Associated factor	Psychosocial risks	Response	Generation			Average percentage score of positive responses	Type of intervention suggested
				Baby Boomers	X	Y and Z		
1	Aggressiveness	Personal violence	Yes	36%	29%	31%	32%	Primary intervention
2	Guilt	Low-severity abusive behaviours	No	64%	71%	69%	52%	Secondary intervention
			Yes	54%	47%	54%		
		Psychological harassment/mobbing	No	46%	53%	46%	28%	Secondary intervention
			Yes	31%	25%	27%		
3	Dignity	Discriminatory harassment	No	69%	75%	73%	17%	Primary intervention
			Yes	15%	19%	16%		
		Sexual harassment	No	85%	81%	84%	13%	Tertiary intervention
			Yes	22%	7%	11%		
4	Use of time	Work addiction or workaholism	No	78%	93%	89%	51%	Secondary intervention
			Yes	52%	48%	52%		
			No	48%	52%	48%		

Source: Created by Author

The results of the psychosocial factor of guilt and the psychosocial risks of low-severity abusive behaviours and psychological harassment/mobbing in the work environments, indicate prevalence levels of more than half and a quarter, respectively, as shown on Table 4. Such scores require the interventions on Table 2 and Table 3, recommending a secondary intervention to design and implement reactive actions to address the situation at the first sign of workers' exposure to the risks, which affect both men and women.

Regarding the psychosocial risk factor of dignity and its psychosocial risks of discriminatory harassment and sexual harassment, the findings indicated on Table 4, reveal that there is a prevalence below a fifth and above one tenth respectively, in the work environments of Salvadoran companies. The levels of prevalence of the psychosocial risk of discriminatory harassment require an intervention with proactive actions to address all the workers at the organisation; whereas for the psychosocial risk of sexual harassment, which is not tolerated under any circumstances, a remedial intervention is required to repair the negative impact on the psychosocial health of the affected workers.

The results from the consultation with Salvadoran workers with formal contracts at private and public companies, presented on Table 4, reveal a moderate scale of prevalence of the psychosocial risk factor of time use, and the psychosocial risk of work addiction/workaholism, with an average score above half positive answers. A secondary intervention is required, meaning reactive actions to address the first symptoms experienced by the workers.

In conclusion, it is important to highlight the results presented on Table 4 about the prevalence of relational distress and psychosocial risk factors, and psychosocial risks at the work environments of Salvadoran companies. They indicate the existence or manifestation of behaviours at the workplace that undermine the physical and psychosocial integrity of working women in the country.

3.3 Results of cross-referencing relational distress and worker generation

The findings resulting from the psychosocial risks and factors about relational distress, based on the generation of the surveyed workers reveal that Baby Boomers, generation Y or millennials, and generation Z or centennials, are the ones with the highest scores in five of the six psychosocial risks or relational distress at the workplace, as evidenced on Table 5.

Based on this information, it is safe to suggest that these situations are similar to the behaviours observed in the analysis based on the surveyed workers' gender. The situations perceived by the workers at the Salvadoran companies based on their generation lead to the conclusion that the type of intervention for each of the six risks perceived within the Salvadoran work environments are the ones indicated on Table 5.

3.4 Results of cross-referencing relational distress and workers' productive sector

The cross reference of relational stress linked to psychosocial factors and their respective psychosocial risks based on productive sector indicate that the public employees hired by government and/or public institutions (ministries, secretariats, autonomous offices, etc.) are more exposed to experiencing the six psychosocial risks linked to relational distress in the work environment. The findings are shown on Table 6.

Table 6 Results of psychosocial risks and factors of relational distress analysed by productive sector

#	Associated factor	Psychosocial risks	Response	Productive sector			Average percentage score of positive responses	Type of intervention suggested
				Trade	Government	Industry	Services	
1	Aggressiveness	Personal violence	Yes	20%	34%	33%	30%	Primary intervention
2	Guilt	Low-severity abusive behaviours	No	80%	66%	67%	70%	Secondary intervention
		Psychological harassment/mobbing	Yes	41%	55%	52%	52%	
3	Dignity	Discriminatory harassment	No	59%	45%	48%	48%	Secondary intervention
			Yes	17%	34%	26%	24%	
		Sexual harassment	No	83%	66%	74%	76%	Primary intervention
			Yes	20%	18%	15%	15%	
4	Use of time	Work addiction or workaholism	No	80%	82%	85%	85%	Tertiary intervention
			Yes	5%	17%	4%	10%	
			No	95%	86%	96%	90%	
			Yes	57%	51%	49%	49%	Secondary intervention
			No	43%	49%	51%	51%	

Source: Created by Author

Table 7 Results of psychosocial risks and factors of relational distress analysed by company size

#	Associated factor	Psychosocial risks	Response	Company size			Average percentage score of positive responses	Type of intervention suggested
				Large company	Medium-sized company	Micro and small enterprise		
1	Aggressiveness	Personal violence	Yes	28%	33%	35%	32%	Primary intervention
2	Guilt	Low-severity abusive behaviours	No	72%	67%	65%	53%	Secondary intervention
			Yes	50%	54%	54%		
		Psychological harassment/mobbing	No	50%	46%	46%	27%	Secondary intervention
			Yes	27%	25%	29%		
3	Dignity	Discriminatory harassment	No	73%	75%	71%	16%	Primary intervention
			Yes	17%	15%	17%		
		Sexual harassment	No	83%	85%	83%	12%	Tertiary intervention
			Yes	9%	13%	15%		
4	Use of time	Work addiction or workaholism	No	91%	87%	85%	50%	Secondary intervention
			Yes	52%	46%	51%		
			No	48%	54%	49%		

Source: Created by Author

These prevalences have a moderate negative effect on the workers' physical and psychosocial health linked to individual or relational distress from the perspective of the six psychosocial risks at the workplace, as Table 6 shows. This situation leads to the conclusion that it is necessary to design and implement secondary intervention programs for three of the six psychosocial risks, given that there is moderate severity, two at the primary level and one, at the tertiary level.

What needs to be done is to develop reactive interventions for secondary levels whereas the high severity situations require remedial interventions, meaning tertiary; and finally, for the primary interventions, given the low severity, the interventions must be proactive.

3.5 Results of cross-referencing relational distress and company size

Cross-referencing the questions on relational distress and the size of the companies, presented on Table 7, the workers of micro and small enterprises provided the highest scores of positive responses.

These findings reveal harmful behaviours at the workplace against the most vulnerable persons in society. In the Salvadoran job market, these are new workers without experience who seek to develop their skills at the micro and small enterprises to grow and look for job positions at the medium-sized and large companies.

3.6 Results of cross-referencing relational distress and job position

The results of cross-referencing relational distress linked to psychosocial factors and their respective psychosocial risks based on the job position indicate that people hired to perform roles of supervision, coordination and team leadership are the ones with more positive answers about the discomfort of being exposed to psychosocial risks of individual or relational distress. In this case, there are four of the six risks, as illustrated on Table 8.

These findings clearly indicate the existence of behaviours at the workplace in Salvadoran companies that, to a certain extent, are detrimental to the integrity of workers who hold positions as supervisors, coordinators and bosses, as well as executives, directors and senior management, who are the operative and management levels of the organisation.

3.7 Results of cross-referencing relational distress and work modality

The findings from the psychosocial risks and factors related to relational distress, based on the work modality of the surveyed workers reveal that those who work in person at the workplace had the highest scores in the six psychosocial risks of relational distress in Salvadoran work environments, as shown on Table 9.

It is important to point out a significant fact presented on Table 9 about relational distress and its psychosocial risk factors in the work environments of companies in El Salvador: all people surveyed indicated, to some extent, the presence, existence or manifestation of behaviours at the workplace that are detrimental to the physical and psychosocial integrity of workers doing their job in person in the physical installations of the company.

Table 8 Results of psychosocial risks and factors of relational distress analysed by job position

#	Associated factor	Psychosocial risks	Response	Job title			Average percentage score of positive responses	Type of intervention suggested
				Senior management, directors and executives	Operative and administrative, without staff under their supervision	Supervisor, coordinator and chiefs (or leaders)		
1	Aggressiveness	Personal violence	Yes	36%	28%	33%	32%	Primary intervention
2	Guilt	Low-severity abusive behaviours	No	64%	72%	67%	53%	Secondary intervention
		Psychological harassment/mobbing	Yes	55%	48%	57%		
3	Dignity	Discriminatory harassment	No	45%	52%	43%	24%	Secondary intervention
		Sexual harassment	Yes	16%	28%	29%		
4	Use of time	Work addiction or workaholism	No	84%	72%	71%	51%	Secondary intervention
			Yes	13%	17%	19%		
			No	88%	83%	81%		
			Yes	13%	10%	12%		
			No	87%	90%	88%	51%	Secondary intervention
			Yes	50%	49%	53%		
			No	50%	51%	47%		

Source: Created by Author

Table 9 Results of psychosocial risks and factors of relational distress analysed by work modality

#	Associated factor	Psychosocial risks	Response	Work modality		Average percentage score of positive responses	Type of intervention suggested
				Working from home	On-site job		
1	Aggressiveness	Personal violence	Yes	18%	36%	27%	Primary intervention
2	Guilt	Low-severity abusive behaviours	No	82%	64%	48%	Secondary intervention
		Psychological harassment/mobbing	No	62%	42%		
3	Dignity	Discriminatory harassment	Yes	17%	31%	24%	Secondary intervention
			No	83%	69%	15%	Primary intervention
4	Use of time	Sexual harassment	Yes	10%	20%		
			No	90%	80%	10%	Tertiary intervention
		Work addiction or workaholism	No	9%	11%	50%	Secondary intervention
			Yes	91%	89%		
			No	48%	52%		

Source: Created by Author

4 Discussion

According to Vaquerano and Rosales (2025) relational distress refers to discomfort linked to expressed job dissatisfaction, whether explicit or implicit by the workers, which is related to the quantity and quality of interpersonal relations established and maintained by their stakeholders, for the simple reason of having to perform duties of a professional nature in the work environment.

Certainly, recent studies, such as Aliaga and Priale (2024), confirm the inverse relationship between the suffering of psychosocial risks and occupational well-being. In this sense, the findings shown confirm that, in the day-to-day work activities in the Salvadoran workplace, there is a clear vulnerability, in all productive areas, regarding workers who experience these risks. In fact, this reality contrasts with that of developed countries, where large corporations tend to develop much more consolidated risk management programs. This highlights the need for companies in El Salvador and throughout the region to have specific approaches for the adequate management of psychosocial risks in the workplace.

Therefore, it is important that decision makers in Salvadoran organisations pay attention to these results because:

- a Two out of the six psychosocial risks or relational distress are at the primary intervention level; if they are not addressed in a timely and effective manner, these risks may become a much more difficult problem that will require secondary or tertiary intervention.
- b Three of the six psychosocial risks of relational distress present a prevalence that deserves secondary attention, meaning that the existing personal relations in the Salvadoran work environments are growing and require reactive intervention to appease and repair interpersonal relationships that are undermining the development of a healthy organisational culture.
- c One of the six psychosocial risks of relational distress demands tertiary intervention given the high severity of the psychosocial risk factor and/or psychosocial risk. This implies designing and implementing a remedial intervention to address the negative impact on the psychosocial health of the affected workers.

These are definitely results that require decision-makers in Salvadoran companies to design and implement appropriate actions to address them. In this regard, at the primary level, for risks such as personal violence or discriminatory harassment, it is recommended to develop mandatory workshops on non-violent communication and conflict resolution. Regarding secondary-level interventions, such as those for burnout and presenteeism, it would be necessary to establish confidential psychological support services and establish clear disconnection policies. Finally, for tertiary-level interventions, in order to respond appropriately to serious situations of sexual harassment, it is urgent and important to implement a zero-tolerance policy for these types of risks, as well as to design and implement a transparent and secure reporting system.

This is because these are warning signs in the workplace that require the attention of company leaders. As indicated in the previous paragraph, they should be seen as a call to design and implement training and assistance plans and programs to develop an organisational culture of zero tolerance for these risks.

This is because similar results were found in other studies, such as Díaz et al. (2024) which focused on identifying the relationship between psychosocial factors and job performance in workers at a private educational institution in Peru, where it was concluded that 63.30% of workers with job demands showed exposure to low or negative psychosocial factors, as opposed to 52.50% satisfied with their remuneration who showed negative psychosocial factors.

Without a doubt, these are work environments that are not contributing to a healthy work climate for the workers because in such environments, workers fear one other and create a tense, hostile and unhealthy climate.

This further confirms the importance of research findings that point to the need for companies to understand and embrace the importance of avoiding psychosocial risks, as well as the commitment and responsibility to address and prevent them. This is because every company is responsible for ensuring safe production environments with healthy labour relations and compensation commensurate with the activities performed, so that its employees feel compensated for their work and contributes to achieving the organisation's major strategic objectives (Ordóñez-García et al., 2023).

In conclusion, it is safe to say that these are work environments where mistrust, abuse, and work overload prevail. These situations end up deteriorating in one way or another the health and wellbeing of all workers by creating environments that are prone to the proliferation of chronic stress episodes, anxiety, physical and psychosocial health, that in the end, crumble the organisational values and culture.

This is definitely a problem in line with Moreno et al. (2024), who points out the existence of several stress-generating factors in the workplace. For example, he indicates that 58% of workers say they rarely receive the compensation they deserve; while another 50% say they are concerned about their responsibilities at home while at work, and finally, 42% report frequent emotional deterioration.

In an organisational culture that does not value or acknowledge the importance of the personal and professional life of its workers, it is quite possible that they feel unmotivated and dissatisfied. The latter has a negative impact on the performance levels, and therefore, on the organisational productivity, competitiveness and resilience.

A situation that definitely leads to the conclusion that research such as that of Martínez-Mejía (2023) is important to denounce the existence of a global working world, with marked differentiation between countries with regard to the regulatory framework for psychosocial risk factors and violence in the work environment, responsible for great inequalities in terms of the protection of workers with unfavourable repercussions for their health in general.

Finally, with the firm goal of ensuring the sustainability and long-term impact of this study, it is definitely necessary to go beyond an initial approximation. Therefore, it is interesting to design a follow-up strategy that incorporates longitudinal and comparative studies of the problem, both nationally and internationally. In this sense, a longitudinal study would focus on the long-term sustainability of the measures, identifying the level of well-being of workers over a given period of time, thereby ensuring that the solutions are not temporary but produce lasting changes. Comparative research, on the other hand, could effectively identify key success factors that guarantee a lasting impact.

Declarations

All authors declare that they have no conflicts of interest.

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