

*Shining Light on*

**MENTAL HEALTH AND  
SUICIDE PREVENTION**



Minnesota Asphalt  
Pavement Association



**December 2, 2021  
Annual Meeting**

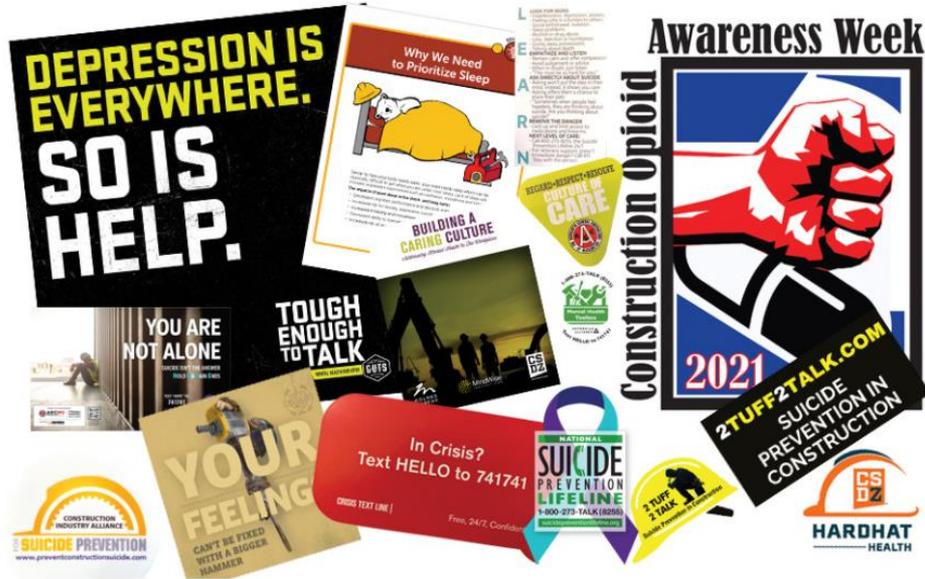


# LEARNING OBJECTIVES

1. **DISCUSS HOW TO BREAK THE STIGMA OF MENTAL HEALTH AND SUICIDE**
2. **ILLUSTRATE WHY MENTAL HEALTH AND SUICIDE PREVENTION ARE WORKPLACE ISSUES**
3. **HOW TO INCORPORATE SUICIDE PREVENTION INTO SAFETY, HEALTH, WELLNESS CULTURE**
4. **PROVIDE SPECIFIC ACTION STEPS FOR EMPLOYERS TO ADDRESS THESE TOPICS WITH EMPLOYEES AND FAMILIES**



# ENGINEERING NEWS-RECORD (ENR) 8/3/2021 COVER STORY



Associations, contractors, unions and other organizations have created a proliferation of hardhat stickers, wallet cards, posters, placards and other messaging to boost mental health awareness and suicide prevention.



# ***CRISIS IN CONSTRUCTION: WHAT?***

## **PANDEMIC AND 2020 UNREST: A “PERFECT STORM” IN CONSTRUCTION:**

- 1. WORSENING MENTAL HEALTH – *ISOLATION, STRESS, ANXIETY & DEPRESSION***
- 2. SUBSTANCE MISUSE AND ADDICTIONS**
- 3. SUBSTANCE USE DISORDERS – *RISK OF RELAPSE LEADING TO OVERDOSES***
- 4. PTS FROM TRAUMATIC EXPERIENCES AND INJURIES**
- 5. SUICIDE RISK**



# ***CRISIS IN CONSTRUCTION: WHY?***

- **ISOLATION AND LONELINESS**
- **INCREASING FINANCIAL AND FAMILY PRESSURES**
- **WORKPLACE INJURIES**
- **CHRONIC PAIN**
- **GROWING SUBSTANCE MISUSE**
- **STIGMA AND OTHER BARRIERS TO CARE SEEKING**
- **LACK OF TREATMENT AND RECOVERY OPTIONS**



# LINGERING EFFECTS & RISING RISK FACTORS

1. MENTAL HEALTH STRESS AND PRESSURES
2. “BURNOUT”: EARLY RETIREMENTS AND TURNOVER
3. “PRESENTEEISM” AND DISTRACTIONS LEADING TO PRODUCTIVITY, QUALITY, AND SAFETY INCIDENTS AFFECTING PROFITABILITY
4. FATIGUE, CHRONIC PAIN, AND SUBSTANCE MISUSE
5. OPIOIDS AND OVERDOSE RISK
6. SUICIDE RISK

# TAKING DOWN THE WALL

*one brick at a time...*

suicide

substance  
misuse

depression

opioids

loneliness

rejection

pain

anxiety

fatigue

shame

CS  
DZ

A QUALITY HEALTH COMPANY



# MY EXPERIENCE & JOURNEY

- FAMILY
- NEIGHBORHOOD
- WORKPLACE – HIGH SCHOOL AND COLLEGE
- CAREER
- INDUSTRY – POST 9/11 & HURRICANE KATRINA
- NATIONAL ACTION ALLIANCE FOR SUICIDE PREVENTION
- CATALYZED MOVEMENT – BECAME CIASP
- CSDZ/HMA/ICS

# PROFESSIONAL CAUSE TO PERSONAL MISSION

- *“MAKE YOUR VOICE A LITTLE LOUDER...”*
- **REALLY UNDERSTOOD EMOTIONAL MASKS**
- **DECLARED WAR ON SUICIDE**



# LARGE GROUP ACTIVITY: USA HOTLINES

TAKE OUT YOUR CELL PHONE AND LOAD 2 NUMBERS:



CRISIS TEXT LINE |

Text HELP or  
CONNECT to:  
741-741



For Spanish, press 2



# LEARN SUICIDE WARNING SIGNS

## Suicide Warning Signs

These signs may mean someone is at risk for suicide. Risk is greater if a behavior is new or has increased and if it seems related to a painful event, loss, or change.

- ❖ Talking about wanting to die or to kill oneself.
- ❖ Looking for a way to kill oneself, such as searching online or buying a gun.
- ❖ Talking about feeling hopeless or having no reason to live.
- ❖ Talking about feeling trapped or in unbearable pain.
- ❖ Talking about being a burden to others.
- ❖ Increasing the use of alcohol or drugs.
- ❖ Acting anxious or agitated; behaving recklessly.
- ❖ Sleeping too little or too much.
- ❖ Withdrawing or feeling isolated.
- ❖ Showing rage or talking about seeking revenge.
- ❖ Displaying extreme mood swings.

**Suicide Is Preventable.**

**Call the Lifeline at 1-800-273-TALK (8255).**

**With Help Comes Hope**



# HOW TO TALK ABOUT SUICIDE

## Help Prevent Suicide - LEARN® SAVES LIVES

### LEARN® SAVES LIVES Suicide Prevention Tips

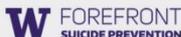
#### LOOK FOR SIGNS

#### EMPATHIZE & LISTEN

#### ASK DIRECTLY ABOUT SUICIDE

#### REMOVE THE DANGERS

#### NEXT STEPS



Most people can relate to a time when they felt alone. We may have just needed a reminder. *I see you. I care.* To help those in crisis and considering suicide, we recommend using LEARN®. We need everyone to play a role in suicide prevention. Most suicides are preventable. Together, we can save lives. **To learn more, go to [www.intheforefront.org](http://www.intheforefront.org).**

#### LOOK FOR SIGNS

- Talking, joking or researching ways to die.
- Feeling hopeless, depressed, trapped, burdensome, anxious, ashamed, or humiliated.
- Changes in personality, academic/work performance, sleep, withdrawing from friends/activities.
- Increasing use of alcohol/drugs, reckless behavior, self-harm/cutting, giving away possessions.

#### EMPATHIZE AND LISTEN

- People who have survived suicide attempts report what was most helpful to them—**just listen.**
- Listen with compassion, remain calm, avoid judgement and validate their feelings.
- Don't offer quick fixes, tell them everything will be OK, show anger, panic, or ask "why" questions.
- Let them know that you care about them.

#### ASK ABOUT SUICIDE

- Ask in a way that invites an honest response. Use any signs you've noticed as part of "the ask."
- Be direct. Use the word "suicide" and be prepared to hear a "yes."
- Asking about suicide will NOT put the idea in someone's head.  
*"Sometimes when people feel hopeless they are thinking about suicide. Are you thinking about suicide?"*

#### REMOVE THE DANGER

- If they say yes, ask them **"Do you have a plan?"** **"Do you have access to those means?"**
- Putting time and distance between a person at risk for suicide and lethal means can save lives.
- Remove or limit access to firearms, medications, belts, ropes, knives, alcohol and chemicals.
- Report concerning posts on social media.

#### NEXT STEPS

- Ideally with the person at risk, call the National Suicide Prevention Lifeline (see number below).
- If the person will not agree to stay safe, do not leave them alone. **CALL 911.**



# PREVALENCE OF MENTAL HEALTH CONDITIONS

- **1 IN 5 ADULTS (AND 1 IN 6 CHILDREN) IN THE US EXPERIENCES A DIAGNOSABLE MENTAL HEALTH CONDITION**
- **MORE COMMON THAN CANCER, DIABETES AND/OR HEART DISEASE**
- **APPROXIMATELY 44% RECEIVE CARE FOR MENTAL HEALTH CONDITIONS**

# HUMAN COSTS

- **AVERAGE DELAY OF 11 YEARS** FROM THE ONSET OF MENTAL HEALTH SYMPTOMS TO RECEIVING EFFECTIVE TREATMENT
- OF THOSE WITH DIAGNOSABLE MENTAL HEALTH CONDITION **56% DO NOT SEEK TREATMENT**
- **DEPRESSION IS LEADING CAUSE OF DISABILITY** IN THE UNITED STATES AMONG PEOPLE AGES 15-44

# HUMAN CAPITAL RISK MANAGEMENT: THE REAL BUSINESS CASE

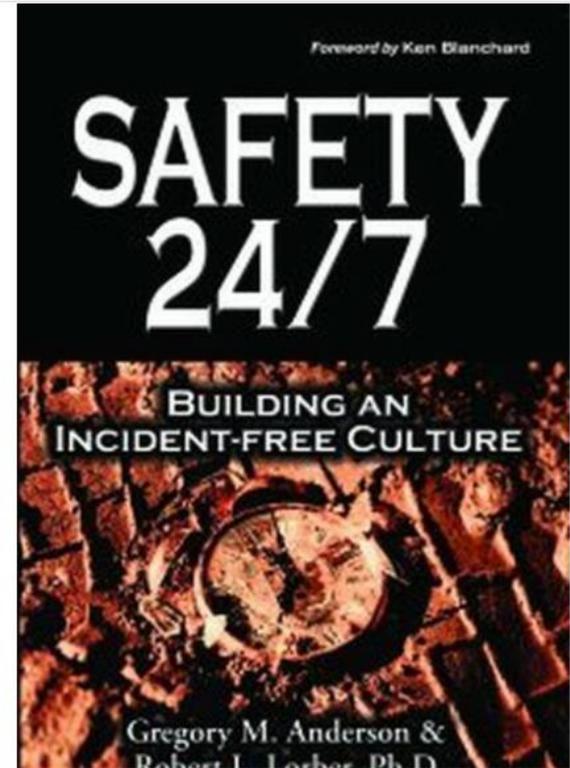
- PEOPLE ARE OUR CORE STRATEGIC ASSET
- WAR ON TALENT: RECRUITMENT AND RETENTION
- RISK OF *THE GREAT RESIGNATION*
- THE WORKFORCE IMPERATIVE: BECOMING AND STAYING AN EMPLOYER OF CHOICE
- CARING CULTURE
  - Respectful workplace
  - Empathy and concern
  - Psychological safety and trust
  - Diversity & Inclusion

# REFRAME SAFETY 24/7

**SAFETY AND WORKER WELLBEING  
DOESN'T  
STOP WHEN THE WORKER GOES  
HOME!**

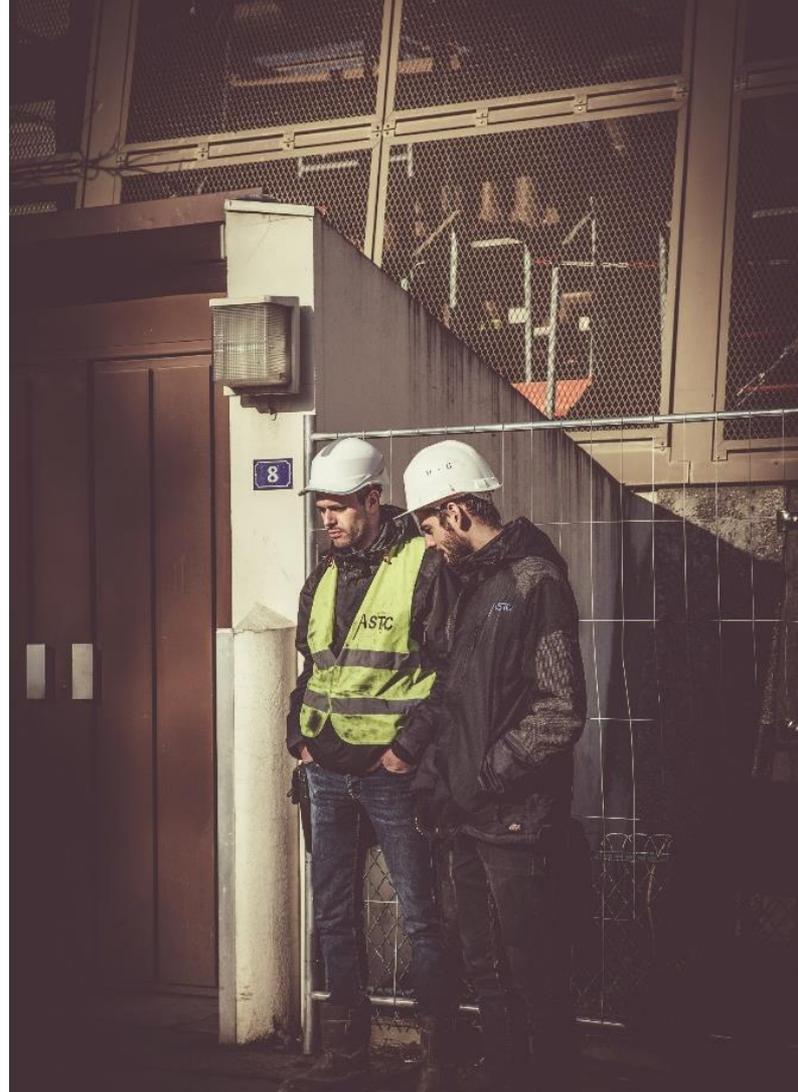
**WE FOCUS ON GETTING EVERYONE  
HOME SAFE AT THE END OF  
THEIR SHIFT.**

***ARE WE FOCUSING ON GETTING  
PEOPLE BACK TO WORK SAFE  
FROM HOME?***



## ***WHAT'S UNDER THE HARDHAT...?***

- ✓ **WORKERS BRING THEIR CONCERNS, WORRIES AND DAY-TO-DAY DISTRACTIONS TO WORK WITH THEM**
- ✓ **MENTAL HEALTH IS A DRIVER OF OVERALL WELLBEING**
- ✓ **PHYSICAL HEALTH TIES TO BEHAVIORAL HEALTH AND VICE-VERSA**



# RISK OF PRESENTEEISM

*THE PRACTICE OF COMING TO WORK DESPITE ILLNESS, INJURY, ANXIETY, IMPAIRMENT, AND ANY OTHER DISTRACTIONS THAT RESULTS IN REDUCED PRODUCTIVITY -- OR WORSE*



# Impacts of Presenteeism

- **Distractions leading to loss of attention and focus**
- **Increased number of near hits**
- **Rising risk of Serious Injuries and Fatalities (SIFs)**
- **Quality defects leading to rework**
- **Slowed productivity resulting in:**
  - **Increased labor costs and profit fade (overtime)**
  - **Idle equipment**
  - **Schedule delays**
  - **Sequence challenges**
  - **Angry owners and subcontractors**

# SUICIDE PREVENTION

**SUICIDE IS A PRESSING  
NATIONAL PUBLIC  
HEALTH CONCERN**

- **44,834 DEATHS IN 2020**
- **SUICIDE CAN BE  
PREVENTABLE**
- ***HOPE-HELP-RECOVERY***



A handwritten signature in yellow ink, appearing to be 'M' or 'M.'.

# HARSH REALITY OF SUICIDE

- 133 SUICIDES EACH DAY – 1 EVERY 11 MINUTES
- 2ND LEADING CAUSE OF DEATH FOR MEN UNDER AGE 45
- 2ND LEADING CAUSE OF DEATH FOR AGES:
  - 10–14; 15–19 & 20–24
- 4TH LEADING CAUSE, AGES 35–54 (MEN & WOMEN)
- 78% BY MEN
- 51% WITH FIREARMS



# CONSTRUCTION 2<sup>ND</sup> HIGHEST RATE OF SUICIDE

- 45.3 PER 100,000 WORKERS
- ESTIMATED >5,000 SUICIDES EACH YEAR
- 15 SUICIDES PER DAY
- 3.5 TIMES GREATER THAN THE NATIONAL AVERAGE

**More construction workers die by suicide each year than by all other construction-related fatalities**



Source: CDC; <https://www.cdc.gov/mmwr/volumes/69/wr/mm6903a1.htm>



# RATES FOR TRADES VARY | TOP 9

1. IRONWORKERS = 79 PER 100,000 WORKERS
  2. MILLWRIGHTS = 78.7
  3. BRICK/BLOCK MASONS = 67.6
  4. ROOFERS = 65.2
  5. LABORERS = 62
  6. CARPENTERS = 54.7
  7. EQUIPMENT OPERATORS = 52.8
  8. CONSTRUCTION MANAGERS = 45.7
  9. ELECTRICIANS = 44
- TRADES FIRST-LINE SUPERVISORS = 44



Source: CDC; January 24, 2020



# CONSTRUCTION RISK FACTORS

Industry Culture	Company/Job Factors	Worker Lifestyle
✓ Stoic, tough guy/gal	✓ Limited supervisory skills training	✓ Self-pressure and perfectionism
✓ Undesirable image	✓ No time off in season	✓ Financial pressures
✓ Cyclical industry	✓ Weather and sequence delays	✓ Chronic pain from soft tissue injuries
✓ Tolerant of alcohol and substance use	✓ Night work or OT	✓ Construction had highest rate of prescription opioids
✓ 2 <sup>nd</sup> highest industry for “heavy drinking (>16% of workers)	✓ Commuting	✓ Access to lethal means at home
✓ Drug use increased 13.2% (2015-2018)	✓ Out of town or out of state travel for work	✓ Skills gap and feeling trapped
✓ Accelerated schedules	✓ Humiliation of bad job (daily scorecard)	✓ Fearless or risk-taking behaviors
✓ Harsh conditions		
✓ Family separation & isolation		
✓ Layoffs/project furloughs		

# RISING RISK OF OPIOID AND OTHER OVERDOSES

## > 93,000 OVERDOSES IN 2020

- 30% increase nationally over 2019
- 28 states >30%
- Doubled in past 5 years
- More than 2x the number of suicides in 2020

**70% ARE OPIOIDS AND 73% OF THESE ARE FENTANYL  
(SYNTHETIC)**

**MORE EMPLOYERS ARE CONSIDERING  
NALOXONE/NARCAN AS *"THE NEXT AED"***



# REVIEW BUILDING BLOCKS

- 13 practical steps for addressing mental health and suicide prevention
- Includes:
  - The How
  - The Why
  - Quick Start Guide



#### **Accept the challenge.**

"Be the change you want to see" (Ghandi).

#### **Begin the journey.**

This is not about writing a policy or doing a "one and done" program. There is no single blueprint, so think of this guide as a roadmap with many roads leading to the same destination.

#### **Commit to action.**

Adopt the mindset of "*gentle pressure relentlessly applied*". This is a process of trial and error that will work through persistent implementation and continuous improvement.

#### **Develop a team.**

Create a workable strategic action plan.

#### **Execute your plan.**

Expand visible and vocal communications on project jobsites of addressing the emotional needs of workers and their families.



# 2021 Mental Health & Well-being in the Construction Industry Survey

Download:

[www.workplacementalhealth.org/constructionsurveyreport](http://www.workplacementalhealth.org/constructionsurveyreport)

AMERICAN  
PSYCHIATRIC  
ASSOCIATION  
FOUNDATION



CENTER FOR  
**WORKPLACE  
MENTAL HEALTH**





**Mental Health and Well-being  
in the Construction Industry**  
2021 PULSE SURVEY



**Leadership  
Engagement**



**Raising Mental Health  
Awareness**



**Creating a Mentally Healthy  
Organizational Culture**



**Enhancing Access to  
Services and Supports**





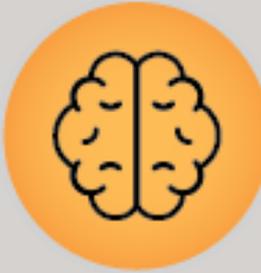
## Leadership Engagement

Articulate a vision and implement policies and practices that communicate that addressing mental health is a strategic imperative and where senior leadership is:

**Visible**

**Vocal**

**Vulnerable**



## Raising Mental Health Awareness: Resources & Strategies

Integrate resources & policies on mental health, substance misuse, suicide prevention, & worker well-being into existing functions, programs, & practices in key areas:

Human  
Resources

Employee  
Benefits &  
Wellness

Safety &  
Health



# Examples of Integration

## HR & Benefits

- Communications
- Recruitment / D&I
- Onboarding & Engagement
- Training & Development
- Performance Management
- EAP/Chaplain
- Drug & Alcohol Testing Programs
  - Last Change Agreements
  - Treatment & Recovery Programs
- Benefits Open Enrollment
- Wellness Programs

## Safety & Health

- Safety Orientation
- Pre-season /Pre-Project Kickoffs
- Daily Safety Huddles
- Safety Observations
- Posters & Banners
- Toolbox Talks
- Stand-Downs
- Critical Incident Response
- Drug & Alcohol Testing
- Workers Compensation
- Wallet Cards & Hardhat Stickers



## Raising Mental Health Awareness: Resources & Strategies

- Share a continuous stream of information and resources on mental health and substance misuse.
- Consider training and high impact resources for managers and first-line supervisors.
- Show a sustained commitment in making mental health and substance misuse resources available to workers throughout the year.
- Consider offering culturally sensitive and linguistically appropriate mental health resources for diverse populations comprising the construction workforce.



## Creating a Mentally Healthy Organizational Culture

- ✓ Build a caring culture that promotes “psychological safety.”
- ✓ Clearly convey no negative job consequences for seeking help when needed.
- ✓ Be aware of risks associated with offering alcohol at company events.
- ✓ Consider creating a mentorship or peer support initiative.
- ✓ Take the STAND-up pledge.



## Enhancing Access to Services and Supports

Assess key issues related to your company's Employee Assistance Program (EAP) and create a promotional campaign to educate employees about the EAP.

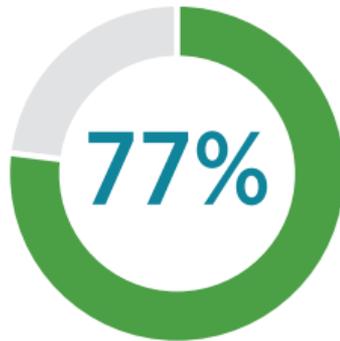
Remove barriers to care and improve access to medical and mental health care. Know the best practice strategies to do so.



Strong consensus exists on the top 4 reasons why workers needing help with mental health or substance misuse conditions may not seek care when needed



Shame and stigma



Fear of judgment by peers



Fear of negative job consequences



Don't know how to access care



# Knowledge Check on EAPs

1. Does your company have an Employee Assistance Program (EAP) included with your Behavioral Health Benefits Plan? Your unions, if applicable?

2. Do you know who is eligible for your EAP?

3. Do you know your EAP benefits?

4. Do you share the EAP number with your employees?

5. Do you know the utilization rate and impact metrics for your EAP?

# Removing Barriers and Improving Access to Care: *Best Practices*

1. Expanded education on Employee Benefits
2. Invite spouses & domestic partners to attend Employee Benefit Open Enrollment meetings
3. Changed Employee Assistance Provider
4. Initiated Chaplain services
5. Expanded number of EAP counseling sessions per issue/concern
6. Offered telehealth options for physical and mental health services
7. Invited labor union partners to offer jobsite explanations of how to access benefits
8. Negotiated increased preventive care services
9. Reduced co-pays for in-network providers
10. Expanded number of “in-network” mental health counselors
11. Allowed biometric testing to be performed by primary care physicians
12. Sponsored family health/wellness fair
13. Incentivized participation of wearable monitors
14. Provided app for mental health counseling services
15. Offered mindfulness, resiliency and wellbeing apps



Integrating Mental Health  
into Company Culture,  
Programs and Practices



**Estamos todos juntos en esto.**

Y juntos, podemos eliminar el estigma en la salud mental.

**ESTÉ PENDIENTE DE LAS SIGUIENTES SEÑALES DE ADVERTENCIA:**

- Aumento de impuntualidad y ausentismo
- Disminución de productividad
- Disminución de autoestima
- Aislamiento de los compañeros
- Agitación y aumento de conflicto con compañeros de trabajo
- Disminución en la capacidad de resolver problemas
- Abuso de sustancias legales e ilícitas
- Apunto de accidentarse, tener incidentes y sufrir lesiones
- Aumento de sentimientos de agobio

Estadísticamente los trabajadores de construcción tienen más riesgo de tener problemas de salud mental que cualquier otra profesión. Si usted o alguien que usted conoce se siente deprimido o tiene comportamientos suicidas, ustedes no están solos. **Hay otras personas en nuestra industria que se sienten igual, y lo que es más importante, hay otras personas que lo pueden ayudar.** Si necesita ayuda urgente, por favor contacte inmediatamente a la *National Suicide Prevention Lifeline* (Línea de Vida Nacional para la Prevención del Suicidio).

**CONSTRUYENDO UNA INDUSTRIA CON CERO SUICIDIOS.**

ALIADOS EN LA LUCHA PARA LA PREVENCIÓN DEL SUICIDIO Y PROMOCIÓN DE SALUD MENTAL.



[www.cfma.org/suicideprevention](http://www.cfma.org/suicideprevention)



[www.constructionworkingminds.org](http://www.constructionworkingminds.org)



[www.luoe302.org](http://www.luoe302.org)



[www.mantherapy.org](http://www.mantherapy.org)

**NATIONAL**  
**SUICIDE**  
**PREVENTION**  
**LIFELINE**  
 1-800-273-TALK (8255)  
[suicidepreventionlifeline.org](http://suicidepreventionlifeline.org)

Diseno original inspirado y creado por CFMA'S VALLEY OF THE SUN CHAPTER en asociación con JF GRIFFIN GROUP, Trained Employee Assistance Advisors ([www.jfgriffinco.com](http://www.jfgriffinco.com))



*Construction Industry Alliance for Suicide Prevention (CIA-ASP)*  
[www.preventconstructionsuicide.com](http://www.preventconstructionsuicide.com)



# CONSTRUCTION SUICIDE PREVENTION PARTNERSHIP (OREGON)



Download Take Action Guide

[HTTPS://CDN.YMAWS.COM/WWW.SAFESTATES.ORG/RESOURCE/RESMGR/BUSINESS/CSPP\\_NOTTODAY\\_INTERACTIVE\\_AC.PDF](https://cdn.ymaaws.com/www.safestates.org/resource/resmgr/business/cspp_nottoday_interactive_ac.pdf)



# BUILDING A CARING CULTURE WHITEPAPER

## BUILDING A CARING CULTURE

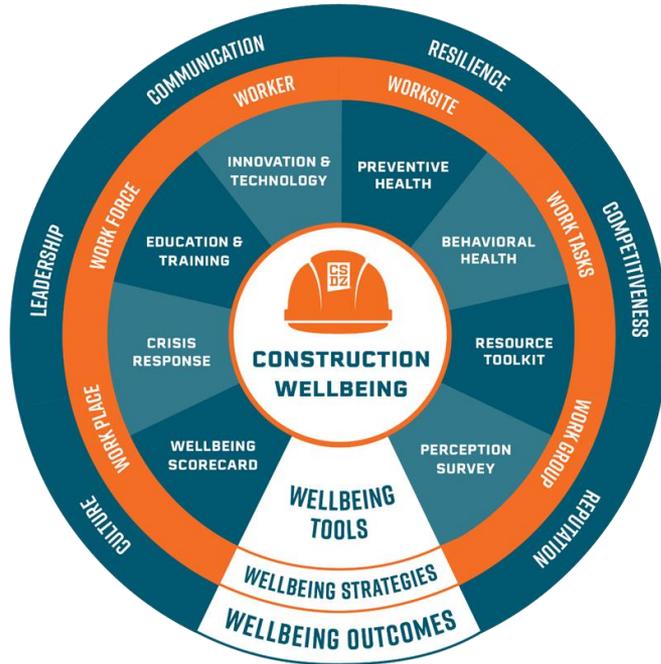
ADDRESSING MENTAL  
HEALTH IN THE  
WORKPLACE

*Whitepaper authored by  
Holmes Murphy, CSDZ and MindWise Innovations.*

**Download:** [https://think.holmesmurphy.com/WC-WP-Building-A-Caring-Culture\\_Brochure--Form-v3.html](https://think.holmesmurphy.com/WC-WP-Building-A-Caring-Culture_Brochure--Form-v3.html)



# Construction Worker Wellbeing Model



Integrated model focused on wellbeing *strategies, tools, and outcomes*:

- ✓ Workplace
- ✓ Workforce
- ✓ Worker
- ✓ Worksite
- ✓ Work Tasks
- ✓ Work Group

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<https://www.csdz.com/service/construction-wellbeing-model/>

# CONTACT INFORMATION

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