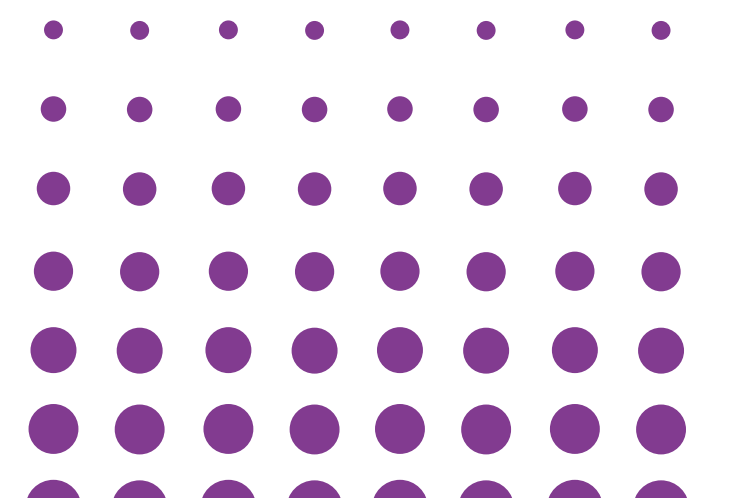
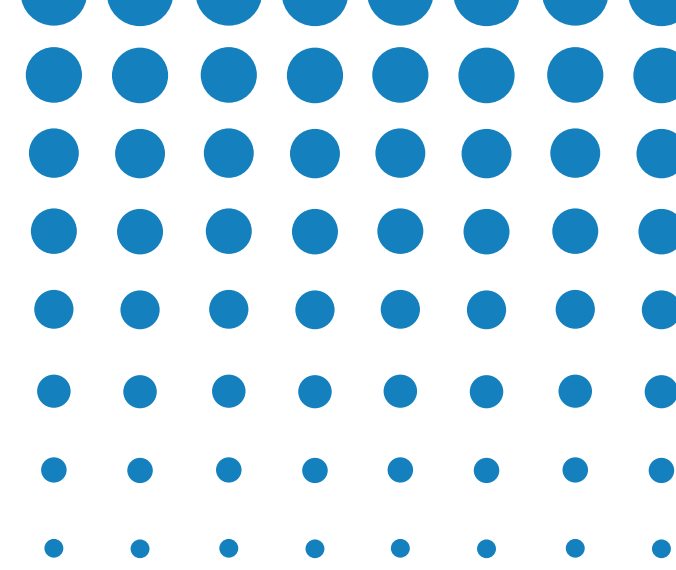


# 2024 FALL CONVENTION

DENVER, COLORADO | OCTOBER 22-25, 2024



[www.icri.org](http://www.icri.org)



## Cal Beyer, CWP

- Over 30 years professional experience in risk management, safety & wellness focusing on human capital risk management and wellbeing
- Helped launch mental health & suicide prevention movement in the AEC industry
- Appointed to the Executive Committee of National Action Alliance for Suicide Prevention & Lived Experience Advisory Committee of the Suicide Prevention Resource Center (SPRC)
- Serves on Advisory Boards for Goldfinch Health and MindWise Innovations
- Formerly served on Advisory Boards for the Center of Workplace Mental Health, AGC of America & Youturn Health
- Frequent presenter at industry events & regular contributor to industry publications



Cal Beyer  
Sr. Director of SAFE Workplaces

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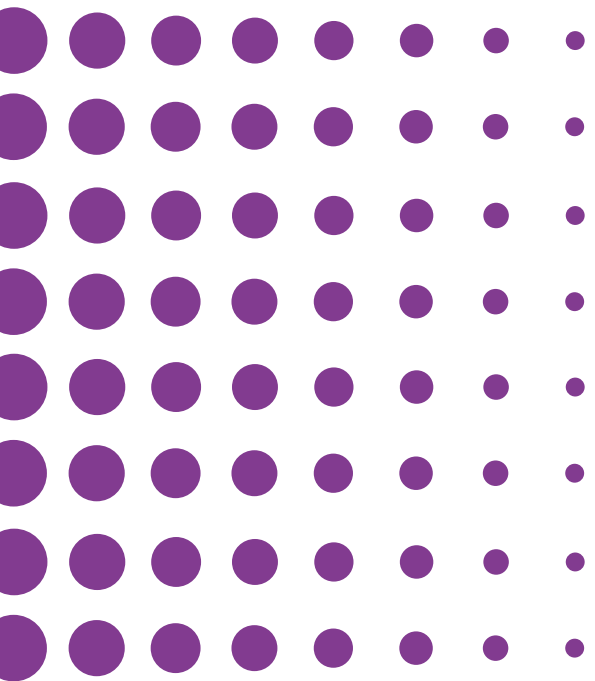
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OCTOBER 22-25 2024



# Learning Objectives



1. Illustrate why mental health suicide prevention are workplace safety and health issues
2. Demonstrate how to break the stigma of mental health and suicide
3. Identify the risk factors that lead to suicide
4. Learn about 988, Crisis Text Line hotlines and LEARN Saves Lives



## *Live Content Slide*

*When playing as a slideshow, this slide will display live content*

**Poll: Which of the following choices is NOT correct:  
The rate of suicide risk in the construction industry  
is:**



# SAFEProject

Stop the Addiction Fatality Epidemic

*Our mission is to contribute in a tangible way to overcoming the addiction epidemic in the United States.*

**SAFE  
Campuses**

**SAFE  
Communities**

**SAFE  
Workplaces**

**SAFE  
Veterans**



**PUBLIC  
AWARENESS**



**FULL SPECTRUM  
PREVENTION**



**PRESCRIPTIONS &  
MEDICAL RESPONSE**



**LAW ENFORCEMENT &  
CRIMINAL JUSTICE**



**TREATMENT  
& RECOVERY**



**FAMILY OUTREACH  
& SUPPORT**

We asked our Executive Committee what they would encourage people to do to promote hope and help seeking.

**"I continue to pursue prevention, harm reduction, and recovery strategies at the intersection of substance use and suicide as outlined in the *2024 National Strategy for Suicide Prevention*."**

— Cal Beyer, MPA

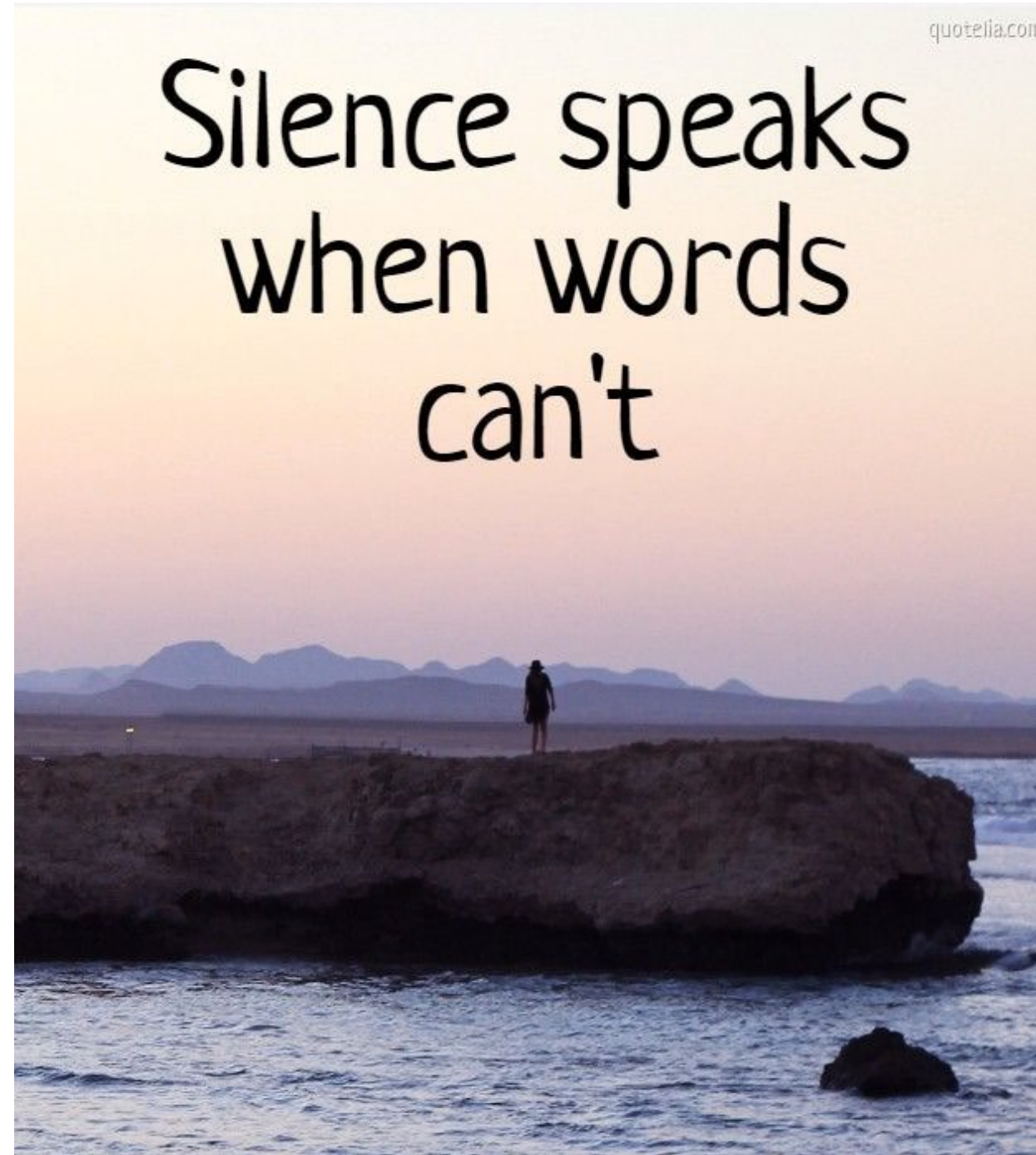
Sr. Director, SAFE Workplaces for SAFE Project



For more from the Action Alliance EXCOM, visit [theactionalliance.org/bethere/excom](https://theactionalliance.org/bethere/excom).



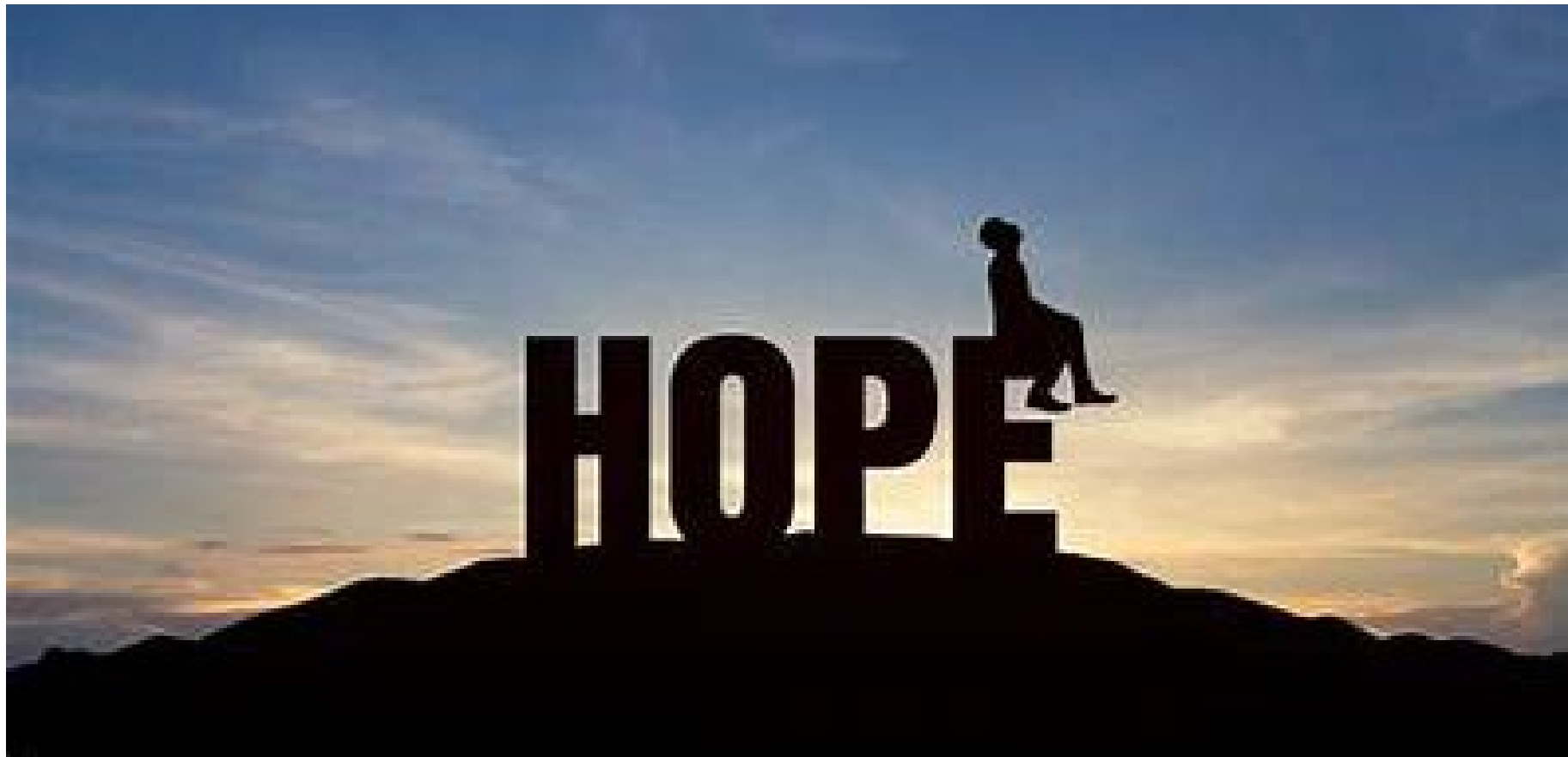
# Moment of Silence



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OCTOBER 22-25 2024







ESSENCE  
OF  
HOPE

Ray Stenglein  
AFSP of MN Volunteer

*A human can live:*

*4 weeks without food....*

*4 days without water....*

*4 minutes without air....*

*BUT only 4 seconds without hope....*

# Personal Cause = Professional Mission

*Jeff (aka “Big Dawg”)*

- *“Make Your voice a little louder...”*
- *Really* understood emotional masks
- Declared war on suicide



# Construction Risk Factors

Industry Culture	Company/Job Factors	Worker Lifestyle
<ul style="list-style-type: none"> <li>✓ Stoic, tough guy/gal</li> <li>✓ Undesirable image</li> <li>✓ Cyclical industry</li> <li>✓ Tolerant of alcohol and substance use</li> <li>✓ 2<sup>nd</sup> highest industry for “heavy drinking (&gt;16% of workers)</li> <li>✓ Drug use increased 13.2% (2015-2018)</li> <li>✓ Accelerated schedules</li> <li>✓ Harsh conditions</li> <li>✓ Family separation &amp; isolation</li> <li>✓ Layoffs/project furloughs</li> </ul>	<ul style="list-style-type: none"> <li>✓ Limited supervisory skills training</li> <li>✓ No time off in season</li> <li>✓ Weather and sequence delays</li> <li>✓ Night work or OT</li> <li>✓ Commuting</li> <li>✓ Out of town or out of state travel for work</li> <li>✓ Humiliation of bad job (daily scorecard)</li> </ul>	<ul style="list-style-type: none"> <li>✓ Self-pressure and perfectionism</li> <li>✓ Financial pressures</li> <li>✓ Chronic pain from soft tissue injuries</li> <li>✓ Construction had highest rate of prescription opioids</li> <li>✓ Access to lethal means at home</li> <li>✓ Skills gap and feeling trapped</li> <li>✓ Fearless or risk-taking behaviors</li> </ul>

# Behavioral Health Data Points: Extraction & Construction Industries

1

## Anxiety & Depression

14.3% & 5.7% based on symptoms and prescriptions (CPWR, 2021)

02

## Binge/Heavy Drinking

2<sup>nd</sup> highest rate at 16.5% (SAMHSA, 2015) and 24.2% in the past 24 months (CPWR)

03

## Substance Use Disorders (SUD)

19% vs. 8.5% for all industries (NSC; 2020)

04

## Musculoskeletal Disorders

34.1% workers with at least 1 MSD; multiple increases risk of opioids (CPWR; 2021)

05

## Suicide Rate

*Extraction:* 72 per 100k  
*Construction:* 56 per 100k males & 10.4 for females (CDC; 2023)

06

## Drug Overdose Rate for 2020

*Extraction & Construction:* 162.6 per 100k  
*Construction:* 130.9  
*Mining:* 60.9 (CDC; 2023)

## How Common Are Mental Health Conditions?



**1 in 5 adults** in the US experiences a mental health condition

More **common** than cancer, diabetes, or heart disease.

**Only 44%** seek help

**11-year delay** from onset of symptoms to diagnosis and starting treatment

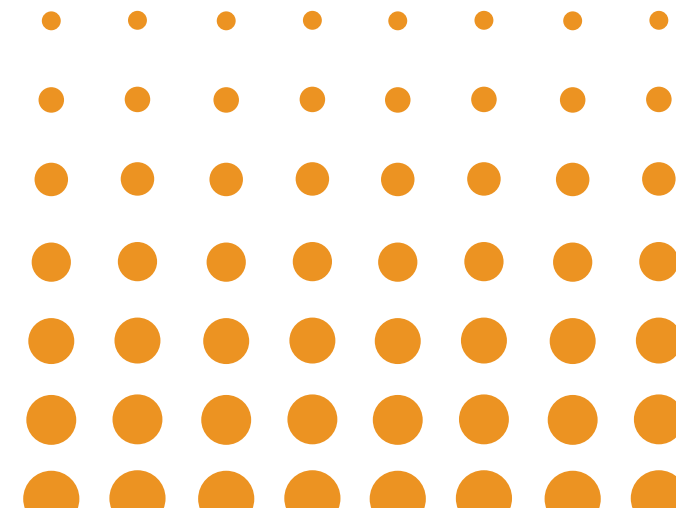


# Presenteeism

*The practice of coming to work despite illness, injury, anxiety, impairment, and any other distractions that results in reduced productivity -- or worse*



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# Health Conditions & Comorbidities



- Health Impacts of stress
- Physical pain, persistent headaches or GI issues
- Sleep deprivation and fatigue
- Vulnerability to Illnesses
- Heart disease
- High blood pressure
- Type 2 Diabetes

Mental health frequently co-occurs with chronic health conditions and substance use disorders





# Breaking Down the Wall of Stigma

suicide

substance  
misuse

depression

addiction

grief

rejection

overdose

loneliness

Chronic  
pain

anxiety

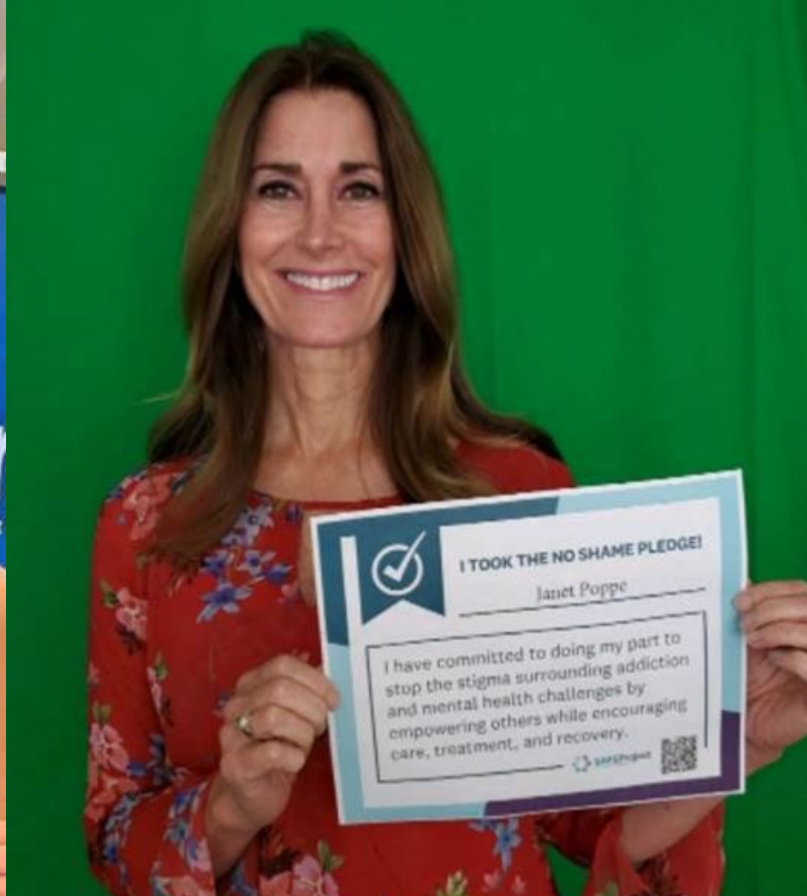
fatigue

shame





FullCircle Program  
Forsyth County, GA



# WE ARE NO SHAME

“ I joined the No Shame Movement because substance use disorder is a disease, not a moral failure, and those struggling with it, like those with any other disease, should be supported and cared for, not stigmatized.

**Chris Perry**  
Executive Director,  
Jamie Daniels Foundation



**JOIN THE MOVEMENT**



#NoShame  
#MentalHealthAwareness



# Join the No Shame Movement



Send yourself a signed No Shame Pledge Form to your email!

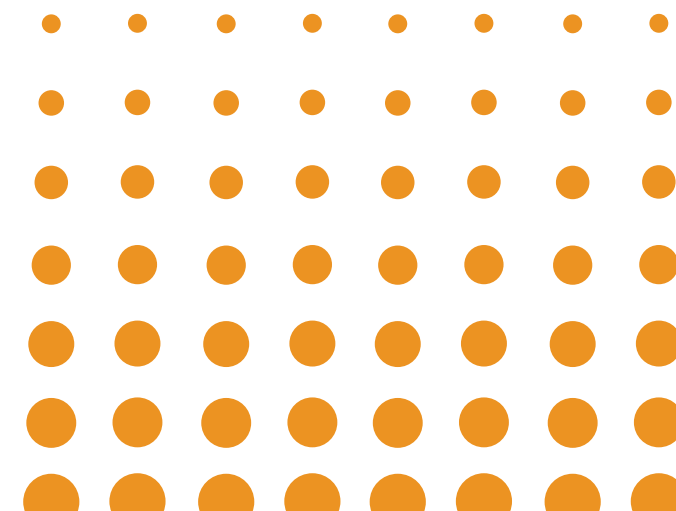
Post a Selfie!



# Opening the Door to Conversations



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## SEIZE THE AWKWARD

**“Seems like you haven’t been yourself lately. What’s up?”**

**“I know you’re going through some stuff; I’m here for you.”**

**“I haven’t heard you laugh in a while. Is everything OK?”**

**“Are you OK? You don’t seem like yourself lately.”**

**“No matter what you’re going through, I’ve got your back.”**

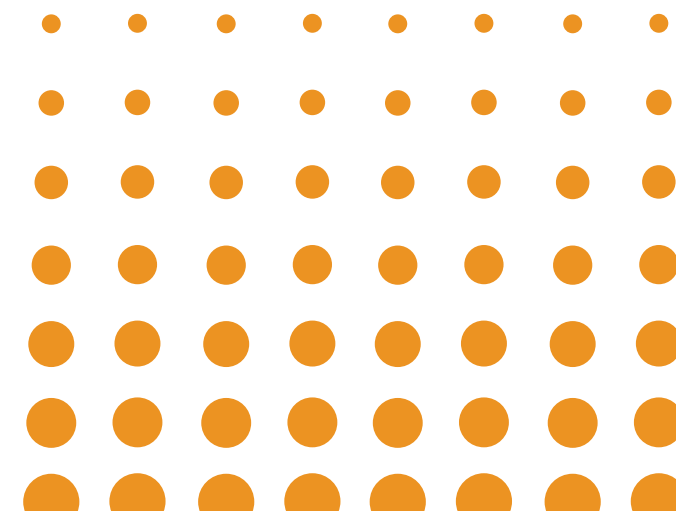
**“This is awkward, but I’d like to know if you’re really all right.”**



# When and How to Talk to Someone About Mental Health Support and Services



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# Crisis Hotlines



**Text HELP or  
CONNECT to:  
741-741**

For Spanish, press 2

LGBTQ+ Youth, press 3

# Learn Suicide Warning Signs

## Suicide Warning Signs

These signs may mean someone is at risk for suicide. Risk is greater if a behavior is new or has increased and if it seems related to a painful event, loss, or change.

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

**Suicide Is Preventable.**

**Call the Lifeline at 1-800-273-TALK (8255).**

**With Help Comes Hope**



# LEARN® Saves Lives Method



**Look** For Warning Signs

**Empathize** and Listen

**Ask** Directly About Suicide

**Remove** Dangers

**Next** Level of Care: Seek Resources

Source: Forefront Suicide Prevention  
(U of Washington School of Social Work)

[www.icri.org](http://www.icri.org)

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# Safety Conversations About Suicide

## LEARN® SAVES LIVES Suicide Prevention Tips

### LOOK FOR SIGNS

### EMPATHIZE & LISTEN

### ASK DIRECTLY ABOUT SUICIDE

### REMOVE THE DANGERS

### NEXT STEPS



## Help Prevent Suicide - LEARN® SAVES LIVES

Most people can relate to a time when they felt alone. We may have just needed a reminder. *I see you. I care.* To help those in crisis and considering suicide, we recommend using LEARN®. We need everyone to play a role in suicide prevention. Most suicides are preventable. Together, we can save lives. **To learn more, go to [www.intheforefront.org](http://www.intheforefront.org).**

### LOOK FOR SIGNS

- Talking, joking or researching ways to die.
- Feeling hopeless, depressed, trapped, burdensome, anxious, ashamed, or humiliated.
- Changes in personality, academic/work performance, sleep, withdrawing from friends/activities.
- Increasing use of alcohol/drugs, reckless behavior, self-harm/cutting, giving away possessions.

### EMPATHIZE AND LISTEN

- People who have survived suicide attempts report what was most helpful to them—**just listen.**
- Listen with compassion, remain calm, avoid judgement and validate their feelings.
- Don't offer quick fixes, tell them everything will be OK, show anger, panic, or ask "why" questions.
- Let them know that you care about them.

### ASK ABOUT SUICIDE

- Ask in a way that invites an honest response. Use any signs you've noticed as part of "the ask."
- Be direct. Use the word "suicide" and be prepared to hear a "yes."
- Asking about suicide will NOT put the idea in someone's head.  
*"Sometimes when people feel hopeless they are thinking about suicide. Are you thinking about suicide?"*

### REMOVE THE DANGER

- If they say yes, ask them *"Do you have a plan?"* *"Do you have access to those means?"*
- Putting time and distance between a person at risk for suicide and lethal means can save lives.
- Remove or limit access to firearms, medications, belts, ropes, knives, alcohol and chemicals.
- Report concerning posts on social media.

### NEXT STEPS

- Ideally with the person at risk, call the National Suicide Prevention Lifeline (see number below).
- If the person will not agree to stay safe, do not leave them alone. **CALL 911.**

## Wallet Cards & Stickers

- Educates, equips and empowers others to “share the care”
- Pocket Packets for worksite distribution:
  - Personal
  - Professional
  - Portable

<https://constructionexec.com/article/using-wallet-cards-to-weave-mental-health-and-suicide-prevention-into-safety-247-conversations>



## Role-Playing Scenarios

- Teach employees how to make referrals for co-workers and family members to EAPs and Hotlines
- Near immediate impact
  - Employees helping co-workers
  - Families helping other families
  - Resources shared with business partners

<https://constructionexec.com/article/use-role-playing-to-teach-peer-support-for-mental-health-and-wellbeing>





# Construction Industry Alliance for Suicide Prevention

[www.preventconstructionsuicide.com](http://www.preventconstructionsuicide.com)

www.icri.org

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# CIASP Resources



- Articles and whitepapers
- Downloadable poster art – English & Spanish
- Toolbox Talks
- STAND-Up Pledge Forms
- Integration Checklist of how to incorporate into safety, health and wellness
- Living Works Training (60-minute module)
- Anonymous Screening Tools by MindWise Innovation

[www.icri.org](http://www.icri.org)

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# Key Takeaways



Top-down leadership support for mental health and wellbeing

Caring, respectful & inclusive workplace culture

Visible-Vocal-Vulnerable leadership to model *“it’s ok to not be ok”* and that help is available

Evaluate services available through Employee Assistance Program (EAP) & Health Benefits Program

Provide all managers and first-line supervisors with training on mental health and wellbeing

Discuss mental health support with employee benefits & risk management advisors

Connect with local resources (AFSP, NAMI, and social service nonprofits and governmental agencies)



## Contact Information

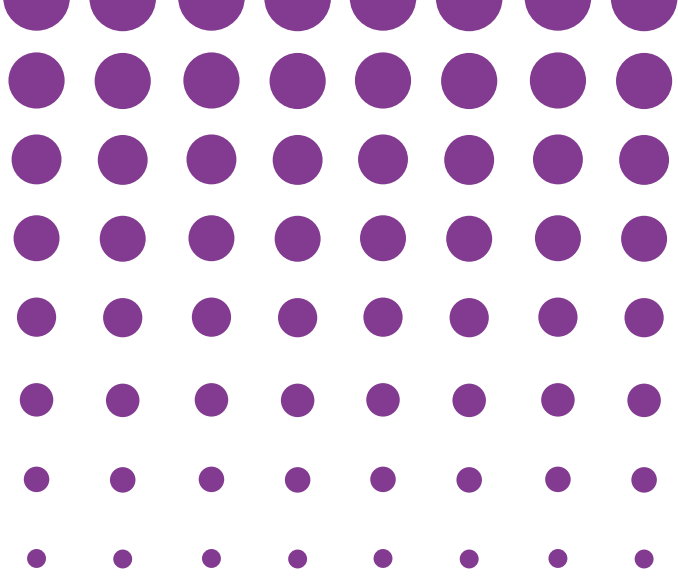
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SAFE Project

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Cell: 651/307-7883

[www.safeproject.us](http://www.safeproject.us)





THANK YOU  
FOR YOUR ATTENTION

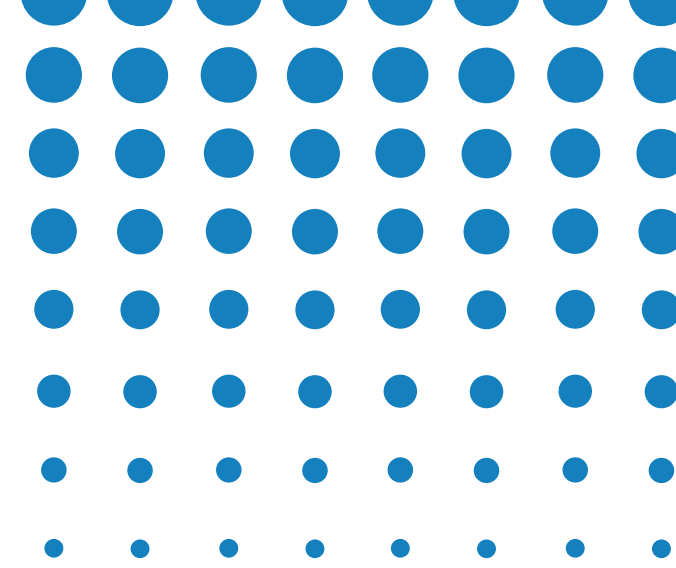


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# Appendix #1: The Case for Workplace Mental Health

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# Creating a Caring Organizational Culture

Normalizing what people are experiencing  
(stress, anxiety, etc.)

Promoting & modeling self-care

Supporting managers to check in with direct reports

Encouraging stress management

Promoting resiliency: bending but not breaking



# 2023 Work in America Survey

Workplaces as engines of psychological health and well-being

## Positive Findings:

- 77% of workers reported being very (36%) or somewhat (41%) satisfied with the support for mental health and well-being they receive from their employer
- 59% strongly (22%) or somewhat (37%) agreed that their employer regularly provides information about available mental health resources.

<https://www.apa.org/pubs/reports/work-in-america/2023-workplace-health-well-being>

# 2023 Work in America Survey

Workplaces as engines of psychological health and well-being

## Improvement Opportunities:

- 55% of workers strongly (21%) or somewhat (34%) agreed that their employer thinks their workplace environment is a lot mentally healthier than it actually is
- 43% worry if they told their employer about a mental health condition it would have a negative impact
- 77% of workers reported experiencing work-related stress in the last month
  - 57% indicated experiencing negative impacts because of work-related stress associated with workplace burnout

<https://www.apa.org/pubs/reports/work-in-america/2023-workplace-health-well-being>

# 2023 UKG Workforce Institute Global Study Mental Health at Work

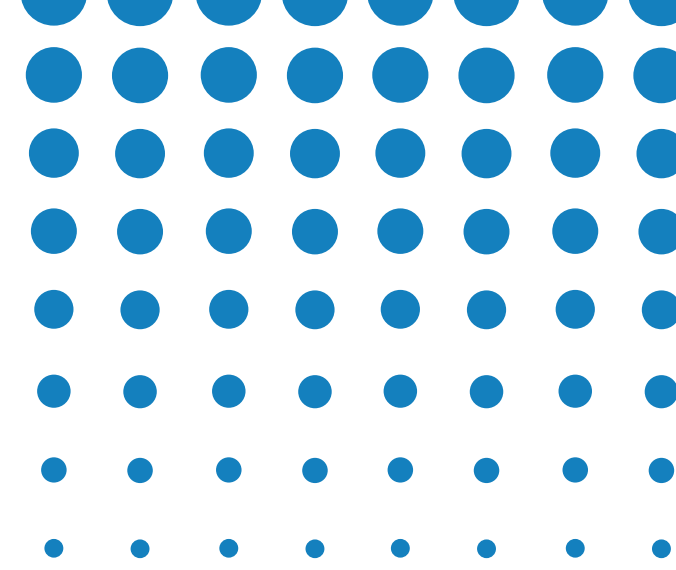


- 60% of employees worldwide say their job is the biggest factor influencing their mental health
- Managers have just as much of an impact on people's mental health as their spouse (both 69%) — *and even more of an impact than their doctor (51%) or therapist (41%)*
- 81% of employees worldwide would prioritize good mental health over a high-paying job  
– 64% admit they would take a pay cut for a job that better supports their mental wellness

**35% of leaders in the Workforce Institute study reported being stressed at work with 42% saying it was because of the stress they put on themselves.**

<https://www.ukg.com/resources/article/mental-health-work-managers-and-money>





# Appendix #2: Building a Mentally Healthy Culture

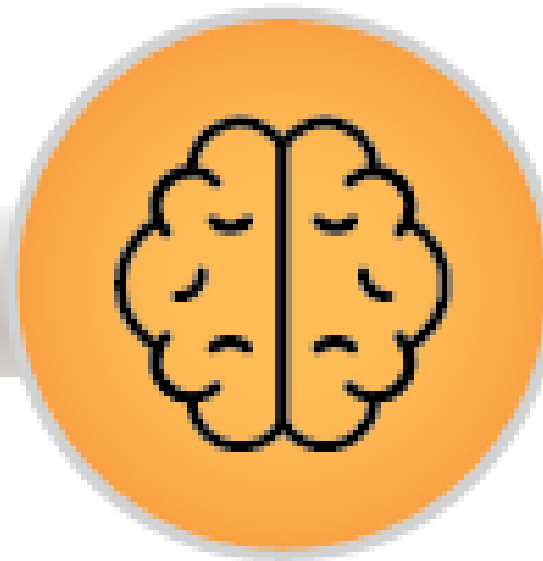
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# 4 Key Workplace Mental Health Strategies



**Leadership  
Engagement**



**Raising Mental  
Health Awareness  
Resources and  
Strategies**



**Creating a  
Mentally Healthy  
Organizational  
Culture**



**Enhancing Access  
to Services and  
Supports**





## Leadership Engagement

Articulate a vision and implement policies and practices that communicate that addressing mental health is a strategic imperative and where senior leadership is:

**Visible**

**Vocal**

**Vulnerable**



## Raising Mental Health Awareness: Resources & Strategies

Integrate resources & policies on mental health, substance misuse, suicide prevention, & worker well-being into existing functions, programs, & practices in key areas:





## Raising Mental Health Awareness: Resources & Strategies

### HR & Benefits

- Communications
- Recruitment / D&I
- Onboarding & Engagement
- Training & Development
- Performance Management
- EAP/Chaplain
- Drug & Alcohol Testing Programs
  - Last Change Agreements
  - Treatment & Recovery Programs
- Benefits Open Enrollment
- Wellness Programs

# Examples of Integration

### Safety & Health

- Safety Orientation
- Pre-season /Pre-Project Kickoffs
- Daily Safety Huddles
- Safety Observations
- Posters & Banners
- Toolbox Talks
- Stand-Downs
- Critical Incident Response
- Drug & Alcohol Testing
- Workers Compensation
- Wallet Cards & Hardhat Stickers

# Removing Barriers and Improving Access to Care: *Examples of Best Practices*

1. Expanded education on Employee Benefits
2. Invite spouses and domestic partners to attend Employee Benefit Open Enrollment meetings
3. Changed Employee Assistance Provider
4. Expanded number of EAP counseling sessions per issue/concern
5. Offered telehealth options for physical and mental health services
6. Invited labor union partners to offer jobsite explanations of how to access benefits
7. Negotiated increased preventive care services
8. Reduced co-pays for in-network providers
9. Expanded number of “in-network” mental health counselors
10. Allowed biometric testing to be performed by primary care physicians
11. Sponsored family health/wellness fair
12. Incentivized participation of wearable monitors
13. Provided app for mental health counseling services
14. Offered mindfulness, resiliency and wellbeing apps

Acknowledgement: Center for Workplace Mental Health; 2021 Mental Health & Wellbeing in Construction Survey