

Mental health in construction

Depression and high suicide rates occur throughout the construction industry globally, including in New Zealand. BRANZ is investigating ways to change this here, initially by understanding more.

BY ANNE DUNCAN, BRANZ INDUSTRY PERFORMANCE AND SOCIAL RESEARCH TEAM LEADER, AND
KATE BRYSON, CONSULTANT SENIOR RESEARCHER

BRANZ IS currently undertaking a scoping study to investigate the value of further research in the area of mental health in the New Zealand construction industry.

Our key research question is, 'Would knowing more enable BRANZ to support the right actions in industry to reduce the currently very high suicide rate in construction and the cost to families as well?'

Mental health, suicide and the industry

Mental health problems such as depression and anxiety can lead to suicide. The construction industry has the highest suicide rate of all industries in New Zealand, comprising 6.9% of working-age male suicides. Depression and anxiety are also likely to be higher than the average in this group.

We need to do something to change this, but what? The first step is to understand more. The second is to look for interventions that work.

In Australia,
construction workers
are more than twice as
likely to suicide than
other Australians and
are six times more likely
to die by suicide than in
a workplace accident.

High rates of mental illness overseas

There has been considerable work done overseas that provides evidence of high levels of mental health issues and suicide in the industry.

In the US

A 2012 study released by the Centers for Disease Control and Prevention in the US

identified the construction industry as having the highest number of deaths due to suicide among all major industries. The rate for construction was four times higher than in the general US population.

In the UK

In Britain, according to the medical journal *The Lancet*, 1,419 people working in skilled construction and building trades took their lives between 2011 and 2015. Over the same period, rates of suicide among low-skilled workers in the construction industry were 3-7 times higher than the national average.

Work-related stress, anxiety and depression are thought to cost the UK construction industry some 400,000 work days every year.

In Australia

In Australia, construction workers are more than twice as likely to suicide than other Australians and are six times more likely to die by suicide than in a workplace accident. According to recent research, 21% of workers in the Australian construction



industry have had a mental health condition, and 9% have a condition affecting their mood, such as depression.

What's happening in New Zealand?

Initial work at BRANZ involved talking with 19 industry and mental health experts. Although this was a small group, it included people from WorkSafe and construction industry leaders, most with many years' experience.

Interviewees were asked about their impressions of mental health in the construction workforce, what they thought might explain the high suicide rate and whether they believed further research was necessary.

Why such high rates of suicide and mental illness?

The majority of interviewees were able to identify several possible explanations for the high suicide rate and underlying high rates of mental illness. These included:

- the culture of the industry is male-dominated with macho expectations
- the industry may attract high-risk individuals
- the industry is high stress and high pressure, especially during boom phases
- the long hours lead to fatigue and stress on family relationships
- inter-generational differences, especially around communication and career expectations, causing stress.

Widespread negative impacts

Interviewees described varying impacts of poor mental health on the construction industry as a whole. These included low

productivity, absenteeism, presenteeism (being on site, but not being mentally engaged in work) and reduced quality of work.

Importantly, poor mental health was often described as having negative impacts on health and safety on site, leading to accidents and near misses. Drug and alcohol abuse was also frequently mentioned as contributing to the issue of poor mental health in the industry.

Support for further research

Further research that could help shape intervention and prevention work to address these issues was unanimously supported. Many interviewees felt the scale of the problem was not well understood.

There was a desire to understand the demographics behind the suicide statistics in particular. Knowing where the highest risk currently exists means interventions can be targeted to those who need it most.

There was general consensus that more work to understand poor mental health and its consequences should be in partnership with the industry. Many suggested BRANZ was in a good position to partner with industry to undertake research.

Interventions that work

Australia, the UK and the US have conducted research and implemented initiatives to reduce suicide and mental health issues as a fundamental part of health and safety.

Australia runs the charity MATES in Construction, a suicide prevention programme that includes a national helpline.

It is owned by the industry, and its approach is to both train and support. Nearly 140,000 people have been trained using the approach outlined on its website. This reads:

'The MATES program is an integrated program of training and support - one without the other is insufficient. To only do training without pathways to support is potentially dangerous and to only do support without raising awareness is to simply be another Employee Assistance program. The MATES program uses training as a tool to raise awareness that there is a problem with suicide and its contributing risk factors in our industry and we can all be part of the solution. The support is then provided through clear pathways to help, case management processes that ensure that workers in need of support are connected to appropriate help, and on site visits by field officers to support the site and its workers in an ongoing presence until the site closes.'

The economic impacts of this programme were evaluated and the findings published in 2015. The attributed prevention of suicide in New South Wales was estimated at a return of \$A4.6 for every dollar invested. This is based on potential suicides, using past patterns, that did not occur and attributing these to the uptake of MATES in workplaces.

Next steps may include MATES here

The MATES in Construction programme is currently being considered by WorkSafe for introduction in New Zealand. BRANZ research can provide evidence to support their decision making.

As always, good evidence that can be trusted will guide solutions. BRANZ hopes to support work that makes a difference to those working in our sector.

Need help?

If you or anyone you know needs help, contact the Suicide Crisis Helpline on 0508 828 865 or dial 111. ◀

For more ▶ Get more information on MIC from matesinconstruction.org.au. The BRANZ study report will be available at www.branz.co.nz.