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Mental Illness & Suicide

Break the Silence & Create a Caring Culture

BY SALLY SPENCER-THOMAS & CAL BEYER





When suicide occurs, coworkers and employers are often left wondering, **“WHY DIDN’T HE (OR SHE) REACH OUT FOR HELP?”**

The devastating truth is that all too often, people who experience mental health conditions – which can lead to suicidal despair – **suffer in silence**. Despite dramatic advances in awareness, prevention, intervention, and treatment, mental health conditions and suicide prevention are still taboo topics of conversation.

Construction industry leaders can change this perception. Mental health promotion and suicide prevention must become priorities within the overall health and safety initiatives of their companies.

When it comes to suicide, **ignorance is not bliss – it is fatal**. It’s time to deal with this health issue head on.



Human & Financial Impacts of Mental Health Conditions & Suicide

“Several years ago, one of our employees showed up to work looking distressed. He spent much of that day giving his tools away to other employees. The employees thought the behavior was odd, but didn’t think much of it...until he didn’t show up to work the next day. By the time we put the pieces together and got to his house, it was too late. He had died by suicide. Knowing the warning signs of suicide and how to intervene would’ve made a difference.”

– Construction employer interviewed for the *Construction Industry Blueprint for Suicide Prevention*.

The human and financial impacts of untreated or mistreated mental health conditions are staggering. According to the National Alliance for Mental Illness (NAMI, www.nami.org), mental illnesses like depression, anxiety, and substance abuse are highly prevalent in the U.S. To put this into perspective, consider that:

- More than 18% of adults are experiencing mental illness in a given year.¹
- Approximately 4.1% experience a serious mental illness that substantially interferes with or limits one or more major life activities, including work performance.²
- Serious mental illness costs the U.S. economy more than \$193 billion in lost earnings each year.³
- Only 41% of adults with a mental health condition received mental health services during the past year.⁴

Although suicide is called a silent killer, research uncovers the harsh realities of the depth and breadth of its impact on families, businesses, and even industries:



COMPANY LEADERS
MUST LEARN
to speak openly and candidly about the
risks of suicide
among their
employees and their families,
and to commit to a
ZERO SUICIDE CULTURE.



- More than 41,000 suicides occur yearly, which is greater than the number of deaths caused by motor vehicle accidents.⁵
- Suicide is the tenth leading cause of death for all ages,⁶ and the second leading cause of death among men aged 25-54.⁷
- The annual economic cost of suicide death in the U.S. is at least \$44 billion.⁸ Since working-age people are the ones most likely to die by suicide, the cost to the economy results almost exclusively from lost wages and work productivity.
- Nonfatal suicide attempts cost an estimated \$2 billion annually in medical care costs and an additional \$4.3 billion for indirect costs, including lost wages and productivity.⁹
- The construction industry is in the top nine occupations at greatest risk for suicide.¹⁰

MANIFESTATIONS OF MENTAL HEALTH ISSUES IN THE WORKPLACE

Like other health problems, mental health conditions usually do not get better without proper treatment. Poorly managed or untreated mental health conditions become apparent in the workplace through:

- Increased tardiness, absenteeism, and presenteeism (showing up to work physically, but not able to function)
- Family and Medical Leave requests due to long-term absences attributable to depression and other mental health illnesses
- Decreased productivity due to distraction and cognitive slowing
- Decreased self-confidence
- Isolation from peers
- Agitation and increased interpersonal conflict among coworkers leading to a potential for workplace violence
- Increased voluntary and involuntary attrition
- Increased feelings of being overwhelmed
- Decreased problem-solving ability

Some of the more hidden manifestations of mental health issues may contribute to the following factors:

- Legal and illicit substance abuse affecting workplace performance
- Quality defects leading to waste and rework impacting profit margins
- Near hits, incidents, and injuries affecting safety and risk performance metrics

CONSTRUCTION INDUSTRY DEMOGRAPHICS & RISK FACTORS INFLUENCING THE PREVALENCE OF SUICIDE

There are many suicide high-risk factors prevalent in construction. For instance, in this male-dominated industry, the stoic, macho “tough guy” culture creates barriers to seeking help and acknowledging emotional problems.

The often physically challenging work makes employees prone to injuries and fatigue, which can cause chronic pain and lead to physical strain, distress, and pain medication addiction. And, there’s potential for post-traumatic stress from psychological injury caused by witnessing traumatic life-threatening events.

In addition, the cyclical nature of work, regular lay-off periods, seasonal furloughs, and uncertainty of rehiring add to the list of risk factors. Some employees frequently travel from project to project across states and cities, leading to separation from their families and significant others.

Sleep disruption from working long hours for weeks at a time, especially during critical project phases, is another important risk factor. And, since alcohol and substance abuse in construction is relatively high compared to other occupational industries, these should also be noted indicators.

The Pivotal Role of CFMs

Why does the impact of mental health and suicide prevention among a contractor’s workforce fall under the concerns and responsibilities of CFMs?

- 1) CFMs set the strategic direction for managing and monitoring costs of employee health benefits and workers’ comp insurance.
- 2) CFMs are able to identify and quantify the hidden costs of lost productivity, quality defects and rework, injuries, and incidents associated with mental health conditions, including legal and illicit substance abuse.
- 3) CFMs have the knowledge and authority to integrate holistic wellness strategies to improve the quality of the workplace by incorporating mental health programs into wellness campaigns.
- 4) CFMs provide the strategic framework with HR, risk management, and/or safety for leadership and supervisory awareness, advocacy, action, and accountability for mental health in the workplace.

As strategic leaders, CFMs can help address mental health awareness and promote suicide prevention in their organizations. Successful leaders will boldly and proactively tackle these tough issues head on.

Know the Risk Factors & Warning Signs

for Suicide

WARNING SIGNS

Supervisors frequently ask if there are “warning signs” or “red flags” to look for when it comes to suicide prevention. According to the CDC in a *2015 Understanding Suicide Fact Sheet*, the following risk factors increase a person’s likelihood of attempting or dying by suicide:

- Previous suicide attempt(s)
- History of depression or other mental illness
- Alcohol or drug abuse
- Family history of suicide or violence
- Physical illness
- Feeling alone

IMMEDIATE RISK

Some behaviors may indicate that a person is at **immediate risk** for suicide. The following three should prompt an immediate call to the [National Suicide Prevention Lifeline](#) or a mental health professional:

- Talking about wanting to die or to kill oneself (Communication may be veiled, such as: “I just can’t take it anymore” or “What’s the use?”)
- 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

SERIOUS RISK

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

From the Suicide Prevention Resource Center, 2014





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WAYS TO ADDRESS MENTAL HEALTH AWARENESS & SUICIDE PREVENTION

CFMs can impact the productivity and profitability of their businesses by improving the mental health of their workforce.

Consider the following steps to help develop a comprehensive and sustained model for addressing mental health awareness and advocacy in your organization.

Assess Company Readiness

Start by assessing your company's readiness to deal with mental health crises and suicide prevention interventions. A good tool is the 12-question interactive quiz by Working Minds at www.workingminds.org/quiz.html; Working Minds is a program of the Carson J Spencer Foundation. It generates a custom report and indicates whether your organization is prepared, moderately prepared, or not equipped to handle mental health crises and post-interventions.

Knowing your company's preparedness will help determine how best to incorporate mental health services into your company's wellness, safety, and employee benefits programs.

Engage Leadership

Changing the way your company views and addresses mental illness starts at the top.

One helpful resource to disseminate among company executives, managers, and supervisors is *A Construction Industry Blueprint: Suicide Prevention in the Workplace* (www.carsonjspencer.org/programs/working-minds/construction-industry-blueprint) to help them build the policies and practices needed to make suicide prevention a health and safety priority.

Also, consider hosting leadership roundtables to discuss how companies can share best practices and learn from one another.

Make Zero Suicide the Objective

Once your leadership understands the need for mental health awareness and suicide prevention, include Zero Suicide with your company's Zero Incident and Zero Injury safety and health programs. Incorporate mental health and suicide prevention into Safety 24/7 programs designed to reinforce personal and family safety at home and at work.

Model of Suicide Prevention Best Practices for the Workplace



Comprehensive Suicide Prevention Program – Adapted from Best Practice Air Force Model and the Jed Foundation. Source: Working Minds

From Your Peers

Heather Gallien, Director of Marketing & Communication, and **Jon Kinning**, COO, both of **RK** in Denver, CO state that the biggest takeaway from their mental health promotions and suicide prevention interventions is “That even in a male-dominated ‘tough guy’ culture like construction, work cultures *can* be shifted. It takes time, but if management is committed to having open conversations that lift the stigma around bringing up personal mental struggles and asking for help, employees do learn to trust that work is a safe environment for them to reach out and ask for help.”

Pat Monea, CCIFP, VP/CFO, and **Matt Bozung**, Human Resources Manager, both of **Granger Construction Company** in Lansing, MI had this to say about integrating mental health awareness and suicide prevention into the company’s wellness and safety programs: It “will be facilitated to an extent with the reimplementation of our new EAP. For our safety program, our Safety Culture Team will begin to address this issue on their end and work to make recommendations on how to best implement training across our sites.”

When **David James**, CCIFP, CFO of **FNF Construction, Inc.** in Tempe, AZ was asked why the blueprint for suicide prevention in the construction industry created a compelling “call for action” personally and for his company, he stated that, “‘Awareness’ is the key to begin change. Upon learning of this study and the blueprint, I connected with a local mental health advocacy group, our HR group, our health care broker, and our wellness TPA to explore ways to target this issue.”

Cal Beyer and **Sally Spencer-Thomas** began working together through The National Action Alliance for Suicide Prevention. Cal has been touched by suicide in his extended family, as a college student, and in February 2015 with the loss of a dear friend who was a longtime CFMA member. This most recent loss refocused Cal on the need for more proactive prevention-based strategies, solutions, and services to help the construction industry address mental health and suicide prevention.

Sally too has been touched by suicide when her younger brother Carson took his life at the age of 34. In the aftermath of his death, their family and his friends founded the Carson J Spencer Foundation to find bold, gap-filling solutions to prevent what happened to Carson from happening to others. Over the past two years, the Working Minds program focus has turned to the construction industry, due in large part to a strategic partnership with RK in Denver, CO.

Educate Employees & Build a Preventative Culture

Continue to integrate mental health awareness into safety and wellness programs. For example, cover mental health and suicide prevention in company newsletters. Discuss topics like how to help a coworker during brown bag lunch meetings and toolbox talks. Recognize World Suicide Prevention Day (September 10) with a workforce stand down on psychological safety.

Be sure to post *National Suicide Prevention Lifeline* contact information (shown below) on bulletin boards, in locker rooms, and other public places. In addition, incorporate these resources into the employee handbook and regularly include the information in the company newsletter.

Develop human capital risk management procedures that strengthen mental health awareness and promote suicide prevention throughout the hiring and onboarding processes. (See “Leveraging Human Capital Risk Management” in the May/June 2015 issue for more on the positive impacts of investing in employees.) Also, incorporate protective factors into the company culture by:

- Increasing the focus on personal safety in addition to workplace safety
- Expanding collaboration and teamwork
- Creating engagement strategies to connect employees to the company’s mission
- Strengthening “buddy systems” by formalizing a trained and supervised peer support program (See the MATES in Construction sidebar on the last page)
- Improving access to insurance and mental health care
- Providing visible and vocal leadership¹¹

Train Supervisors

Offer ongoing skill-enhancement training to supervisors on such topics as how to identify risk factors and warning signs for suicide as shown a few pages back, or how to have conversations that help link employees in distress to life-saving care. The sample toolbox talk in *A Construction Industry Blueprint: Suicide Prevention in the Workplace* teaches how to practice conducting a safety conversation based on a supervisory intervention to defuse a possible mental health crisis.



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Improve Awareness of & Access to Mental Health Care

Too often construction employees are underinsured or unaware of their mental health benefits. Creating a strong alliance with local mental health resources and your Employee Assistance Program (EAP) can increase the number of people who seek help.

In addition to these strategies, take a look at the Suicide Prevention Toolkit at www.workingminds.org/toolkit.html, created by Working Minds. It contains sections on education, training, target marketing and social media campaigns, life skills focused on social integration, screening, mental health services, crisis intervention, and means restriction. Also, take a look at the suicide prevention model on the previous page.

Conclusion

Mental health issues and suicidal behavior are growing business challenges. With rising rates of suicide among working-age adults and the demographic risk factors prevalent in the construction industry, now is the time for CFMs to institute suicide awareness, prevention, and intervention measures in their organizations.

Company leaders must learn to speak openly and candidly about the risks of suicide among their employees and their families, and to commit to a Zero Suicide culture.

The same employer quoted at the beginning of this article shared the following success story after his workplace received extensive education and training on suicide prevention: "One employee reached out to me and told me his medication wasn't working. He told me he was having suicidal thoughts.

"I took an active role to help liaison a connection between him and our EAP. I saw him last week at the company picnic. He was there with his two young kids and wife and doing much better. That makes a difference." ■

SALLY SPENCER-THOMAS is the CEO and Co-Founder of the Carson J Spencer Foundation in Denver, CO – an award-winning organization leading innovation in suicide prevention and the umbrella organization of the Working Minds Program.

She is the Co-Lead of the Workplace Task Force with the National Action Alliance for Suicide Prevention and Co-Chair of the Workplace Special Interest Group of the International Association for Suicide Prevention.

Dr. Spencer-Thomas has received wide recognition for her work and has been an invited guest to the White House Briefing on Mental Health and Suicide Prevention in Washington, D.C. and to the World Health Organization's World Suicide Report Launch in Geneva.

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Cal is a longtime active CFMA member at the national and local levels. He co-developed CFMA's Emergency Management Planning CPE course, speaks regularly at CFMA's Annual Conference & Exhibition, frequently presents at CFMA regional conferences, and is an established author for *CFMA Building Profits*. Cal is a member of the Puget Sound chapter.

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Turn the PAGE for MORE  HELPFUL RESOURCES



HELPFUL RESOURCES

1. **A Construction Industry Blueprint: Suicide Prevention in the Workplace:** www.carsonjspencer.org/programs/working-minds/construction-industry-blueprint.
2. **American Foundation for Suicide Prevention:** www.afsp.org.
3. **Carson J Spencer Foundation:** www.carsonjspencer.org.
4. **Depression Bipolar Support Alliance:** www.dbsalliance.org.
5. **Help Yourself. Help Others. (Screening for Mental Health, Inc.):** www.helpyourselfhelpothers.org.
6. **International Association for Suicide Prevention (IASP) World Suicide Prevention Day:** www.iasp.info/wspd.
7. **MATES in Construction. Australian Building and Construction Industry:** www.matesinconstruction.org.au.
8. **National Action Alliance for Suicide Prevention:** actionallianceforsuicideprevention.org.
9. **National Alliance on Mental Illness:** www.nami.org.
10. **National Suicide Prevention Lifeline:** www.suicidepreventionlifeline.org.
11. **National Council for Behavioral Health:** www.thenationalcouncil.org.
12. **Working Minds Suicide Prevention Toolkit:** www.workingminds.org/toolkit.html.



Suicide Prevention Model in Australia: **MATES in Construction**

The phenomenon of suicide is emerging as a significant global problem within the construction industry. Construction industry representatives from organized labor, mental health practitioners, and employers in various countries are addressing suicide prevention, including Australia, where the MATES in Construction began in 2008. Other countries recognizing the crisis and the need for an organized construction industry response include Canada, Ireland, and the United Kingdom.

MATES in Construction is under the auspices of the Australian Building and Construction Industry.¹² According to www.matesinconstruction.org.au, the program is built on the foundation that “suicide is everyone’s business” and that improving the mental health of industry workers cannot be relegated to mental health professionals alone. MATES in Construction is designed to provide resources to increase awareness, tools for prevention, and skills for intervention for mental health and suicide among construction workers.

Endnotes

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5. www.cdc.gov/violenceprevention/pub/suicide_factsheet.html.
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11. www.carsonjspencer.org/programs/working-minds/construction-industry-blueprint.
12. www.matesinconstruction.org.au.
13. www.matesinconstruction.org.au/flux-content/mic-2013/pdf/MIC-Report-October-2014.pdf.

MATES has advanced the cause of better aligning mental health awareness into safety, health, and wellness programs. Moreover, MATES established an accreditation process with certificates and signage for construction projects that have demonstrated the site is safe once all workers have received the aforementioned training and on-site mental health support is available. This year, more than 250 Australian construction companies and project sites were registered for the 2015 World Suicide Prevention Day on September 10.

Not only is MATES leading the world in construction psychological safety, it is also saving money for companies and the country of Australia. MATES was recently evaluated by health economists at the Hunter Medical Research Institute in the first-ever workplace return on investment study. In the state of New South Wales alone, suicide within the construction industry cost the community more than \$500 million per year. MATES was found to have a cost benefit ratio of 4.6 to one.¹³