



Mental Health in the Construction Industry



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In the construction industry, five times more people die from suicide than from job accidents. Vince Hafeli was almost a part of that statistic, and now he is on a mission to change the culture of the construction workplace.

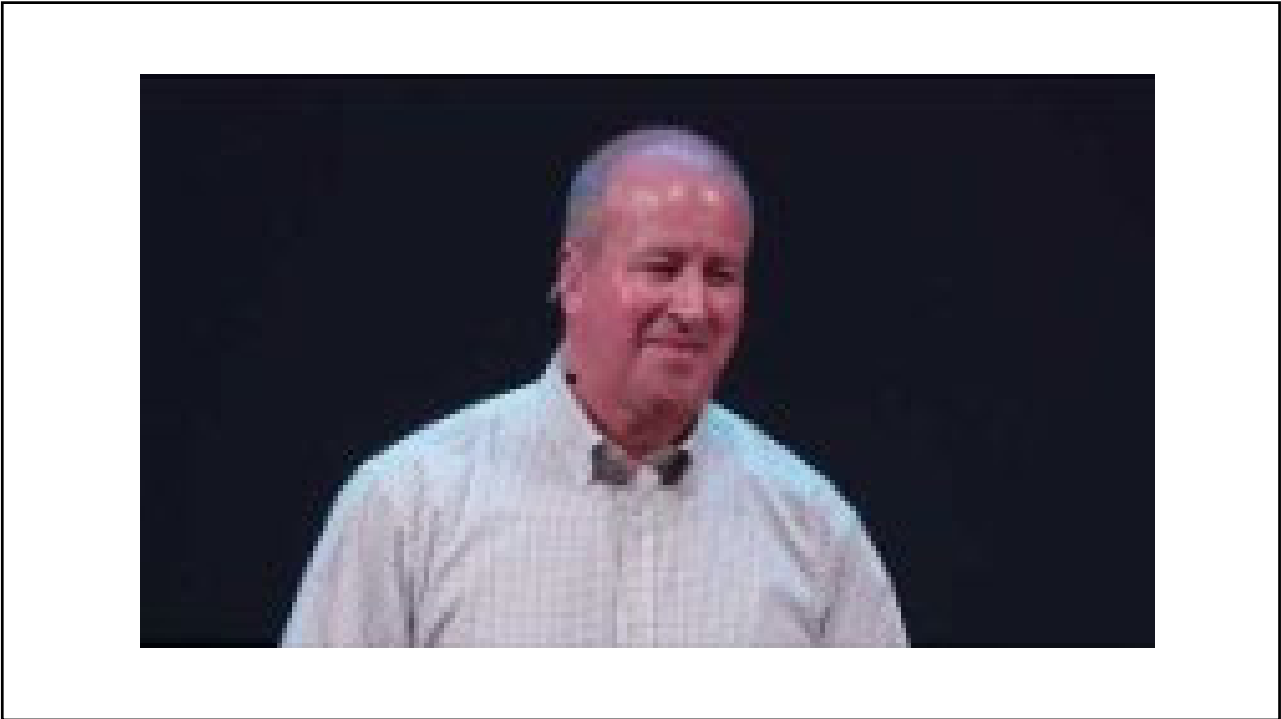
He has over 37 years of experience in the highway construction industry, among the most recent years leading a team of 470+ employees as President of Ajax Paving Industries of Florida.

He has a diverse background holding positions including Field Quality Control and Inspection, Project Manager, and Vice President of Asphalt Plants and Materials.

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Would it surprise you?

- Mental health and well-being are high priorities for organizations across industries. This was true before COVID-19, however, the pandemic escalated awareness.
- There has been an extensive focus within the construction industry on safety hazards and how their presence can be reduced to safeguard the physical well-being of employees. What about the protection of workers' mental health?
- Anxiety, depression, suicidal thoughts, and others are as dangerous to worker safety as any of the more tangible job site threats.



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Would it surprise you?

- A survey conducted in 2020 revealed that 83% of construction workers had struggled with mental health issues. According to the Centers for Disease Control and Prevention, construction occupations have the highest rate of suicide, as well as the highest number of suicides across all occupational groups.”
- The numbers may be surprising at 53.2 suicides per 100,000 workers; 4X greater than the national average, which is 17.3/100,000, and 5X greater than all other construction fatalities combined, which is 10.1/100,000. Suicide would easily top the list of OSHA's Fatal Four Hazards.
- Research shows that up to 90% of people who die by suicide have a mental health condition. Depression is the most common, however other conditions may impact suicide rates — alcohol misuse, anxiety, and trauma.



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Contributing Factors

- Male dominated industry, with men experiencing the highest suicide rates.
- Toughness and strength are valued, mental health conditions, or seeking help, may be seen as personal weakness.
- Stigma and fear of consequences associated with mental health issues and seeking help.
- Shame and fear of judgment.
- Chronic pain.

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Contributing Factors, continued

- Seasonal and cyclical work contributing to family and financial strain.
- High stress and deadline driven work.
- Limited job control.
- Long work hours including potential for large volume of overtime leading to fatigue.
- Separation of family when working away from home.



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What about women in construction?

- Female construction workers are in the minority and therefore may feel isolated.
- They are subject to a gender stereotype that not only affects their self-esteem, but also means that they are often subject to verbal and/or sexual harassment, unequal remuneration, and/or limited prospects for career advancement.
- Women often have to deal with linguistic challenges as a result of the predominance of male-oriented language and communication techniques, and the differences in the use of language can lead to a sense of being left out or unacknowledged.
- A major stress can result from trying to balance work and home — a task with which many women struggle daily.



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What about women in construction?

- There is a lack of effective, well-fitted personal protective equipment for women, which not only jeopardizes their physical safety and comfort but also contributes to psychological stress.
- The hard nature of construction jobs and the problems they struggle with daily make female construction workers particularly vulnerable to mental health problems.




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MYTH: Mental health problems are not that common.

Fact: Mental health problems are very common. About 1 of every 5 people will experience a mental health challenge each year.

One of every 25 has a serious mental health disorder. These include anxiety, major depression, bipolar disorder, and schizophrenia.



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MYTH: Children and teens don’t have mental health problems.

Fact: Research shows that 1 in 5 teenagers have or will have a mental illness, more than 4 in 10 students felt persistently sad or hopeless, and nearly a third experienced poor mental health.

In 50% of adults who have a mental health issue, the first signs showed up before age 14. These problems are not the result of bad parenting. They are a combination of many factors, many which are beyond the child or parents’ control. Negative events in childhood can contribute to mental health issues in teens and adults.



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MYTH: People with mental health issues are violent or dangerous.

Fact: A large majority of mentally ill people are not violent. According to the Substance Abuse and Mental Health Services Administration, only about 3-5% of violent acts are committed by a person with symptoms of mental illness.

In fact, people with serious mental health issues are 10 times more likely to be a victim of violence.



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MYTH: Mental health problems are a sign of weakness.

Fact: Mental illness has nothing to do with strength or weakness. It is a medical disorder that needs treatment in the same way an infection, high blood pressure, or broken bone needs treatment. Many factors are involved in mental health, including:

- Brain chemistry. The levels of different chemicals in your brain can affect how it works.
- Diseases or injuries. Suffering from a long-term illness or injury can affect your mental health as well.
- Life experience. This includes going through a traumatic event or having a very stressful job or home life.
- Family history. Having a parent with a mental health problem could increase your risk of having one.



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MYTH: When someone develops a mental health challenge, they will have it for the rest of their lives. They will never recover.

Fact: Mental health doesn’t stay the same. Many factors can influence how a person feels. If any of these factors change, mental health can change. With treatment, many of the challenges are temporary. A good treatment plan will help a person work through the challenge and recover. If the challenge doesn’t go away, it might be possible to find a way to live with it and still be a productive member of society.



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MYTH: Therapy is a waste of time.

Fact: Some people may not be comfortable with therapy. Research has shown that it is very effective in treating mental illness. It’s usually most effective when used in combination with medicine. Studies found that 70% to 90% of people reported an improvement in their symptoms when both were part of their treatment plan.

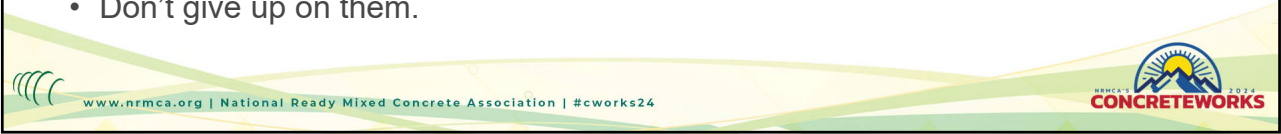


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MYTH: There’s nothing I can do to help someone with a mental health problem.

Fact: There are many things you can do to help someone:

- Let them know you are there if they need you.
- Learn about what they are going through.
- Treat them with respect. Don’t call them “crazy.”
- Express your support in ways they can understand.
- Help them find the mental health services they need.
- Get help for yourself if you need it.
- Don’t give up on them.



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MYTH: You can’t prevent mental illness.

Fact: You can’t always prevent getting mental health problems. But you can address risk factors you or your loved one may have:

- Try to minimize exposure to trauma. If you or a loved one experiences a traumatic event, get help right away. Early treatment can prevent worse problems in the future.
- Reduce stress. Having a very stressful job or home life can reduce the quality of your mental health.
- Put yourself in positive situations. Avoid negative people. Instead, surround yourself with healthy people with a good outlook on life.
- Establish healthy habits. Eat a healthy diet, exercise, and get plenty of sleep. These basic self-care methods can go a long way in how you feel about yourself and how you function.



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Ways to Help

1. Leadership Engagement
2. Raising Mental Health Awareness
3. Create and Foster a Mentally Healthy Organizational Culture
4. Enhance Access to Services and Support



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1. Leadership Engagement

Articulate a vision and implement policies and practices to communicate that addressing mental health is a strategic imperative for the company:

- Prioritize comprehensive mental health initiatives to reverse the alarming trend of increasing mental health challenges and suicides within the construction industry.
- Be Visible: exhibit leadership on the importance of addressing mental health as a sound business practice and as the right thing to do.
- Be Vocal: make a commitment to regularly communicate care and concern for the well-being of your employees and their families.
- Be Vulnerable: share personal stories of “lived experience” demonstrating from the leadership level that “it is ok to not be ok.” This will create trust and reduce stigma.





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2. Raise Mental Health Awareness, 1 of 2



- Integrate resources, information, and policies on mental health, substance misuse, suicide prevention, and worker well-being into existing functions, programs, and practices in key areas like Human Resources, Benefits and Wellness, and Safety and Health.
- Share a continuous stream of information and resources on mental health and substance misuse through newsletters, posters, EAP information, crisis hotlines, and well-being resources.
- Consider training managers and first-line supervisors to better understand mental health and substance misuse. Training programs tailored to the unique stressors of the construction industry should be initiated to provide employees with the knowledge and skills to recognize signs of mental distress, stress management techniques that are effective for preventing or coping with the problems, and resources for assistance.

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2. Raise Mental Health Awareness, 2 of 2

- Check with your EAP about what they offer in training and resources.
- Check with community organizations like NAMI or Mental Health America.
- Contact the American Psychiatric Association Foundation’s Center for Workplace Mental Health or other consulting firms on customized mental health presentations/trainings available for supervisors and employees.
- Reach out to the National Council for Mental Wellbeing which offers Mental Health First Aid courses.
- Review resources offered by the American Foundation for Suicide Prevention to share with managers and supervisors.

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3. Create a mentally healthy culture, 1 of 2

- Build a caring culture that promotes “psychological safety” by showing concern and empathy for workers and their families.
- Reinforce a respectful workplace culture, free from harassment, discrimination, bullying or inappropriate teasing, and harsh judgment of peers.
- Foster a culture of support wherein employees feel safe acknowledging their mental health challenges so that they can be recognized and addressed in a timely and effective manner.



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3. Create a mentally healthy culture, 2 of 2

- Clearly convey that employees will not be subject to negative job consequences solely for seeking help when it's needed. In fact, seeking help is encouraged for their well-being and to ensure they can meet expectations on safety, productivity, engagement, and performance.
- Be aware of the risks associated with offering alcohol at company sponsored events. That is difficult for employees who may be in recovery and can lead to unhealthy alcohol misuse, especially if consumed to cope with high stress, burnout, or mental health issues.



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4. Enhance access to services and support, 1 of 2

- Assess key issues related to your company’s Employee Assistance Program (EAP).
- Remove barriers to care and improve access to medical and mental health care.
- Sponsor family health and wellness fairs and include information about mental health and substance misuse.
- Resources for mental health services and support are listed on the following slide.



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4. Enhance access to services and support, 2 of 2.

- 988 Suicide & Crisis Lifeline: Call or text 988 or chat at 988lifeline.org to speak with a trained crisis worker 24 hours a day.
- Crisis Text Line: Text "MHA" to 741741 to speak with a trained crisis counselor.
- SAMHSA Disaster Distress Helpline: Call or text 1-800-985-5990 if you've been impacted by a disaster and are experiencing emotional distress or other mental health concerns.

- National Suicide Prevention Lifeline: Call 1-800-273-TALK (1-800-273-8255) to be connected with your local crisis center.
- 211: Dial 211 to be connected with mental health crisis services in your area.
- SAMHSA: Call 1-800-662-HELP (4357) to speak with a counselor.
- FindTreatment.gov: Find a provider treating mental illness, addiction, and substance use disorders.



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Suicide & Crisis Lifeline

988 offers 24/7 access to trained crisis counselors who can help people experiencing mental health-related distress. That could include thoughts of suicide, mental health or substance use crisis, or any other kind of emotional distress. People can call or text 988 for themselves or if they are worried about a loved one who may need crisis support.



CALL 988 FOR HELP NOW

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WARNING SIGNS OF SUICIDE:

The behaviors listed below may be some of the signs that someone is thinking about suicide.

TALKING ABOUT:



- ▷ Wanting to die
- ▷ Great guilt or shame
- ▷ Being a burden to others

FEELING:



- ▷ Empty, hopeless, trapped, or having no reason to live
- ▷ Extremely sad, more anxious, agitated, or full of rage
- ▷ Unbearable emotional or physical pain

CHANGING BEHAVIOR, SUCH AS:



- ▷ Making a plan or researching ways to die
- ▷ Withdrawing from friends, saying goodbye, giving away important items, or making a will
- ▷ Taking dangerous risks such as driving extremely fast
- ▷ Displaying extreme mood swings
- ▷ Eating or sleeping more or less
- ▷ Using drugs or alcohol more often

If these warning signs apply to you or someone you know, get help as soon as possible, particularly if the behavior is new or has increased recently.

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Call or text 988
Chat at 988lifeline.org

Crisis Text Line
Text “HELLO” to 741741



National Institute of Mental Health

nimh.nih.gov/suicideprevention

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Action Steps to Help
Someone Having
Thoughts of Suicide

1. ASK

2. BE THERE

3. **HELP KEEP THEM SAFE**

4. HELP THEM CONNECT

5. FOLLOW UP

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Thank you!



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