A New Challenge Facing Construction Risk Management:

Why Addressing Addiction, Mental Health, and Suicide Matters in Workplace Health and Safety

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Chubb Global Risk Advisors wants to help you create a psychologically safer and more resilient workplace.

Did you know?
The Construction Industry is at Risk

According to the Center for Disease Control (CDC), construction/extraction is the leading industry for suicide (deaths by suicide occur at a rate of 53.2 per 100,000 for men in construction, versus 14 per 100,000 for the general population).

For every person who dies by suicide, however, roughly 280 live through their suicidal crises. They get treatment and find sobriety, they have spiritual awakenings or remove themselves from toxic situations. They solve financial and relationship problems. Many people who suffer from suicidal crises are transformed by these experiences and grow from them.

The CDC study notes that "identifying the specific role that occupational factors might play in suicide risk is complicated."[1] Factors such as job insecurity or a lack of job control can play a role, but so can non-work issues such as relationship conflict, and socioeconomic factors like lower income and education. Suicide is more prevalent among men than women, and construction employs approximately 10 times more men than women.[2]

Even if the causes of the high suicide rate among construction workers are not fully understood, what is clear is the need to find and implement solutions to reduce that rate.

The High Cost of Suicide in the Workplace

While the most devastating cost of suicide is the loss of valuable and priceless human lives – and the lasting impact on the affected families - there are also a number of business-related costs that must be considered. Return on Investment (ROI) studies[3] have identified a number of costs related to suicide and suicidal behaviors, including production disturbance (e.g., value of lost production and staff turnover), human capital lost, medical costs, administrative costs (e.g., due to employer investigation), and more. These studies examined the costs associated with short- and long-term absences after suicide attempts, full

Trends in Workplace Mental Health and Suicide

Trend #1:
In the U.S., middle-aged Caucasian men with a high school education are experiencing a rise in "deaths of despair."

"Deaths of despair" mark a concerning trend identified by health economists[4] who noticed the mortality rates of Caucasian men aged 45-54 are rising, and almost all of these deaths are attributable to self-destructive behaviors such as suicide, overdoses, and the larger consequences of addiction. People experiencing a fall in social and economic status are often challenged to hold stable family structures (e.g., marriage), and subsequently other areas of their life can begin to unravel. In other words, those victim to the "deaths of despair" trend had certain dreams and expectations for their lives. When these dreams are crushed or go unrealized, suicidal despair is common.

Trend #2:
In the United States, the opioid crisis is connected to the suicide crisis,[5] and construction has been devastated by both.

Contrary to conventional wisdom, opioids do not alleviate pain; rather, they alleviate suffering. Opioid medication was never intended for long-term use in non-cancer pain situations, only under highly acute situations like post-surgery or severe trauma. Unfortunately, many people attempt to use opioids to mitigate the effects of ongoing physical and mental pain, two factors regularly associated with suicide. Addiction is highly common in instances of sustained opioid usage, and users unwittingly experience even greater sensitivity to pain stimuli, a decreasing quality of life, and increasing suicidal despair.[6]

Trend #3:
Workplace wellness programs are increasing their focus on mental well-being.

Many workplaces are now more aware of the interconnectivity of physical and emotional wellbeing and are increasing efforts to educate their workforce. Employers advocate for self-care through "mental health days," encouraging mindfulness practices, and even providing opportunities for napping at work. Employee well-being is now considered a key business performance strategy that boosts not only employee productivity, but also employee recruitment, engagement, and retention, ultimately and significantly improving the company's brand.[7]

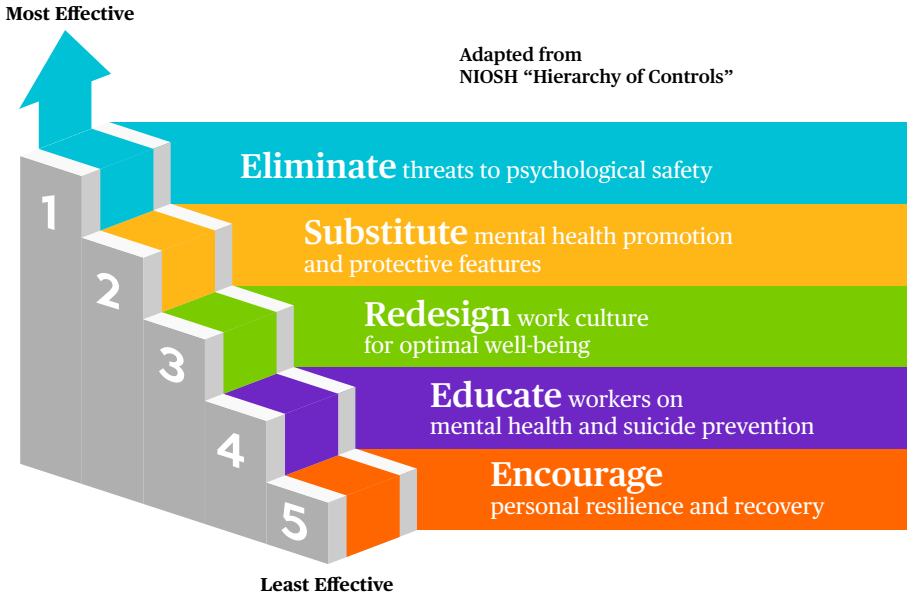
incapacities, and fatalities. Findings suggest employers in the construction/extraction industry can expect a 1.50:1 benefit cost ratio for investing in suicide prevention. As employers become more invested in advocating for mental health and offering well-being initiatives, they may reduce not only the number of deaths, but also the economic consequences that suicide and suicidal behavior can have on their organization.

Not all suicide prevention is crisis-oriented. In fact, proactive efforts to promote and establish a culture of good mental health may result in an even bigger ROI,[8] similarly to how promoting heart health is less expensive than responding to the crisis of a heart attack. Physical and mental well-being has clear connections to greater employee engagement, proactive work behavior, and transformational leadership. Altogether, promoting protective factors (such as positive sleep and eating habits, exercise and collegial support, etc.), early intervention, and effective suicide crisis responses save companies both money and heartache.

Why Mental Health and Suicide Prevention Matter in Risk Management

When a workplace fatality or injury occurs, the cause is almost always determined to be "accidental" and intent for self-harm is usually not investigated. Often times, the perceived remedy is to implement more safety oversight or to provide more safety training. When we look at fatal occupational injuries, however, the two most common causes of death (transportation incidents and falls) are also common ways people think about taking their lives.[9-10] Thus, it is possible that some, if not many, of these workplace fatalities and injuries are actually suicide deaths or attempts. Safety training alone may not be effective in preventing them.

The reason suicide has not concerned risk management before is that most suicide attempts and deaths do not occur at the workplace, and thus, were not considered a work-related issue. Today, we know differently, and workplaces can take



action to make suicide prevention and mental health promotion priorities. Mismanaged mental health conditions and unchecked suicidal thoughts can lead to safety concerns such as distraction, impulsivity, fatigue, micro-sleep, and risk-taking.

What Contributes to Poor Psychological Health at Work?

Sometimes employees enter a workplace with pre-existing mental health conditions that are genetic, related to trauma outside of work (especially childhood trauma), or due to other non-work causes. Sometimes workers' suicide risk is increased by the psychosocial hazards of toxic job strain and work-related trauma or injury. Often suicidal despair represents a combination of the two.

Researchers are clear in their findings: risk factors in the workplace can contribute to mental health concerns – including suicide risk – previously considered unrelated to work. Therefore, improvements in the psychosocial conditions of work may improve well-being and prevent suicide.

Adapting the National Institute for Occupational Safety and Health's (NIOSH) Hierarchy of Controls, workplaces striving to prevent suicide can eliminate threats to psychological safety (e.g., bullying, toxic management practices, etc.) and substitute unsafe practices with those that promote mental health and protective factors. Redesigning work culture for optimal well-being might include making access to quality mental health care more readily available, or changing the process of performance reviews to be more collaborative and mindful of how psychological distress impacts work abilities.

Many workplace well-being hazards and "job strains" put workers at risk for suicide and significant emotional distress.[11] These hazards include, but are not limited to:

- Low job control – lack of decision-making power and limited ability to try new things
- Lack of supervisor or collegial support – poor working relationships
- Excessive job demands and constant pressure/overtime
- Effort-reward imbalance – related to perceived insufficient financial compensation, respect, or status
- Job insecurity – perceived threat of job loss and anxiety about that threat
- Bullying, harassment and hazing at work
- Prejudice and discrimination at work

Be Aware of Warning Signs

Warning signs are changes in behavior that happen closer to suicide deaths or attempts. Some behaviors may indicate that a person is at immediate risk for suicide.

The following three signs should prompt you to immediately contact the National Suicide Prevention Lifeline at 1-800-273-TALK (8255), the Crisis Text Line (text HELLO to 741741), or a trusted mental health professional:

- Talking about wanting to die or to kill oneself
- Looking for a way to kill oneself, such as searching online or obtaining a gun
- Talking about feeling hopeless or having no reason to live

Other behaviors may also indicate a serious risk – especially if the behavior is new; has increased; and/or seems related to a painful event, loss, or change.

- 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

In summary, what you are looking for are changes in mood, behavior, and life circumstance. Remember, people often cope with overwhelming emotions by thinking about suicide. When you notice these warning signs and risk factors, assume suicidal thoughts are already there.

- Work-related trauma
- Work-related sleep disruption
- Toxic work-design elements (exposure to environmental aspects that cause trauma, pain, or illness)
- Work culture of poor self-care and maladaptive coping (e.g., alcohol and drug use)

Of these factors, job security has been associated with higher likelihood of suicidal thoughts, and issues with job control appear to be more connected to a risk of suicide attempts and death. Prospective evidence also suggests that workplace bullying, especially physical intimidation, can lead to suicidal thoughts and feelings.[12]

Emerging evidence[13] also indicates that aggregating factors in the suicide deaths of construction workers include a transition in work experiences, a workplace injury resulting in pain or disability, and financial issues. The same study finds that the decedent often disclosed to coworkers their suicide plans prior to death, indicating that peer support could be a life-saving intervention.

How can Workplaces Prevent People from Experiencing Life-Threatening Despair?

Getting ahead of a suicide crisis means building better awareness and protective factors, as well as strategies to help people catch emerging problems earlier in the process. Here are some examples:

- ***Toolbox Talks:*** Examples at Construction Working Minds: www.constructionworkingminds.org/toolbox-talks.html).
- ***Tackle Prejudice by Educating and Inspiring the Workforce with Mental Health and Suicide Prevention Literacy:*** Facts and frameworks are helpful but getting to know people who have "lived expertise" with depression, anxiety, addiction, and suicidal thoughts does more to undo stigmas than all other methods.
- ***Anonymous and Confidential Screening:*** Frequent and regular screenings for testicular cancer or blood pressure can help identify problems before they develop into life-or-death situations. Similarly, the prognoses for mental health conditions are most favorable when they are detected early and treated appropriately.
- ***Develop a Tiered Training Program:*** Everyone should receive some basic mental health and suicide prevention awareness and skills. The more people become aware of mental health issues and emerging signs of despair, the more "eyes we have on the playing field," and the more likely someone will notice and take action when needed. Research supports the conclusion that greater awareness of symptoms of suicidality is associated with a greater likelihood for people to recommend or seek help.
- ***Kick the Tires of the Available Mental Health Services:*** Local mental health services and Employee Assistance Programs (EAPs) are valuable assets to the workplace. They help employers by offering psychological assessment and short-term counseling, managing critical incidents, and conducting "fitness for duty" evaluations, as examples. EAP providers and industry-specific mental health experts can be critical consultants when an employer is concerned about a worker's safety. They can help develop re-integration plans for employees who have needed to go on medical leave due to mental health conditions.
- ***Promote Crisis Resources and Peer Support.*** Empower and train co-workers to look out for one another and to connect to supports when needed.

- ***Support People Experiencing a Suicide Loss.*** Suicide loss is a tragedy like no other. For many of the family and friends who lose a loved one, the subsequent grief and trauma can lead to significant life disruption. To minimize the devastating impacts of suicide and restore resiliency, workplaces can be proactive – reach out to those most directly affected and offer resources like suicide loss support groups and online support.

Summary

Workplaces are arguably the most impactful system for improving adults' emotional wellbeing. By proactively increasing protective factors and reducing toxicity, job strain, and the effects of workplace-trauma, places of employment can reduce the risk of catastrophic outcomes of unaddressed mental health conditions and suicidal despair. When workers are suffering, workplaces can help them identify emerging concerns and can provide them with appropriate resources before these issues become life-threatening. Finally, should a workplace experience a mental health crisis or suicide, leadership can help facilitate support for people experiencing the subsequent hardship, grief, and trauma.

Need a Hand?

The demanding and fast-paced nature of the construction industry can make it difficult for employers to identify certain mental exposures. Mental health and suicide prevention specialists can help businesses assess their workplace and identify program requirements and training needs. These resources offer critical components in mental health awareness, such as:

- Gap analysis and strategic planning
- Leadership engagement
- Reviewing and promotion of mental health resources
- Training of management and craft
- Communication strategies

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Footnotes

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