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BETTERWORK

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WELL-BEING AND HEALTH AT WORK

SUICIDAL THOUGHTS AND QUALITY OF LIFE AT WORK IN LUXEMBOURG: WHAT DO THE 2025 *QUALITY OF WORK INDEX* DATA SHOW?

In 2025, almost one in fifteen employees in the private sector and one in fifteen employed persons in the public sector report having had suicidal thoughts in the past twelve months – a threefold increase compared to 2014. Although this development does not necessarily mean that suicidal acts have increased to the same extent, it does point to a worrying rise in psychological strain at the workplace. Suicidal thoughts thus constitute a clear warning signal of deteriorating mental health and quality of life at work.

Based on data from the *Quality of Work Index 2025*, the analysis shows that these thoughts affect all groups – employees in the private sector as well as staff in the public service, men and women, residents and cross-border workers – with particular attention to young adults. Respondents who report suicidal thoughts are more frequently exposed to considerable psychosocial stressors (pressure, emotional demands, mental workload, mobbing, etc.), have fewer work-related resources and show a more severely impaired mental health, which is reflected in particular in an increased risk of burnout, lower emotional well-being, more sleep disturbances and more health problems.

These results highlight that suicide is a multifactorial phenomenon in which working conditions are neither the sole cause nor the only explanation. Nevertheless, they can contribute to increasing the vulnerability of certain individuals or – conversely – play a protective role when they offer a supportive environment, sufficient resources and high-quality interpersonal relationships. The findings also show that organizations have concrete room for manoeuvre to promote mental health in the workplace. Strengthening work-related resources, improving working conditions, fostering a work climate in which psychological difficulties can be expressed and taken into account without fear of stigma, as well as the early detection of psychological strain, are key levers of a comprehensive suicide prevention strategy.

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YOU'LL NEVER WORK ALONE.

1. Introduction

Over the past several years, mental health in the workplace has increasingly come into focus as a central public health issue. Changes in the world of work, the intensification of work, difficulties in reconciling professional and private life, as well as economic and societal uncertainties deeply affect the experience of work.

Against this backdrop, the evolution of suicidal thoughts over the past decade constitutes a particularly worrying signal, indicating a significant psychological burden and deserving special attention [1].

Suicide is a multifactorial phenomenon that emerges from the interaction of individual, interpersonal, social, economic and environmental factors. Although working conditions are generally not the sole cause, they can contribute to weakening certain individuals, exacerbating an existing strain or – conversely – playing a protective role when they provide a supportive environment and sufficient resources. The European Agency for Safety and Health at Work (EU-OSHA) highlights that certain work situations involving psychosocial.

SUICIDE IN LUXEMBOURG IN FIGURES

In 2023, **48 deaths by suicide** were recorded in Luxembourg.

This corresponds to a mortality rate of **6.3 deaths per 100,000 inhabitants** and is therefore below the European Union average **(10.2 per 100,000 inhabitants).**

75 per cent of deaths by suicide were among men (36 men and 12 women).[2].

2. A worrying rise in suicidal thoughts since 2014

The data from the *Quality of Work Index* show a clear increase in the proportion of employees in the private sector and staff in the public service who report having had suicidal thoughts in the past twelve months.

While in 2014 only 2.2% of respondents reported such thoughts, this share stands at 6.6% in 2025. The highest value was recorded in 2023, when 7.4% of employees in the private sector and public service staff were affected. In other words, almost one in fifteen survey participants reports having had such thoughts over the past year.

This development does not necessarily mean that the risk of suicide among the employed population has increased to the same extent. However, it suggests that a growing number of employees in the private sector and staff in the public service are experiencing a level of psychological strain that is strong enough for suicidal thoughts to have occurred during the past year.

Several factors may contribute to this development. International research highlights, in particular, the impact of economic difficulties, changes in the world of work, the rise in psychosocial risks, and the overall deterioration in mental health that has been observed for several years in many European countries (World Health Organization, 2024, 2025).

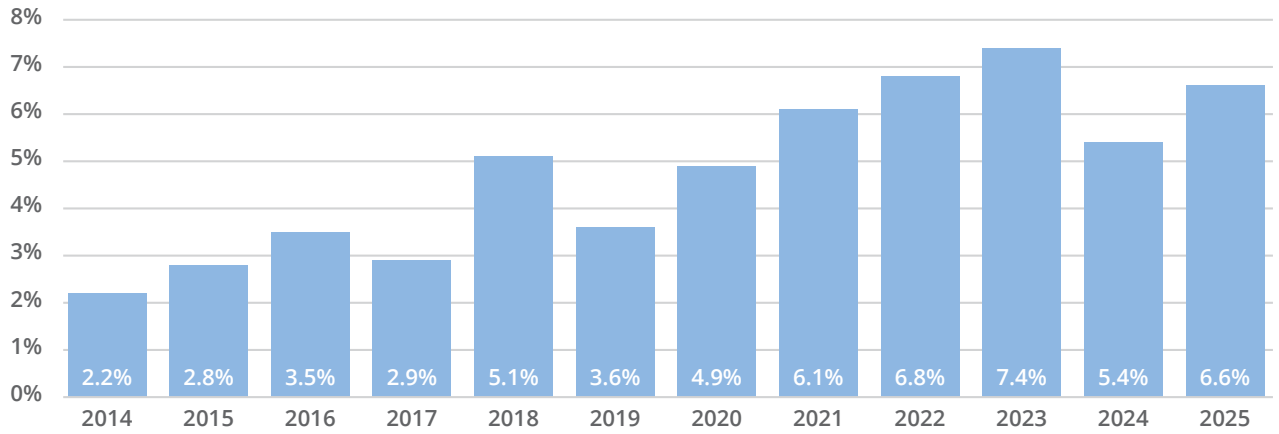
Although the data presented here do not allow conclusions to be drawn about the causes of this increase, they do suggest that suicidal thoughts should be regarded as an important indicator of the mental health of employed persons and of their quality of life at work.

The proportion of employees and civil servants who report having suicidal thoughts has tripled over the course of a decade.

1 Safety and health at work EU-OSHA
2 Ministère de la Santé : 48 personnes se sont suicidées en 2023 au Luxembourg - RTL Infos

In this newsletter, only the masculine generic is used for the purpose of clarifying the text. It refers to any gender identity and thus includes both female and male persons, transgender persons as well as persons who do not feel they belong to either gender or persons who feel they belong to both genders.

Figure 1: Prevalence of suicidal thoughts in the last 12 months, by year



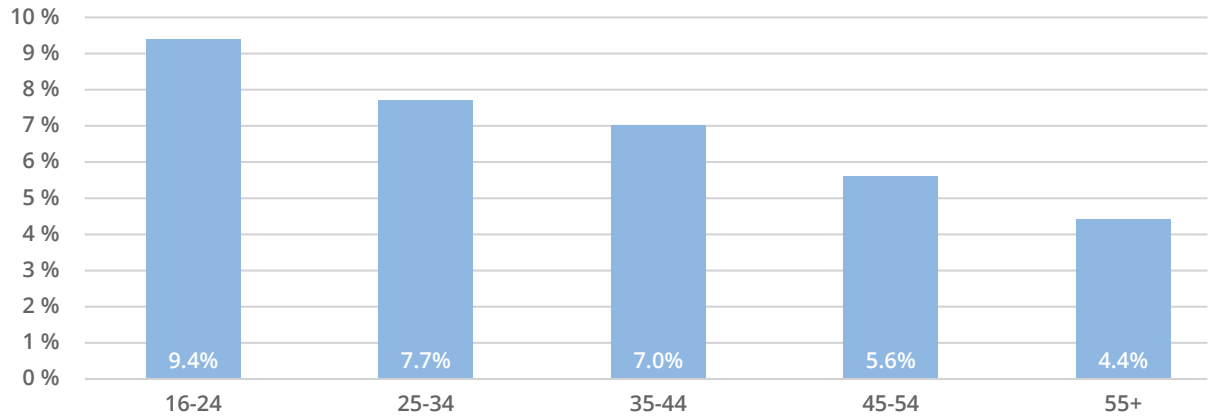
To better understand the groups of people affected and the contexts associated with the occurrence of suicidal thoughts, the following analyses examine the differences observed in terms of sociodemographic characteristics, working conditions, work-related resources and various health indicators.

3. Suicidal thoughts were identified in all groups of respondents

Contrary to some assumptions, suicidal thoughts are observed in all respondent groups in the survey. No statistically significant differences are found by gender or residence status. Some differences do, however, emerge with regard to age and sector of activity. These should be interpreted with caution and are not, in themselves, sufficient to explain the occurrence of suicidal thoughts.

Young employees in the private sector and public service staff aged 16 to 24 show the highest proportion of suicidal thoughts, while a downward trend is observed with increasing age. Although this difference is not statistically significant in our sample, it is consistent with the findings of numerous international studies.

Figure 2: Prevalence of suicidal thoughts in the last 12 months by age group



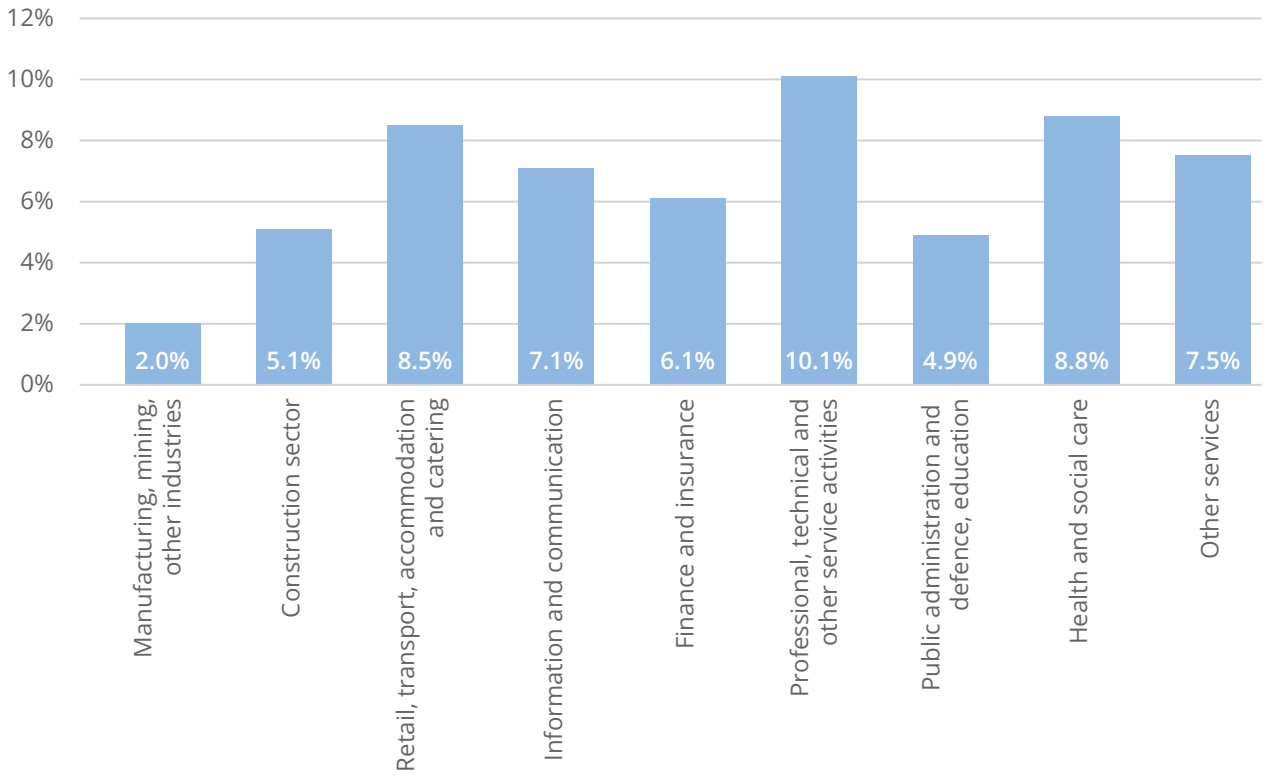
Several factors may help explain why young adults are particularly at risk. Entering working life is often associated with numerous transitions: access to employment, financial independence, the search for stability, the development of a professional identity and the expansion of one's social network (Kim et al., 2020; Madhavan et al., 2021). These different stages can be major sources of stress, especially when personal, social or economic resources are limited.

However, the observed results call for caution. Suicidal thoughts generally arise from the interplay of multiple factors that go beyond the strictly occupational context. Difficulties in personal, family, social or financial spheres can also play an important role in their emergence.

Nevertheless, these data underline the importance of paying particular attention to the mental health of young workers, who appear to be a group that may be more exposed to psychological strain.

The analysis by sector of activity also brings to light certain differences between respondents, depending on whether or not they report suicidal thoughts.

Figure 3: Breakdown by area of work regarding the occurrence of suicidal thoughts in the last 12 months.



The highest prevalences are observed in professional, scientific and technical activities, in the health and social work sector, as well as in trade, transport, and the hotel and restaurant industry.

These sectors often share common characteristics that can affect workers' mental health: high work intensity, pronounced emotional demands, strong organizational constraints, and increased exposure to difficult interactions with the public.

Particular attention is paid to the health and social work sector, as employees in this field are regularly confronted with suffering, illness or death – factors that can pose a specific risk to mental health (Health Workforce and Service Delivery, 2025).

However, sectoral categories bring together very diverse occupational realities and, taken alone, do not allow for a definitive explanation of the observed differences. The literature highlights numerous psychosocial factors that are associated with suicidal thoughts: high workload, strong cognitive demands, low autonomy, job insecurity, lack of recognition, and forms of organizational violence (Milner et al., 2018; World Health Organization, 2022).

The work of Niedhammer et al. (2020) further emphasises an important phenomenon: these factors often operate cumulatively. In other words, the more a person is simultaneously exposed to multiple psychosocial strains, the higher the likelihood that they will report suicidal thoughts.

In addition, extra-occupational factors can also contribute to this increased vulnerability, such as socio-economic precariousness, family or interpersonal difficulties, pre-existing mental health problems, or the perceived imbalance between efforts made and rewards received.

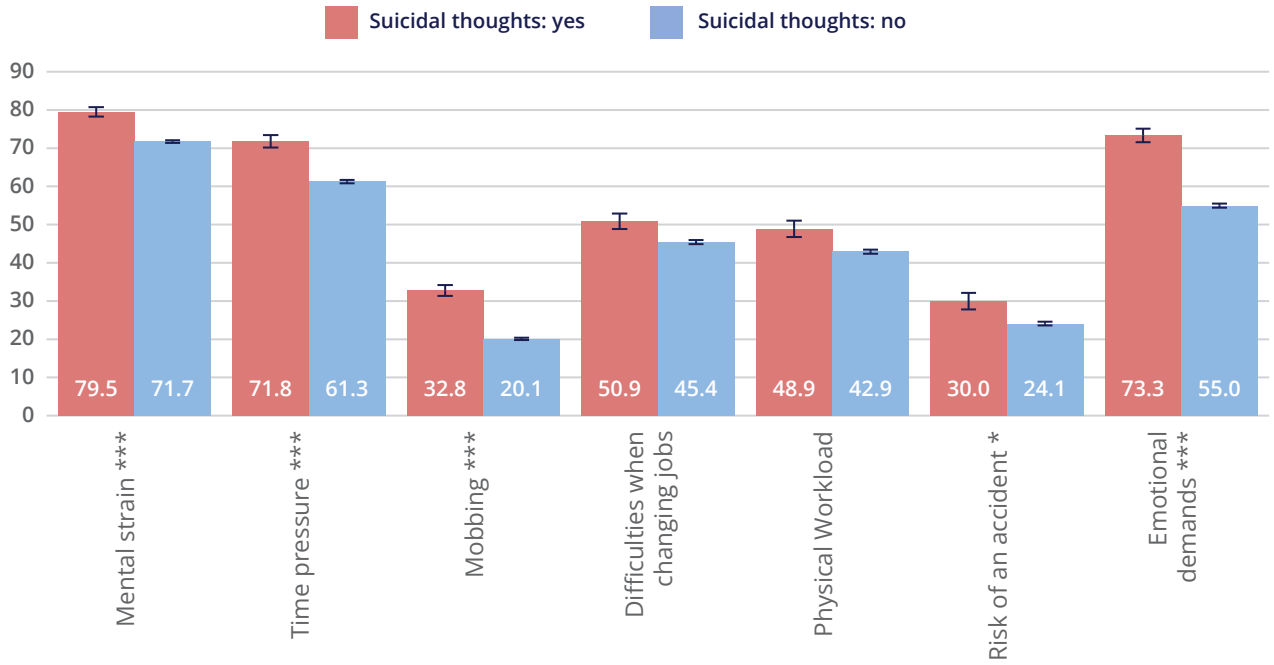
The preceding analyses show that suicidal thoughts are observed across all groups of employed persons, with certain differences according to age or sector of activity. However, these sociodemographic characteristics are not sufficient to explain the observed differences or to understand which aspects of the work environment are particularly closely linked to this psychological strain. To address this question, it is necessary to examine more closely the working conditions and work-related resources available to employees in the private sector and staff in the public service in their daily work.

4. Working conditions: a more demanding and less supportive environment

The *Quality of Work Index* makes it possible to go one step further by examining several dimensions of working conditions that can affect the mental health of employees in the private sector and staff in the public service. It not only assesses the strains to which they are exposed (time pressure, emotional demands, health risks), but also the resources they have at their disposal to cope with them (autonomy, support from colleagues, opportunities for development, and job security).

The following analyses show that private-sector workers and public-sector employees who report suicidal thoughts face two types of difficulties: greater stress from work-related demands and more limited access to resources that could protect their mental health.

Figure 4: Demands and workload depending on whether or not suicidal thoughts have occurred in the last 12 months



The differences observed concern most dimensions of working conditions captured by the *Quality of Work Index*. They point to an overall more demanding work environment for employees in the private sector and staff in the public service who report suicidal thoughts, rather than to the presence of a single isolated source of strain

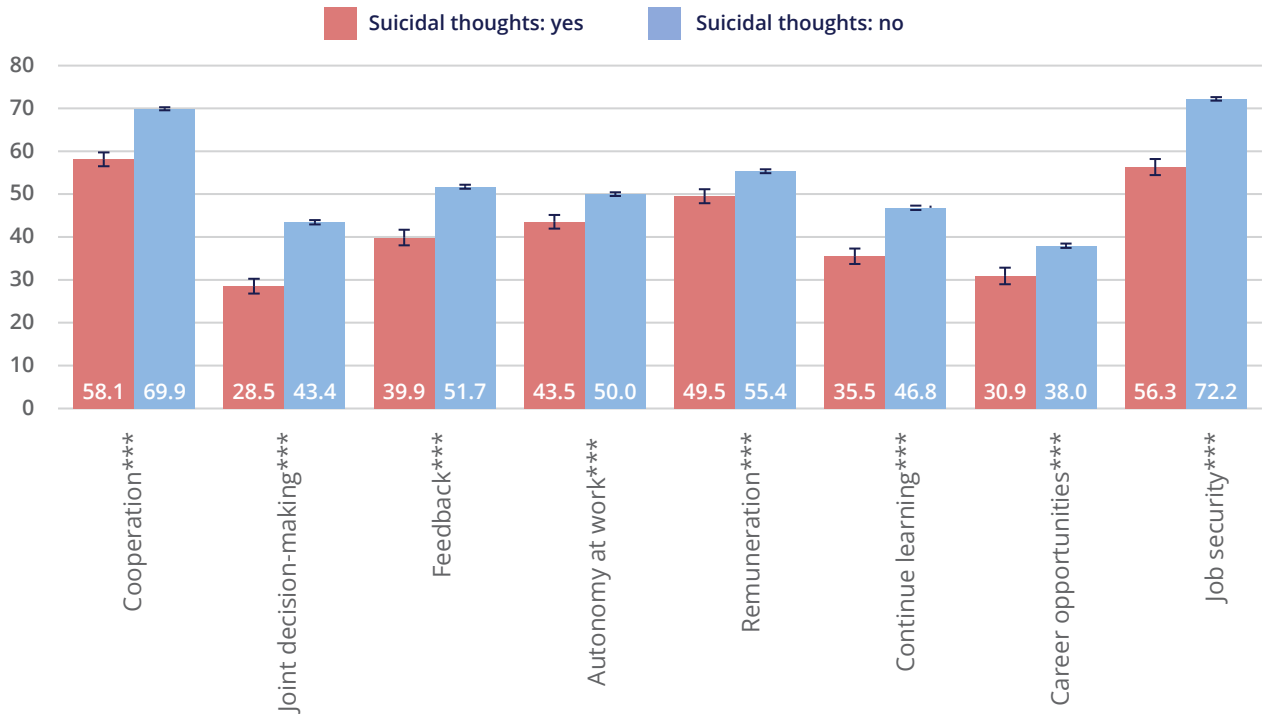
Employees in the private sector and public service staff who report suicidal thoughts indicate higher levels of time pressure, emotional demands, mental workload, workplace bullying and accident risk.

The differences are particularly marked for workplace mobbing and emotional demands, in line with the scientific literature, which identifies workplace violence, relational conflicts and repeated exposure to other people's distress as factors associated with a deterioration in mental health (Niedhammer et al., 2020).

Overall, the results observed in 2025 remain close to those from 2018, which suggests a certain stability in these differences.

However, quality of life at work depends not only on the strains to which employees are exposed, but also on the resources available to them, which represent an essential protective factor and help explain why similar work situations can be experienced in very different ways. The survey also allows these resources to be examined.

Figure 5: Resources in the workplace, broken down by whether or not suicidal thoughts have occurred in the last 12 months.



5. Reduced professional resources among the employees and civil servants affected

A greater exposure to job demands is compounded by a more limited access to work-related resources. This combination is particularly important, as the literature shows that the balance between demands and resources is a major determinant of mental health at work. Support from colleagues, autonomy, recognition of the work accomplished, and opportunities for professional development are associated with better mental health and greater job satisfaction (WHO, 2022).

The results show, in particular: lower levels of cooperation, more limited access to feedback, less autonomy and participation in decision-making in the execution of work, lower satisfaction with remuneration, and weaker prospects in terms of training, professional development and job security.

Compared with 2018, some resources appear to have declined, notably cooperation, feedback and the feeling of job security. This deserves particular attention in a context where issues of mental health at work are gaining increasing importance within organizations.

6. Mental health and well-being under even greater threat

The differences observed in working conditions naturally raise an important question: are they also reflected in differences in mental health and well-being?

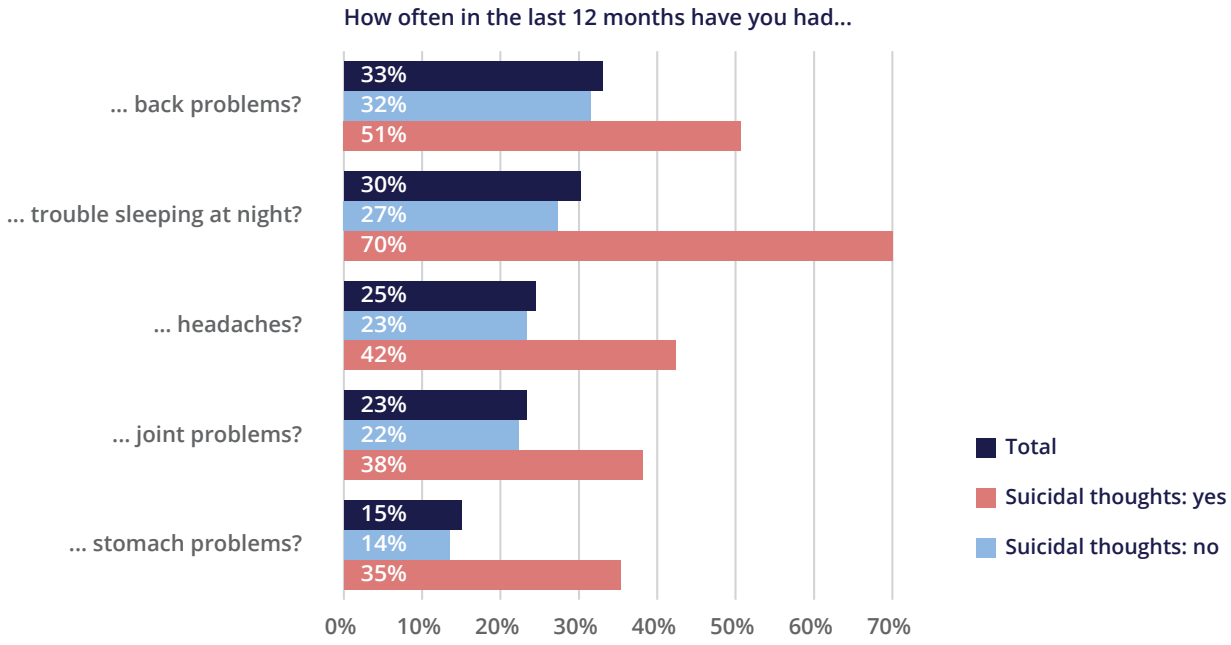
The data from the *Quality of Work Index* make it possible to examine this question using several indicators, including job satisfaction, motivation, general well-being, burnout risk, work–life conflict, and various physical health indicators. The results show that all recorded well-being indicators are affected. They suggest that suicidal thoughts are embedded in a broader context of psychological vulnerability.

Compared with the data collected in 2018, the differences regarding job satisfaction and burnout risk appear to have widened, which may indicate a gradual deterioration of certain determinants of well-being at work. What is particularly worrying is general well-being: the average WHO-5 score of employees in the private sector and staff in the public service who report suicidal thoughts is below the threshold of 50 points, which is commonly associated with impaired emotional well-being and justifies special attention.

7. More severely impaired physical health

Psychological strain does not only manifest itself at the emotional level. It is often accompanied by physical complaints that can permanently impair the quality of life of those affected. The *Quality of Work Index* therefore examines several health indicators that are frequently associated with psychological strain, including sleep disturbances, musculoskeletal pain, headaches and digestive problems.

Figure 6: Health problems among employees, depending on whether or not they have had suicidal thoughts in the last 12 months



The differences observed are not limited to work experience or psychological well-being. They also affect several dimensions of physical health and highlight the close links between mental and somatic health. Respondents who report suicidal thoughts state all health problems recorded in the survey much more frequently.

The differences are most pronounced for sleep disturbances: almost three quarters of those with suicidal thoughts report sleep problems, compared with less than one third of other employees in the private sector and staff in the public service. Back and joint pain, headaches and gastrointestinal complaints are also more common among these respondents.

These findings are consistent with current evidence on the close interactions between mental and physical health. Chronic stress, anxiety, depressive symptoms or psychological exhaustion can influence numerous physiological mechanisms and contribute to the onset or worsening of somatic complaints (International Labour Organization & World Health Organization, 2022).

Compared with 2018, sleep disturbances appear to have increased markedly, while the other indicators show a somewhat less pronounced rise overall.

8. Sleep: a particularly revealing indicator

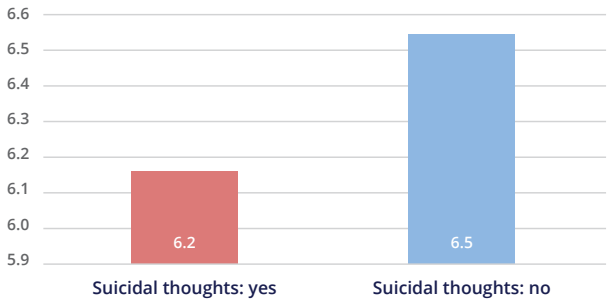
Sleep plays a central role in maintaining mental health. Difficulties falling asleep, frequent night-time awakenings or overall short sleep duration are among the most commonly observed manifestations associated with psychological strain.

The data from the *Quality of Work Index* show that employees in the private sector and staff in the public service who report suicidal thoughts sleep, on average, for a shorter duration than other respondents. In 2025, the difference is around 24 minutes per night. At the individual level, this gap may appear small, but over time it represents chronic sleep reduction, which can gradually impair the body's and mind's capacity to recover.

Research has shown that chronic sleep deprivation can disrupt emotional regulation, increase vulnerability to stress and foster the occurrence of anxiety or depressive symptoms.

Compared with 2018, the gap between the two groups appears to have narrowed, which can partly be explained by an overall decline in sleep duration among the employed population.

Figure 7: Average duration of sleep, broken down by whether or not suicidal thoughts had occurred in the past 12 months



AT A GLANCE:

6.6% of employees in the private sector and staff in the public service report having had suicidal thoughts in the last 12 months.

In 2014, this proportion was 2.2%.

Suicidal thoughts affect men and women alike.

The employees concerned report higher work-related demands and fewer resources.

They also show an increased risk of burnout, more severely impaired mental health and more health problems.

9. SUMMARY

The data from the *Quality of Work Index* 2025 show that around one in fifteen employees in the private sector and one in fifteen staff in the public service report having had suicidal thoughts in the past twelve months. This proportion is more than three times higher than that observed in 2014 and points to a worrying development of this indicator among the working population in Luxembourg.

The employees concerned are simultaneously exposed to higher psychosocial strain, have fewer work-related resources and report impaired mental health, sleep disturbances and physical health problems.

These results do not allow a direct causal link to be established between working conditions and suicidal thoughts. Suicide remains a complex, multifactorial phenomenon in which individual, interpersonal, social, economic and occupational dimensions interact. Working conditions are generally neither the only cause nor the sole explanation for psychological strain.

However, the findings serve as a reminder that work can play both a protective and a harmful role. A work environment that offers support, autonomy, recognition and opportunities for development can help maintain employees' mental health. Conversely, the accumulation of psychosocial strain can further weaken individuals who are already facing difficulties.

These results underline the importance of a comprehensive prevention approach that combines the promotion of mental health, the improvement of working conditions, the strengthening of work-related resources and the early detection of psychological strain. Suicide prevention is not the sole responsibility of the health care system; it is also a shared societal responsibility to which organizations can contribute by creating supportive work environments that pay particular attention to employees' well-being.

Work can never fully explain suicide, yet the world of work can still be part of the solution. By creating more supportive working environments, organizations not only help to preserve the mental health of their employees, but also encourage earlier recognition of psychological strain and faster access to help when it becomes necessary.

NEED HELP?

Suicidal thoughts are often a sign of great distress, but you do not have to face them alone. Talking to someone you trust, a healthcare professional or a specialised counselling service is an important first step.

In cases of immediate suicide risk or acute danger, the emergency services should be contacted without delay by calling 112.

10. Useful resources

- **SOS Détresse ligne d'écoute 45 45 45**
- **Ligue Santé Mentale**

  Phone: (+352) 49 30 29
  EMail: prevention@lisame.lu
  Website: https://www.prevention-suicide.lu/en/

- **Stressberodung – CSL**

  Support offer for employees experiencing stress or psychological strain at work. Up to five free individual counselling sessions are available for employees.
  Phone: (+352) 27 494 222
  Email: stressberodung@csl.lu

- **Directory of support services in Luxembourg**

  https://www.pssm.lu/en/support-services-in-luxembourg/

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Method
For the *"Quality of Work Index"* study on the working situation and quality of work of employees in Luxembourg, approximately 1,500-3,200 interviews (CATI; CAWI) have been conducted annually since 2013 by infas (since 2014) on behalf of the Luxembourg Chamber of Employees and the University of Luxembourg (Table 1). The findings presented in this report refer to the surveys conducted since 2014 (Sischka, 2025).

Table1: Methodological background of the QoW survey	
Aim of the survey	To study the working situation and quality of work of employees in Luxembourg
Design, implementation, analysis	University of Luxembourg: Department of Behavioural and Cognitive Sciences, Luxembourg Chamber of Employees, since 2014 Infas Institute, previously TNS-ILRES
Type of survey	Telephone survey (CATI) or online survey (CAWI; since 2018) in Luxembourgish, German, French, Portuguese or English
Sample size	2014: 1,532; 2015: 1,526; 2016: 1,506; 2017: 1,522; 2018: 1,689; 2019: 1,495; 2020: 2,364; 2021: 2,594; 2022: 2,696; 2023: 2,732; 2024: 2,939; 2025: 3,171

Suicidal thoughts

"When you think of the last 12 months: Did you sometimes feel so awful that you considered committing suicide?" (Yes/No)

Scales for work quality

Scale	Number of items	Cronbach's Alpha	Scale	Number of items	Cronbach's Alpha
Participation	2	0.69-0.81	Mental demands	4	0.73-0.78
Feedback	2	0.71-0.82	Time pressure	2	0.68-0.80
Autonomy	4	0.71-0.70	Emotional demands	2	0.79-0.87
Cooperation	4	0.80-0.85	Physical strain	2	0.67-0.78
Bullying	5	0.69-0.78	Risk of accidents	2	0.78-0.86

Scales for quality of employment

Scale	Number of items	Cronbach's Alpha	Scale	Number of items	Cronbach's Alpha
Income satisfaction	2	0.84-0.90	Job security	2	0.67-0.76
Training	2	0.72-0.89	Difficulty changing jobs	2	0.69-0.83
Promotion	2	0.82-0.91	Work-life conflict	3	0.70-0.82

QoW-Index

The *QoW index* is formed by the unweighted mean of all scales of work and employment quality. The scales are also calculated using the unweighted mean of the corresponding individual indicators, which take values between 1 (e.g. "never") and 5 (e.g. "almost always"). The scale values are then normalised to values between 0 and 100 [((original scale value - 1) / 4) * 100].

Scales for well-being

Scale	Number of items	Cronbach's Alpha	Scale	Number of items	Cronbach's Alpha
Job satisfaction	3	0.74-0.86	General well-being (WHO-5)	5	0.82-0.91
Work motivation	3	0.65-0.75	Health problems	7	0.65-0.80
Burnout	6	0.80-0.89			

Hours of sleep

"How many hours do you sleep on average on a daily basis?"

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