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Case Study : Current Suicide Prevention Initiatives in Construction

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Abstract

Suicide prevention and mental health awareness and prevention are not new to the construction industry. In 1958 Los Angeles, California had the first suicide prevention center and in 1966 the National Institute of Mental Health established the Center for Studies of Suicide Prevention (National Library of Medicine, 2012). Subject matter experts such as Cal Beyer and Dr. Sally Spencer Thomas have been paving the way for this conversation since the 1990s. Their work, as well as the work of others, has been disseminated worldwide throughout the construction industry and helped organizations implement programs geared toward reducing the suicide rate.

This article will review what some of the industry leaders in this realm are doing in their organizations. Interviews were conducted with the individuals we discussed what they had seen, what has been done, and other insights on the topic.

1. Introduction

The following interviews were conducted as conversations, and I allowed participants to discuss the things they felt were relevant to the conversation. I followed each conversation by asking for consent to summarize and share these summaries in this work. While suicide prevention and mental health awareness efforts have been implemented in the construction industry for many years, these interviewees are considered industry leaders. Their thoughts and views depict the best practices when it comes to effective suicide prevention and mental health initiatives. The goal of these interviews is to gather some common themes and advice from these professionals to use as guidance for organizations in the infant stages of program implementation.

2. Hypothesis

The conversations with the industry leaders will identify common theme(s) for perceived program success.

3. Interviews

Jerry Shupe - Hensel Phelps – June 2022

In the first phase of this (mental health and suicide prevention) initiative, which started in 2017, the company worked with Dr. Sally Spencer-Thomas. They (Hensel Phelps) knew they needed to do something for suicide prevention and mental health, so they turned to Dr. Spencer-Thomas with the question “What do we do?”. They conducted awareness-based training with the safety team. Executives and others gained interest as they were walking by the training and started to join. Through this first phase, Shupe and the safety team noted that the financial cost of the initiatives was a non-issue. From the initial training, they found that 92-94% of their participants had been affected by suicide in their lives.

The second phase of the training included suicide prevention training. They conducted this during September which is suicide prevention month. In addition to the suicide prevention training, Hensel Phelps also offered resiliency training. During this phase, the safety team went to leadership to discuss the effects of the pandemic on employees. After that conversation, and conversations with employees, they opened training to everyone.

In 2021 Hensel Phelps suffered an internal loss to suicide. The CEO pulled Shupe aside and acknowledged all that he was doing for mental health and suicide prevention but stated that more needed to be done. At this point Hensel Phelps made this training required for managers. This required training consists of two trainings which take about 3 hours to complete. The two training courses were Construction Working Minds and Role as a Manager in Mental Health. In 2021 the team trained 43 groups totaling 1200 managers. Advanced skills for Managers training is required for all managers. There are also optional awareness courses for everyone.

Jon Kinning - RK Industries – June 2022

After an internal loss to suicide, RK Industries reached out to Dr. Sally Spencer-Thomas and other industry leaders to help in starting their own mental health awareness and suicide prevention initiative. To begin, employees at the executive level took charge and were the driving force behind the implementation. Jon Kinning stated that they have not done any type of return-on-investment research on the program and noted that the financial gain or loss was not a motivator. Instead, doing what is “right” for the employees of RK Industries took precedence. Kinning mentioned that he believes the ROI could be close to 4:1. Four dollars were made to every dollar spent on suicide prevention and mental health awareness. Kinning stated that if leadership does not back the initiative, it is unlikely to work. If the leaders aren’t talking about it, people aren’t paying attention. Stigma was mentioned as being a barrier to acceptance. Some of the actions taken by RK Industries is VitalCog training offered to

employees and the opportunity to meet with a wellness coach twice a year. The VitalCog training is required for all safety and HR positions and is optional for everyone else. Employees who do meet with the wellness coach save one hundred dollars per year on their insurance. RK also offers other resources including but not limited to 24-hour support for employees.

Kinning said that through the implementation of these programs, RK Industries has not only changed the conversation around suicide and mental health, but they have averted over twenty suicides since 2013. This can be attributed to the awareness training, conversation on the topic, resource alignment, and a weekly newsletter on mental health that is sent to all employees.

Mathew Mishkind – Johnson Depression Center– June 2022

In the conversation with Mathew Mishkind, he mentioned that money, in his experience, is not a motivator when it comes to implementing mental health and suicide prevention efforts. In our discussion, Mishkind mentioned that he believed there is a benefit in examining the upfront cost of program implementation vs. the long-run cost savings.

Mathew proposed a statement “Do your benefits match what you are trying to do?”. This means that organizations need to examine their current benefit offerings to determine if they meet the needs of their organization.

Mishkind expressed that based on his experience, employees are not using the offered EAPs because companies do not fully explain the benefits or how to use them. Also, organizations do a poor job of defining self-care and stress management.

The most commonly seen training that he has experience with is Working Minds, now known as VitalCog. general workplace and construction-specific training.

Mishkind feels that something to avoid is implementing programs that just “check a box”. Meaning if organizations want to take this on it takes commitment from leadership. It was also noted that If organizations need a “sales pitch” Dr. Sally Spencer Thomas does a great job of this. Based on the research this is just a very small part of what Dr. Spencer Thomas has to offer on this subject.

Rory Mele – BHI Construction – October 2023

“BHI's core purpose (in its mental health and suicide prevention efforts) is to bless the lives of our employees and their families as we build rewarding career and job opportunities. Focusing attention on mental and emotional wellness is critical in supporting those who put in their time and effort into helping BHI achieve its goals.”

At BHI, the company started by implementing wellness topics in weekly safety meetings. These include toolbox talks that cover mental health in construction, suicide prevention, drug and alcohol awareness, and wellness. BHI also includes information for local support groups such as Alcoholics Anonymous and Narcotics Anonymous, local counseling information, and support hotlines into the EHS (employee health and safety) plans for each project they do.

Mele became a VitalCog instructor and has taught suicide prevention to around one hundred and forty employees ranging from foremen to CEO levels. BHI reviewed and upgraded their insurance policies to better support their employees.

To further expand awareness, Mele has spoken about mental health and suicide prevention on several podcasts. Mele is also the co-founder of SPRUCE (suicide prevention resources for Utah construction employers) which allows him to not only address issues within BHI but also help other organizations with similar goals.

Dr. Sally Spencer-Thomas -June 2022

Dr. Sally Spencer-Thomas is an industry leader when it comes to suicide prevention in construction. It is important to note that Dr. Spencer-Thomas has made a significant impact on mental health and suicide prevention in the construction industry. She is the “go-to” on this subject. The time spent talking with Dr. Spencer-Thomas made it evident that the summary of this conversation would do little justice to the breadth and impact she has made.

Dr. Spencer-Thomas worked to create the working minds training now known as VitalCog. Dr. Spencer-Thomas is asked by many organizations to help with their mental health and suicide prevention efforts.

Dr. Spencer-Thomas emphasized that nothing happens without action. Organizations must put in the effort and take action to improve mental health and prevent suicides in the construction industry.

Dr. Spencer-Thomas stated that employers can be disconnected from the workforce, so it is vital for them to be involved in these initiatives. It is important to raise awareness and provide resources to employees. Every day, mental health providers are not prepared or aware of the construction industry and it would be beneficial to have construction-specific therapists. It was also stated that it could be beneficial for employers to measure data via surveys, employment engagement, and other tools to see the effectiveness of programs and address areas that need improvement.

Cal Beyer – Holmes Murphy – August 2022

Like Dr. Spencer-Thomas, the impact and effort towards suicide prevention and employee wellness by Cal Beyer, can not be fully expressed by this short summary. There is no question that Beyer has improved organizations and saved lives.

Beyer stated that it is important to take a holistic approach when looking at construction employees. Often times workers can become distracted, and experience stress, financial issues, relationship issues, and substance use issues. This level of distraction can lead to negative results in safety, production, and or quality in the construction industry. Beyer states that if an organization treats its people well, they will be a better asset to the organization. Suicide prevention and mental health should be incorporated into worker safety. If an organization

focuses efforts on improving the well-being of its employees, every other aspect will also improve. Since construction employees are more likely to reach out to their peers when facing a challenge, it is important to educate all levels (including the field levels) on tools and resources for mental health and suicide prevention.

4. Analysis

Shared themes among these professionals are leadership support, there is moral obligation for organizations to spread awareness, and spread awareness through training. All of the professionals hinted at this being the responsible and right thing to do for the employees and Cal Beyer expanded on this by stating that it will also improve all other aspects of the construction company. Many of the interviewees mentioned that support from leadership is vital to the success of these programs. By promoting suicide prevention and mental health awareness, employees are empowered and better prepared to handle mental challenges and crises. The final shared idea was to start with awareness training, many of the organizations chose the VitalCog Suicide Prevention in Construction training.

5. Conclusion

The hypothesis that the conversations with the industry leaders will identify the common theme(s) for perceived program success was valid. Among the interviewed population, common trends and themes did exist. Viewed as the industry leaders on this subject, the results are relevant to the body of knowledge. For any organization beginning the implementation of these programs should refer to the guidance of these organizations. Further research is needed to determine if the interconnected community influences these thoughts and beliefs. Also, further research needs to be conducted on the importance of assessing the needs of an organization (prior to program implementation) and what is being used, if anything, for said assessment.

References

1. National Library of Medicine. (2012). Brief history of suicide prevention in the United States. <https://www.ncbi.nlm.nih.gov/books/NBK109918/>