

Construction Workers and Employers: Mental Health & Substance Addiction or Misuse

Combined quantitative and qualitative report

November, 2019

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Background and Objectives

Background & Objectives

- WorkSafeBC is interested in exploring the **prevalence of mental health concerns and problematic substance use or addiction** in the construction industry.
- The research also aims to understand **tangible ways to best support employers and workers** within the BC construction industry with mental health and substance addiction or misuse issues.
- This report covers the **findings from two phases of research**
 - a quantitative phase through survey findings and
 - a qualitative online discussion board

Methodology

1

Online survey to measure prevalence, perceptions and attitudes, awareness of resources

10-minute online survey

593 respondents:

- 251 employers and 270 workers

The margin of error is $\pm 4.0^*$ for all respondents.



2

Online discussion board to gather feedback on potential resources and information

45-minute participation across 2 days

28 respondents:

- 9 employers and 19 workers



*Please note, margin of error increases when the base size decreases.

Key Findings

Key Findings

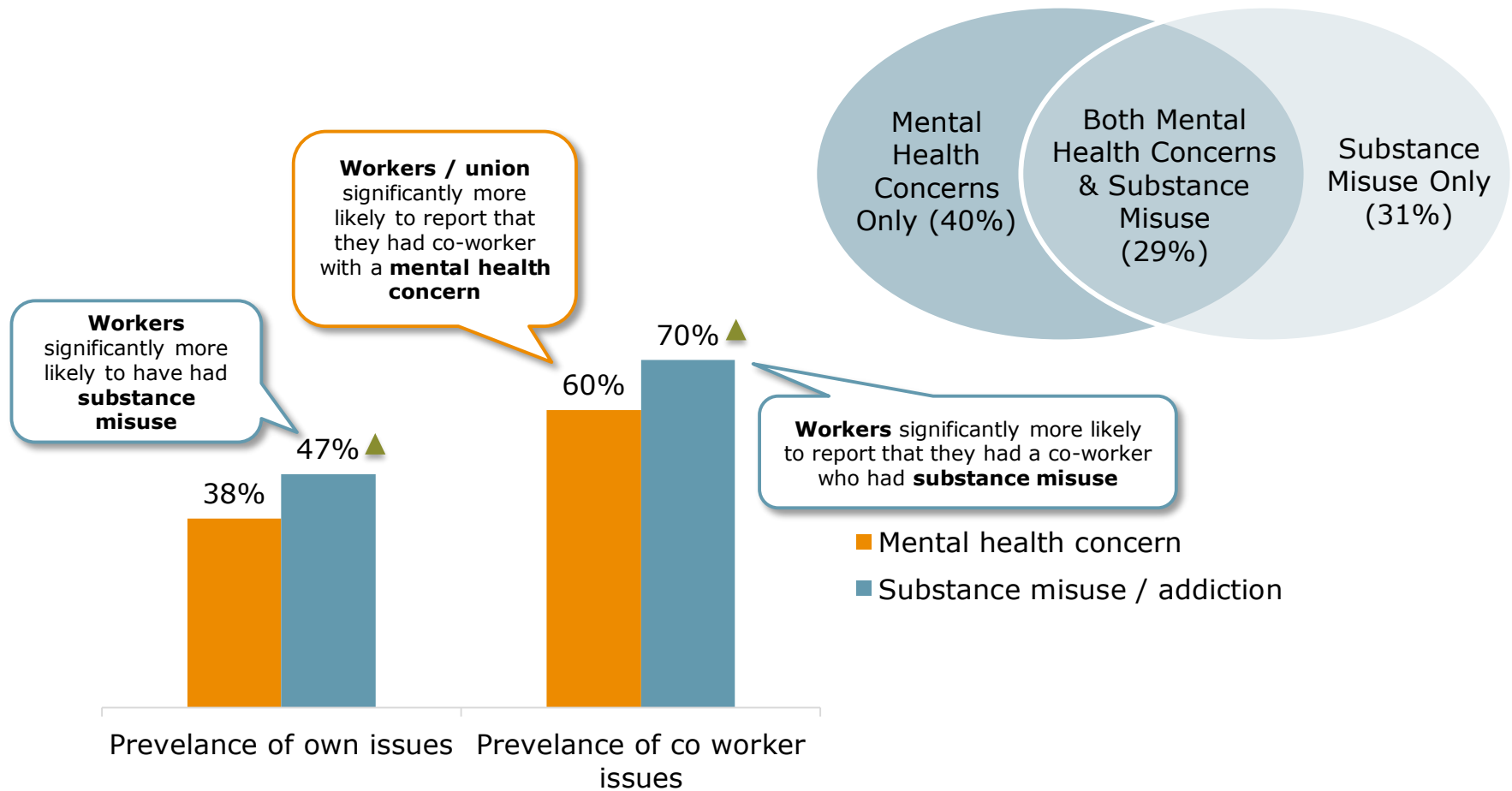
- Overall, prevalence of mental health concerns and substance misuse among construction workers is relatively high (55% of respondents).
- There is also a relatively high cross morbidity of 29% of self-reported mental health and substance misuse among respondents.

The themes are crystalized into the following findings:

- 1 It's difficult to identify the issue and admit that help is needed
- 2 Workers fear consequences of opening up at work
- 3 Starting a conversation about substance addiction and misuse is harder than starting a conversation about mental health because of perception of poor personal choices in the prior rather than suffering from a disease or medical condition
- 4 Workers want a variety of resources to maximize the potential for a wide range of people to benefit – primarily to raise awareness and create a supportive work environment without fear of endangering their current position or future career growth

Attitudes towards
mental health and substance misuse

Prevalence of mental health concerns and substance misuse / addiction among workers is relatively high



A1. Have you struggled or are you currently struggling with your mental health (whether diagnosed by a doctor or not)? (% Yes)
 B1. Have you ever misused drugs or alcohol or experienced addiction and experienced any of the following as a result? (% reported any substance misuse)
 A2. Do you know any co-workers who have struggled with their mental health (whether diagnosed by a doctor or not)? (% Yes)
 B2. Have you ever worked with someone in the construction industry who has been impaired at work due to drugs or alcohol? (% Yes) ▲ 95% sig. confidence level MH vs. SM
 Venn diagram based on anyone who has experienced mental health and/or substance misuse concerns. (n=324)



Mental health can generate more sympathy compared to substance abuse and misuse, although both conditions have negative associations

Similarities

Individuals with either condition are seen as **unreliable, weak and incompetent.**

Some feel interrogated at time as to whether the problem is **“real”** or if it is an **excuse to take time off work.**

Once identified with either or both conditions, there is **anxiety around being reprimanded** or suffering consequences at work.

At times, substance misuse is tied **hand-in-hand** with mental health problems. Those suffering are focusing on managing their issues internally by using unhealthy coping mechanisms; **getting help externally is less top-of-mind.**



“The stigma is quite simple; nobody wants to admit that they are not tough enough mentally. Being overwhelmed is viewed as being weak and not up to the job.”

- Employer



Differences

Substance misusers are often assumed to be “unfit for the job,” especially in workplaces with zero-tolerance policies.

Drinking alcohol and using recreational drugs is a perceived norm by some. As a result, it may be **harder to recognize if one has substance misuse issues versus being a social user.**

Whereas mental health is seen as a more acceptable “illness” (medical condition), addiction is sometimes perceived as an issue that can be stopped with sheer willpower.

Workers with **mental health issues are sometimes more likely to receive sympathy and help** compared to those with substance addiction and misuse.

**"The image shows someone standing alone on a dock. I chose this image because you are on your own when it comes to mental health in my work place."
- Worker**



**"We know that the resources to deal with and talk about mental health are out there, but we struggle to access them since we feel we are confined to our offices and need to put greater weight on completing our day to day job responsibilities. Help is there, but we keep it at arms length since there is too much for us to prioritize to stay on top of primary responsibilities. Mental health is something that needs to be dealt with on our own time, not work time."
- Worker**



Experience and Insights
**"I think that there are likely many mental health issues that are faced by people in my workplace environment but like this tree, they sit there most of the time unacknowledged. This tree is large like I expect mental health struggles are in the lives of those with them, but it often fades into the background because it's not considered to be something that is pressing."
- Worker**

Mental health a taboo subject

"A dark closet because usually these issues aren't openly spoken about."

- Employer



**"This is a dumpster fire. Because you can be completely in agony on the inside, or spiraling like crazy, and as long as you keep it in the bin, they will let it burn."
- Employer**





"A circle with an x. There is zero tolerance in the industry. By having an addiction it puts the safety of your co-workers in jeopardy."
-Worker



"My workplace seems to ignore and hope for the best."
-Worker

"You're a lone wolf all by yourself. No help or support."
- Worker



Substance misusers feel issues are risky to share

"I don't think anyone knows anyone else's life too personally that they would know about their substance abuse. [If] substance abuse was affecting performance and the boss called someone out...I highly doubt the employee will say oh yea [I'm an] addict...that's why I'm performing bad...If substance abuse was an issue, the employee will probably be suspended at the very least and everyone will just have rumors about it...And what can the employer really do in this case?"
- Employer

"You can be easily replaced."
- Worker



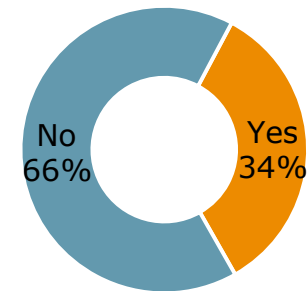
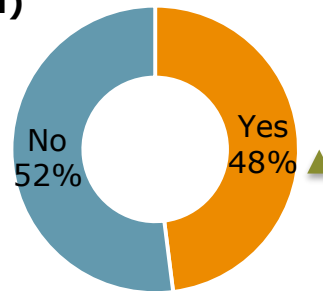
Barriers to
accessing and providing help

There is evidence of difficulty with accepting help from work, particularly for substance misuse / addiction

Mental Health Concerns

Substance Misuse / Addiction

Talked about (those who have struggled)



Accepted Help (those who have struggled)

From peer or subordinate

33%▲

19%

From a superior

26%▲

12%

Union members significantly more likely to accept help

A / B7. Have you ever talked about your [mental health / substance addiction or misuse] at work?

Among respondents who have struggled, are currently struggling or are unsure if they are struggling with [mental health / substance addiction or misuse], 277n / 281n

A / B8. Have you ever accepted help or support from a peer or subordinate at work related to your [mental health / substance addiction or misuse]?

A / B9. Have you ever accepted help or support from a superior at work, related to your [mental health / substance addiction or misuse]? ▲ 95% sig. confidence level MH vs. SM

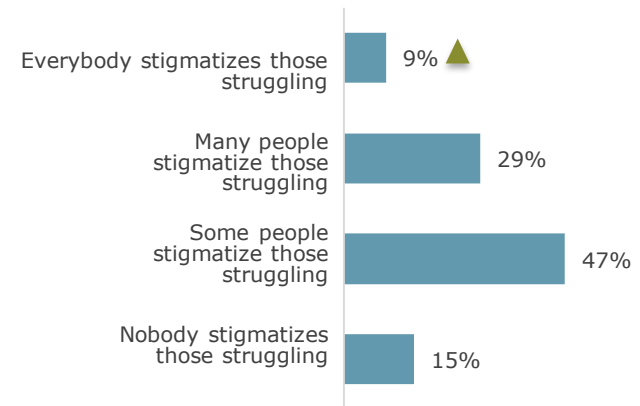
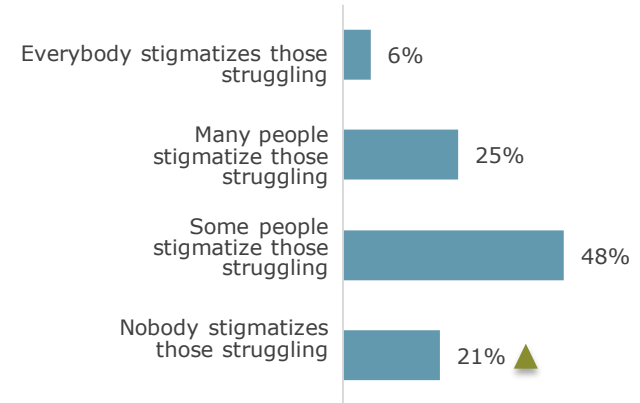
Among workers who have struggled, are currently struggling or are unsure if they are struggling with [mental health / substance addiction or misuse], 131n / 149n



There is a perception that more stigma is attached to substance misuse / addiction

79% feel that there is at least some kind of **stigma** associated with **mental health concerns**

85%▲ feel that there is at least some kind of **stigma** associated with **substance misuse / addiction**



▲ 95% sig. confidence level MH vs. SM



A / B3. In your workplace, to what extent do you think those with substance addiction or misuse encounter disapproval, shame, or other forms of stigma? Among all respondents, 593n

Internal and external pressures make it difficult for people to admit and share their concerns

Internal pressures

Largest internal barrier to seeking support is **admitting there is a problem.**

Mental health and/or substance misuse issues are **perceived to be a sign of weakness.**

Denial makes it difficult to recognize that they are experiencing these issues.

Knowledge gaps – they don't know what the symptoms and behaviours look like.

“The stigma may be that mental health isn't actually an illness. **It is difficult to diagnose objectively.** It is based on how someone feels, versus a blood test that is conducted to determine whether someone is or is not depressed.”

- Worker

External pressures

A large external barrier is a **closed-off work environment.**

The construction industry is thought to be **“macho” and “tough”.**

Possible **repercussions exist from disclosing their concerns** at work (i.e. reprimanded by superiors, unpaid leave from work, passed up for promotions, termination, etc.)

“It was an extremely closed environment. [Mental health issues are] not an illness to the rest of the guys, it's a weakness. **It's me being lazy or stupid or incompetent.**”

- Employer

“Construction is ‘macho’...the guys must be tough. They keep working through physical pain and I think expect they should work through mental pain as well.”

- Employer



Admitting they need help can feel risky for workers

Individuals do not feel safe opening up

- **Lack of confidentiality** is a considerable barrier to accessing help. Workers fear judgment and gossip from co-workers. Being viewed as “**unfit for the job**” from upper management is another fear.
- Many do not perceive the construction industry culture to have an **open dialogue** about these issues.

“**Letting them know that there is no shame in talking about it.** Make them feel accepted and comfortable in sharing and finding a solution.”

- Worker

“**Empathy is perceived as weakness...it’s a tough environment.**”

- Employer

Workers feel replaceable

- Rather than getting a supportive reaction, some feel the industry’s culture is to **replace** those who seek help for mental health and substance misuse issues.

“I think that if I had a substance addiction, confirmation that my job was secure would help me to take a step towards seeking help. Also knowing that my employer acknowledges and understands that substance addiction is an illness, whether through internal memo's, workshops or posters and literature available in the workplace.”

-Employer

Workers can’t afford to take time off

- Workers may not see the benefits of self-help because it may financially affect their dependents.
- Some support services are perceived to have **too high of a financial barrier.**

“[The environment to talk about mental health] is usually always closed. Just going on to the next contract, changing partner or working alone. Family and paying bills [come] first.”

- Worker



However, co-workers are actually very supportive towards people with mental health concerns and substance misuse / addiction

Mental Health Concerns

Substance Misuse/ Addiction

Possible to recover

88%

88%

Possible to return to work

87%

88%

Comfortable working with someone who has returned to work

86%

83%

Employers significantly more likely to agree to possibility / comfort with return to work

Non-union significantly more likely to agree to all statements

A / B5. It is possible for someone with a substance addiction to recover - How much do you agree or disagree with the following statements?
 A / B5. It is possible for someone taking a leave of absence due to substance addiction to return to work - How much do you agree or disagree with the following statements?
 A / B5. I am comfortable working with someone who has returned to work following a leave of absence related to a substance addiction - How much do you agree or disagree with the following statements?
 % somewhat / strongly agree with statements. Among all respondents, 593n



Co-workers are more comfortable listening rather than providing direct advice

Many workers feel more comfortable with listening to someone's story rather than giving advice

- Many individuals feel more comfortable providing support for mental health than substance abuse.
 - Those who have experienced mental health issues themselves more commonly say they are comfortable providing help because they **understand what it feels like** to go through the experience.
 - Some **steer clear of substance misusers**, as there is a perception that it is a personal choice to misuse drugs/alcohol.

“**I have personally dealt with my own mental health issues so I feel comfortable that I can empathize with others**, however, it is a touchy subject where people struggling with mental health are very emotional and potentially volatile in their actions. I would be wary to give them advice since I would be concerned of “saying the wrong thing.” Relatedly, I would be worried that I would not know what to say or how to help them, potentially leaving them in a worse off scenario.”

-Worker

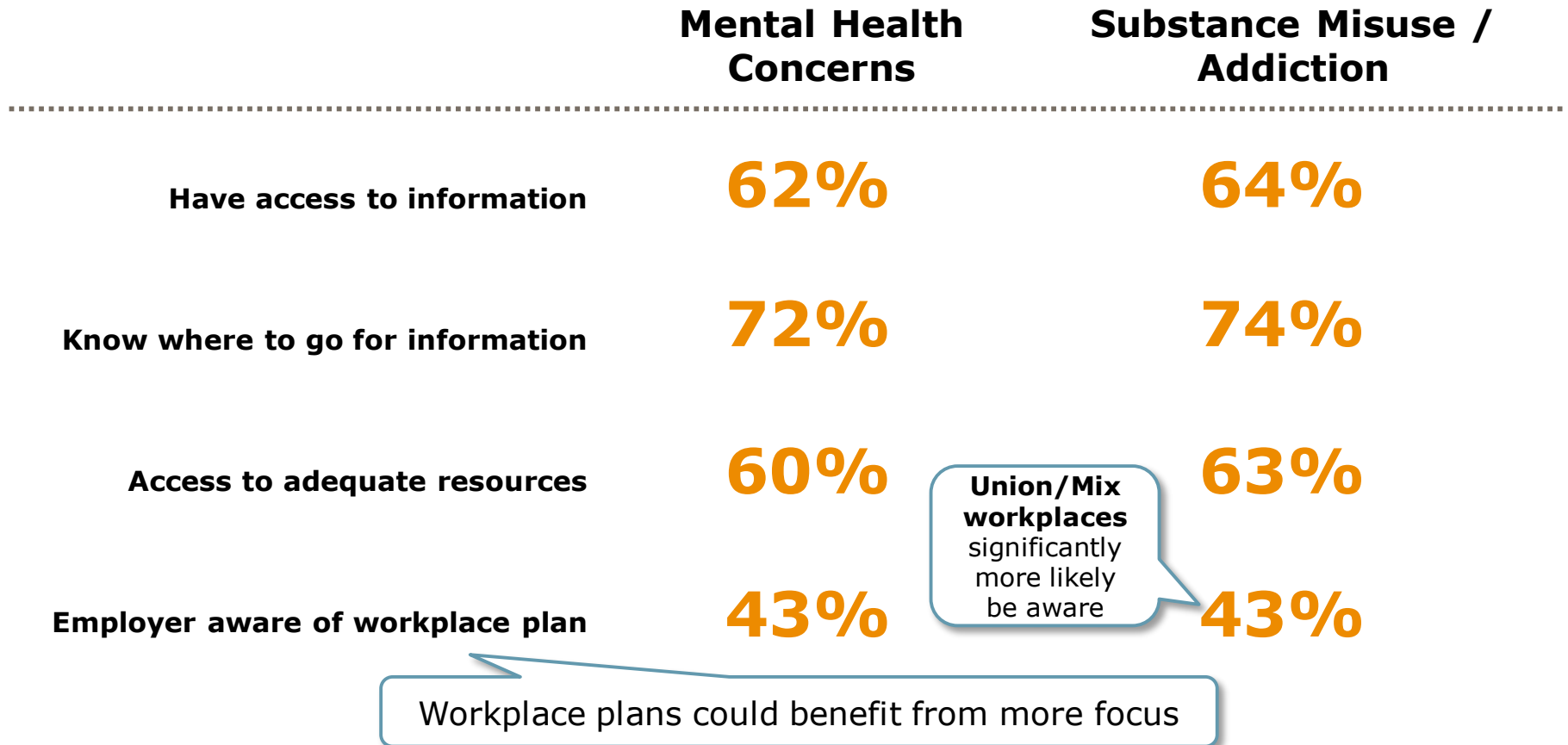
“I have personally dealt with mental health issues and know there can be a way through it. **I understand the despair and isolation associated with depression and anxiety**; I feel comfortable reaching out to others with similar issues.”

-Employer”



How to help

Workers feel there are resources available but there is less evidence of workplace plans being in place



A / B16. Do you have access to adequate information about [mental health / substance addiction or misuse]?
 A / B17. Do you know where to go to get help or support for [mental health / substance addiction or misuse]?
 A / B18. Do you have access to adequate resources (e.g. information, programs, healthcare professionals) to help you address [mental health / substance addiction or misuse]?
 C1 / C2. Does your workplace have a plan in place to support workers with [mental health / substance addiction or misuse]?
 Among all respondents, 593n

▲ 95% sig. confidence level MH vs. SM



Workers want the assurance that their workplace is understanding and supportive

Corporate values that prioritize workers

- Employers placing a higher importance on the well-being of workers is motivating for workers.

“Emphasize that workers need to do whatever they deem necessary to be effective at work.”
- Worker



Guarantee confidentiality and professionalism

- Discussions amongst colleagues and/or management must be discrete to build a trusting work culture.

Time off work for recovery

- Workers feel more inclined to ask for help if they know their company will support them by paving a way for proper treatment/their recovery.



“I told my boss I wasn't feeling well and took the rest of the day off. I did not feel like it was in my best interest to talk to my superiors about this as it would affect my opportunities at the company.”
- Worker

Financial assistance for support services

- Offering extended health benefits to workers can help to mitigate financial concerns and assist workers in receiving the help they require.

Tailored counselling

- Professional services need to be sensitive to workers' personal and cultural backgrounds.



Resources need to reference specific content to raise awareness and provide practical advice

Communicate explicit signs on how to best provide support

- Step-by-step guides for helping, as well as tips for maintaining a healthy state of mind and lifestyle.

“Continuously work on a company culture of acceptance of mental health issues and ensure workers know what steps to take if they suspect someone needs help.”

- Employer



Share success stories

- Stories provide validation that those suffering are not alone, with available resources to help them remain/return to work as valued co-worker.
- These success stories could focus on what the recovery journey would look like for those experiencing issues, and what the results could be.



“**Find government programs that help workers, or private sources**, learn how those sources or programs have succeeded, what kind of people they have been able to help and get to know success stories to share with my workers to motivate them to get better.”

- Employer



Overall, resources need to cover a variety of topics/formats and be clear, concise and actionable

1

Less is more

Workers want short and simple recourse. Providing too much information can overwhelm workers.

2

Increase awareness

Many workers are unaware of tools and resources. Those who are able to identify resources commonly mentioned colleagues; managers, foremen and union representatives as sources for help.

3

Take the individual into account

Construction workers recognize that their workforce consists of people from different backgrounds, language preferences and walks of life, so they may prefer different means of accessing support.

“**Simple graphics with simple information** but has detailed information.” - Worker

“**I think it would be good to have it broken up into 'things you can do,' 'people you can talk to,' 'places you can go,'** etc. Just so that it is very straightforward at first so that it doesn't feel overwhelming or like too much when you are trying to access [a] resource.”
- Employer

“**Different people like or need different approaches** - there is never a one size fits all. No different than with any other illness. Some like information and detail. Some like a support group. Some like to deal with it alone.”
- Employer



Opportunities

Employer focused opportunities

“Keep reminding people of the resources and how to access them.”

- Employer

1 Reminders of available resources

Managers, foremen and union representatives need to continuously remind workers of the resources available through existing touch points, such as:

- Emails
- Newsletters
- Employee and family assistance program (EFAP)

2 Workshops, courses and meetings

Establish a culture that involves and supports employees by promoting their well being, offering advice to those experiencing concerns and assisting those retuning to work after a period of absence. For example:

- Town hall discussions to review support policies and programs
- Educational courses (e.g. Mental Health Commission of Canada mental health first aid)
- Workshops about general health and wellness (e.g. lunch-and-learn)
- Regular check-ins between workers and managers
- Share success stories (e.g. case studies)

3 Toolbox talks

“Could push out information to help foreman for Toolbox Talks and post information on sites.”

- Employer

Continuation of BCCSA informal safety meetings to include mental health and substance misuse.

Worker focused opportunities

4 Designated workplace point of contact

Assign a qualified point-of-contact (e.g. HR or first aid attendant) and educate workers on the representative's role and responsibilities to show that the workplace prioritizes the mental and physical health of its employees.

“I would have an HR person and the first aid attendant have these duties included in their job where they can offer help to people that need it and be a safe place to ask for help. If there were a couple different people you could talk to it may help some more people.”
- Worker

5 Substance free social events

Workers express that social gatherings are a part of the construction industry, but often involve the use of substances (drink and/or drugs). Workplaces can instead cultivate a more positive and healthier environment by planning alternative events

- Examples include barbeques, breakfasts or attending sports games together.

“Build a strong team - through team bonding activities, so that colleagues feel comfortable discussing any issues with each other, whether work or personal related.”
- Worker

Broader opportunities

6 Self-serve materials

Materials for employees and/or employers to use in for support in private for confidentiality and convenience. Small employers in particular, may be more reliant on external resources. For example:

- Online – self-help reading materials on company websites, internal emails, links to external resources, interactive survey and/or quizzes
- Print – new employee onboarding handbook, pamphlets and posters in community areas as reminders of existing resource

7 Confidential support networks

Support networks that allow for workers long, irregular work shifts, remote locations and multiple languages. For example, 24-hour phone lines, mobile apps, online support groups, offline support.



“There was a hotline setup specifically for construction workers (in Australia) that could be completely anonymous for a one-off call or you could arrange follow-up discrete follow-up calls. The employer did not need to know unless the caller wanted them to... I think this free, low barrier, anonymous system was a good ice breaker to get people talking to someone and then hopefully get them into therapy or a recovery program.”

- Worker

Discussion