

**Alberta WCB
Policies &
Information**

Chapter:

INJURIES

Subject:

GENERAL

Authorization:

BoD Resolution 2025/04/11

Date:

September 22, 2025

APPLICATION 6: PSYCHIATRIC OR PSYCHOLOGICAL INJURY

1. *What is a work-related psychiatric or psychological injury?*

A psychiatric or psychological injury is confirmed when there is a diagnosis, as defined in the most current version of the *Diagnostic and Statistical Manual of Mental Disorders*, (DSM)* and the condition results from one of the following:

- organic brain damage caused by a work-related head injury; exposure to toxic chemicals or gases; anoxia; or other work-related injury, disease, or condition
- an extreme emotional reaction to a work-related physical injury/illness (for example, depression related to prolonged disability or an amputation)
- an extreme emotional reaction to treatment for a work-related injury/illness (for example, complicated recovery from surgery, added pain from a treatment process)
- traumatic onset psychological injury following a traumatic workplace event/incident or series of traumatic events/incidents
- chronic onset psychological injury (See Question 7 for further details on when WCB accepts claims for chronic onset psychological injury)

*NOTE: When a new edition is published, WCB will designate an effective date, as close as practicable to the date for publication, for use of the new edition (see Addendum A).

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2. *How does WCB determine whether a psychiatric or psychological injury is compensable?*

As with other types of injuries, to be compensable the psychiatric or psychological injury must arise out of and occur in the course of employment.

Traumatic psychological injury

Unless elsewhere specified, WCB uses the “but for” test to determine causation (see Policy 02-01, Part II, Application 7, Questions 4 and 5).

Chronic onset psychological injury

For chronic onset psychological injury, WCB uses “predominant cause” to determine compensability. Due to the multifactorial nature of chronic psychological injury and the interaction of those multiple factors, WCB accepts that causation is established when all the criteria set out in policy are met and occupational exposures are the predominant cause of the chronic onset psychological injury (see Questions 6 and 7).

Presumptive psychological injury

When presumption criteria set out in the *WCA* and the *WC Regulation* are met (including periods for which presumptions apply), it is presumed that the condition was caused by the worker’s employment. A presumption may be rebutted, if the evidence shows the psychological condition was caused by a non-work exposure.

See Table 1 at the end of this document for details on presumptive coverage for psychological injury.

3. *How does WCB determine ongoing compensability for psychiatric or psychological injuries?*

Ongoing compensability for a worker's psychiatric or psychological injury will be evaluated on a case by case basis. It will be accepted when the medical evidence shows that the current symptoms are caused by the work or work-related injury (that is, when the appropriate causation test is still met - see Questions 2 and 7).

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4. *What is mental stress?*

Mental stress is a commonly used term that describes an individual’s non-specific physical and psychological response to the events or changes that occur in their life. These events are known as *stressors*. Some level of stress is a normal part of life; however, when a person’s ability to cope with the stressors is overwhelmed, *distress*, a negative form of mental stress, can develop and result in diagnosable psychological or psychiatric injuries.

It should be noted that “stress” is not an accepted medical diagnostic term, but can result in psychiatric or psychological diagnoses such as adjustment disorders, anxiety disorders, or mood disorders, depending on the circumstances.

5. *What is work-related traumatic onset psychological injury?*

Traumatic onset psychological injury is compensable when it is an emotional reaction in response to a single traumatic work-related event or a cumulative series of traumatic work-related events experienced by the worker.

A traumatic event(s) is defined as a direct personal experience of an event or directly witnessing an event that, reasonably and objectively assessed, is:

- sudden/unexpected
- frightening or shocking,
- having a specific time and place, and
- involving actual or threatened death or serious injury to oneself or others or threat to one’s physical integrity (i.e., assault).

For example, a victim of a robbery or hostage-taking incident; witnessing the death or severe injury of a co-worker; or providing first response to victims of severe physical trauma or fatalities.

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*Work-related traumatic
onset psychological injury
(continued)*

Interpersonal relations

Interpersonal relations between a worker and coworkers, management, or customers may be traumatic when they result in behaviours that are aggressive, threatening, or abusive.

NOTE: A full psychological or psychiatric evaluation may not be required for short-term claims for psychological injury resulting from a single traumatic work-related event.

6. *What is work-related chronic onset psychological injury?*

Chronic onset psychological injury is compensable when it is an extreme emotional reaction to:

- a) an accumulation, over time, of a number of verifiable work-related stressors that do not fit the definition of traumatic event,
- b) a significant work-related stressor that has lasted for a long time and does not fit the definition of traumatic event, or
- c) bullying or harassment, defined as a repeated incident of objectionable or unwelcome conduct, comment, bullying or action intended to intimidate, offend, degrade or humiliate a particular person or group

and when all the criteria outlined in Question 7 below are met.

7. *When does WCB accept claims for chronic onset psychological injury?*

As with any other claim, WCB investigates the causation to determine whether the claim is acceptable. Claims for this type of injury are eligible for compensation only when *all* of the following criteria are met:

- there is a confirmed psychological or psychiatric diagnosis as described in the DSM,

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Chronic onset psychological injury (continued)

- the work-related events or stressors are the predominant cause of the injury; predominant cause means the prevailing, strongest, chief, or main cause of the chronic onset psychological injury,
- the work-related events are excessive or unusual in comparison to the normal pressures and tensions experienced by the average worker in a similar occupation, and
- there is objective confirmation of the events.

Ongoing compensability for chronic onset psychological injury will be accepted when the medical evidence shows that the work or work-related injury is the predominant cause of the current symptoms.

8. *What are non-traumatic and non-compensable normal pressures and tensions of employment?*

In addition to the duties reasonably expected by the nature of a worker’s occupation, actions taken by an employer relating to management of work and employees are considered a normal part of employment.

Normal employment expectations include, but are not limited to, the following:

- Hiring employees
- Performance evaluations and/or performance corrective actions
- Staff assignments, transfers or restructuring
- Promotions, demotions, lay-offs, and terminations
- Workload fluctuations and management and/or assignment changes
- Timeline/deadline pressures
- Work environment, including health and safety concerns, and union issues.

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9. *When does WCB sponsor treatment of non-compensable psychiatric or psychological conditions?*

WCB may provide treatment for a non-compensable psychiatric or psychological condition as a rehabilitative measure if treatment might:

- accelerate recovery from a compensable physical disability, or
- lessen or eliminate any handicap resulting from a compensable accident.

An offer of treatment for an unrelated condition is entirely at WCB's discretion and does not imply any acceptance of responsibility for the underlying cause.

10 *When is this policy application effective?*

This policy application (Application 6 – Psychiatric or Psychological Injury) is effective July 23, 2025, and applies to all claims with dates of accident on or after that date, except when noted otherwise in a specific policy section(s).

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TABLE 1: Presumptive Coverage for Psychiatric and Psychological Injury

NOTE: cases where presumptive coverage applies are subject to the provisions of s.26 of the *WCA*. See Policy 01-05, Part II, Application 1, Questions 5 and 6.

#	Effective Date	WC Act/Reg	Presumption
1	December 10, 2012 – March 31, 2018	<i>WCA</i> s.24.2	<p><i>Presumptive coverage for first responders diagnosed with post-traumatic stress disorder (PTSD)</i></p> <p>If a first responder (emergency medical technicians, firefighters, peace officers, and police officers as defined in the <i>WCA</i>), is diagnosed with PTSD by a physician or a psychologist, WCB will presume the PTSD arose out of and occurred in the course of employment, unless the contrary is proven.</p> <p>The diagnosis of PTSD must meet the criteria described in the most recent edition of the <i>Diagnostic and Statistical Manual of Mental Disorders</i> published by the American Psychiatric Association.</p>
2	April 1, 2018 – December 31, 2020	<i>WCA</i> s.24.2 (1) and (2)	<p>Presumptive coverage for first responders is expanded to include correctional officers, emergency dispatchers, firefighters, paramedics, peace officers, or police officers, or any other class of worker prescribed by the regulations, diagnosed with post-traumatic stress disorder (PTSD).</p> <p>For the purposes of the presumption, correctional officers are considered to be correctional peace officers or correctional service workers whose duties involve the enforcement of law and order in a correctional institution. The diagnosis of PTSD must meet the criteria described in the most recent edition of the <i>Diagnostic and Statistical Manual of Mental Disorders</i> published by the American Psychiatric Association.</p>

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#	Effective Date	WC Act/Reg	Presumption
3	April 1, 2018 – December 31, 2020	<i>WCA</i> s.24.2 (3)	<p><i>Presumptive coverage for traumatic psychological injury for workers</i></p> <p>If a worker:</p> <ul style="list-style-type: none"> • is, or has been, exposed to a traumatic event or events, as defined above, during the course of the worker’s employment, and • is, or has been, diagnosed with a psychological injury by a physician or psychologist, <p>...the psychological injury shall be presumed, unless the contrary is proven, to be an injury that arose out of and occurred during the course of employment.</p>
4	January 1, 2021 – July 22, 2025	<i>WCA</i> s.24.2 (2) and (3)	Presumptive coverage for correctional officers, emergency dispatchers, firefighters, paramedics, peace officers, or police officers, or any other class of worker prescribed by the regulations, diagnosed with post-traumatic stress disorder (PTSD) or other traumatic psychological injury.
5	July 23, 2025	<i>WCA</i> s.24.2 (2) and (3) <i>WC Reg</i> s.19.2	<p>Presumptive coverage for correctional officers, emergency dispatchers, firefighters, paramedics, peace officers, or police officers, or any other class of worker prescribed by the regulations, diagnosed with post-traumatic stress disorder (PTSD) or other traumatic psychological injury.</p> <p>Prescribed workers include specific workers in the nursing profession outlined in s.19.2 of the <i>WC Regulation</i>.</p>

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Previous versions

- [Policy 0301 Part II - January 2021](#)
- [Policy 0301 Part II - July 2018](#)
- [Policy 0301 Part II - April 2018](#)
- [Policy 0301 Part II - August 2015](#)
- [Policy 0301 Part II - April 2014](#)
- [Policy 0301 Part II - November 2013](#)
- [Policy 0301 Part II - June 2013](#)
- [Policy 0301 Part II - February 2012](#)
- [Policy 0301 Part II - February 2004](#)
- [Policy 0301 Part II - January 2004](#)
- [Policy 0301 Part II - June 2002](#)
- [Policy 0301 Part II - June 2001](#)
- [Policy 0301 Part II - December 2000](#)
- [Policy 0301 Part II \(consolidated manual 1st Issue\) - February 1997](#)