# Mental Health and Suicide Prevention in Construction

The time is now to re-think traditional safety and culture



## Two issues... same root cause?

- Lack of control
- Low perception of skill





CIASP's involvement at the highest level

## Strength. Determination. Grit.

CHARACTER TRAITS THAT GET HARD WORK DONE.

The same traits can be a barrier to asking for help.







INFORMATION & RESOURCES AT



PREVENTION LIFELINEAT

1.800.273.TALK (8255) or
suicidepreventionlifeline.org



TEXT HELLO TO 74/74|
Free, 24/7, Confidential
crisistextline.org

IT'S OK TO NOT BE OK. BE BRAVE – SPEAK UP FOR YOUR TEAM. SPEAK FOR YOURSELF.

## Let's clear up some language

- Die by vs. Commit
- Has vs. Is
- Weak, selfish

## Why?

- Construction is most at risk industry for suicide deaths
  - All levels: laborers, skilled trades, operators, management
  - Overall rate: 49.4/100,000
     3.5x the national average
  - Equipment operators have highest prevalence





## It's not just construction

- Suicide is a societal issue:
  - 48,344 deaths annually
  - □ 14.2/100,000
  - □ 132 Per Day



## It definitely IS a workplace concern

- 1 in 5 Adults Will Experience Mental Illness
- 43.8 Million
- 60% are left untreated

Nearly half have a co-occurring substance abuse disorder

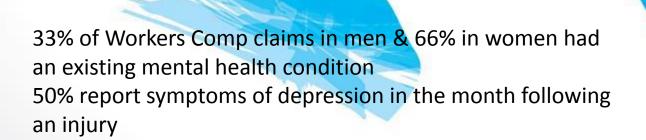
Depression is the first leading cause of disability & increases risk of other chronic medical conditions – Mental health claims are 1/3 of all disability claims



Can lead to up to 27 lost workdays per year

Mental illness leads to \$193 billion of lost earnings

A \$1 Investment in mental health results in a \$4
Return on Investment





## What are the Construction Risk Factors?

Chronic pain

Extreme pressure / low margin for error Promotion of supervisors without leadership training

Skills gap / feeling stuck

Stoic / tough guy mentality

Separation and/or isolation

Layoffs / financial instability

Access to lethal means

Veterans in the workforce

Alcohol & Substance Abuse

Demographics: Men in the middle Sleep disruption / deprivation

Poor access to /
utilization of
behavioral health
care

Thoughts of / Desire for Suicide Joiner's Interpersonal Theory of Suicide Perceived Burdensomeness Thwarted "The world would Belongingness be better without "Lam alone" me" **Acquired Capacity** for Suicide "I am not afraid to die" Suicide Attempt or Death

## Create a Caring Culture

Leadership support / encouragement

Injury management programs / return to work /pain management

Considering the person and their needs in scheduling, assigning to out of town jobs Creating /
encouraging peer
support relationships –
building teams

Personal financial management / education

Reduce jobsite access to lethal means

Gun safety education

Confirm access to benefits / educate employees on availability including EAP

Substance abuse education / screening programs / second chance agreements

Staff projects appropriately / have reasonable expectations

Train
managers/supervisors
in people
management – soft
skills, communication

Train & develop employees to reach full potential, given future hope

Build in Veteran protective factors

Joiner's Interpersonal Theory of Suicide Thoughts of / Desire for Suicide

### Workplace Protective Factors:

- Management support
- Realistic expectations
- Constructive correctional actions

Perceived
Burdensomeness
"The world would
be better without
me"

Thwarted
Belongingness
"Lam alone"

## Workplace Protective Factors:

- Encouraging peer relationships
- Creating social connectedness
- Watching out for people at times of relationship changes

Acquired Capacity for Suicide

"I am not afraid to die"

### Workplace Protective Factors:

- Trauma exposure reduction
- Crisis management

Suicide Attempt or Death

## Performance Issues That Can be Warning Signs

- Decreased problem solving ability
- Decreased self confidence
- Decreased productivity
- Increased tardiness & absenteeism
- Increased conflict among co-workers
- Increased near hits, incidents, injuries



## Opioids Have No Place in the Workplace

- 16,790 Prescription Opioid Overdoses
- 47,600 Opioid Overdose Deaths Overall
- Illegitimate Use:
  - Impairing
  - Probably a sign of an opioid misuse disorder
- Legitimate Use (Prescribed):
  - Impairing
  - Addicting
  - Increases risk of future disability
  - Delays recovery
  - Increases medical costs
  - Less effective than alternatives

## Acute Rx Leads to Long Term Use

#### Duration of acute use:

1 Day = 6% chance of still using the drug a year later

7 Days = 13.5% chance

31 Days = 29.9% chance

### Long term use leads to:

- Increased perception of pain
- Increases risk of depression
- Increases risk of suicide

### Recognize the Signs to Speak Up

#### WHAT ARE THEY SAYING?

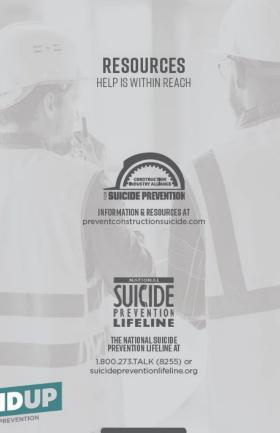
- Talking about feeling trapped
- · Saying they want to die
- Feeling like they are a burden to others
- Expressing hopelessness or helplessness
- Conflict or confrontations with co-workers

#### WHAT ARE THEY DOING?

- Increased tardiness or absenteeism
- Decreased productivity and problem solving
- Near misses, hits or other safety incidents
- Misusing drugs or alcohol
- Acting anxious, agitated or reckless
- Withdrawing from social groups and interactions
- Extreme mood swings

### WHAT'S HAPPENING IN THEIR LIVES?

- Relationship issues
- Major life changes
- · Loss of a loved one
- · Financial difficulties
- Illness or injury





CRISIS TEXT LINE

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## Know How to Respond: TASC

#### Tune in

Tune in: When you notice or sense that a person may need help, focus your attention on them for warning signs

### Ask

Ask: Ask if they are thinking about suicide clearly, directly & calmly – and without judgement

#### State

**State:** State that suicide is serious and that connecting to help is important

#### Connect

Connect:
Connect the person to a helping resource who knows suicide first-aid skills



**GET HELP** 

Know who to contact if you or someone you know is at risk of suicide **GET INFORMED** 

Learn why construction is the most at-risk industry for suicide deaths **GET STARTED** 

Pledge to STAND UP for suicide prevention and address it as a health and safety priority WE ALL
STAND
STRONGER
TOGETHER



INFORMATION & RESOURCES AT



THE NATIONAL SUICIDE PREVENTION LIFELINE AT 1.800.273.TALK (8255) or suicidepreventionlifeline.org



Take the pledge, download resources, order supplies, access free training and screening tool – all on our website

