CPWR-NIOSH COVID-19 Webinar Series: Mental Health During the COVID-19 Pandemic

Thursday, August 27th, 2020

Welcome: Chris Trahan Cain, CIH, Executive Director, CPWR

Moderator: G. Scott Earnest, Ph.D., P.E., C.S.P., Associate Director for Construction, Office of Construction Safety and Health, NIOSH

Panelists:

Douglas Wiegand, PhD, Behavioral Scientist, Division of Field Studies & Engineering, NIOSH **Ann Marie Dale**, PhD, OTR/L, Professor, Washington University School of Medicine **Randall Krocka**, Administrator, Sheet Metal Occupational Health Institute Trust

For Technical Difficulties:

Chat with host, Jessica Bunting or email jbunting@cpwr.com

If you have trouble hearing through your computer, call in via phone:

415-655-0003 Access code: 127 650 2739 #





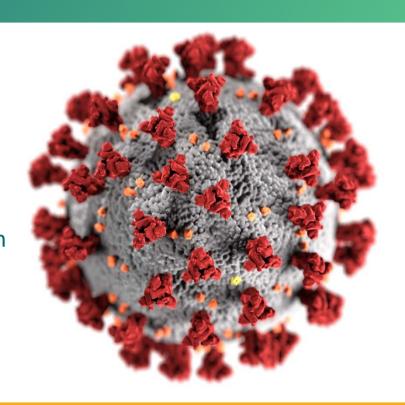
Construction and COVID-19 Updates

G. Scott Earnest, Ph.D, P.E.

National Institute for Occupational Safety and Health Centers for Disease Control and Prevention U.S. Department of Health and Human Services

27 August 2020





cdc.gov/coronavirus

Overview of presentation

- Coronavirus Disease 2019 (COVID-19)
- Mental Health
- Organizational Support
- Disparities
- Falls Campaign





During late June, 40% of U.S. adults reported struggling with mental health or substance use



Based on a survey of U.S. adults aged ≥18 years during June 24-30, 2020

For stress and coping strategies: bit.ly/dailylifecoping

CDC.GOV bit.ly/MMWR81320 MMWR

[†]In the 30 days prior to survey

The Role of Organizational Support and Healthy Work Design

Posted on July 29, 2020 by Emily J. Haas, PhD; Jeannie Nigam, MS; Jessica MK Streit, PhD, CHES®; Sudha Pandalai, MD, PhD; L. Casey Chosewood, MD, MPH; and Mary B. O'Connor, MS

- · Schedule frequent check-ins,
- · Engage in positive social interactions,
- Model best practices by avoiding late-in-the-day or after-hours emails and meetings (this effort demonstrates that supervisors are also taking care of his or her own work/life challenges),
- Support flexible work schedules, especially for those assuming educator roles for school-aged dependents or caregiver roles, and
- Promote cross-training and the ability to trade shifts (if applicable) to enable employee flexibility.



CDC COVID DATA Tracker

Deaths by Race/Ethnicity: Data from 131,917 deaths. Race/Ethnicity was available for 108,921 (82%) deaths.

USA

5,715,567
TOTAL CASES

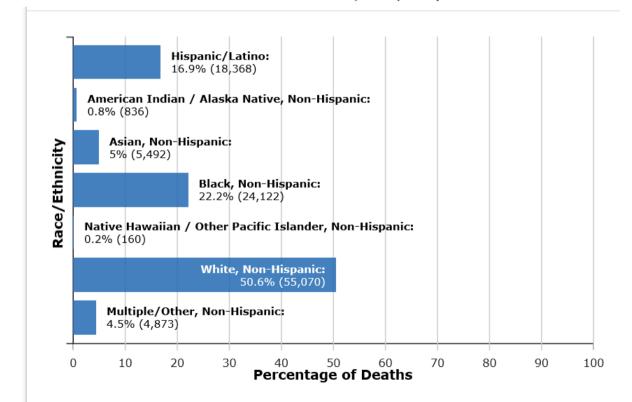
CDC | Updated: Aug 25 2020

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USA

176,617 TOTAL DEATHS

CDC | Updated: Aug 25 2020





Racial and Ethnic Disparities Among COVID-19 Cases in Workplace Outbreaks by Industry Sector — Utah, March 6 –June 5, 2020

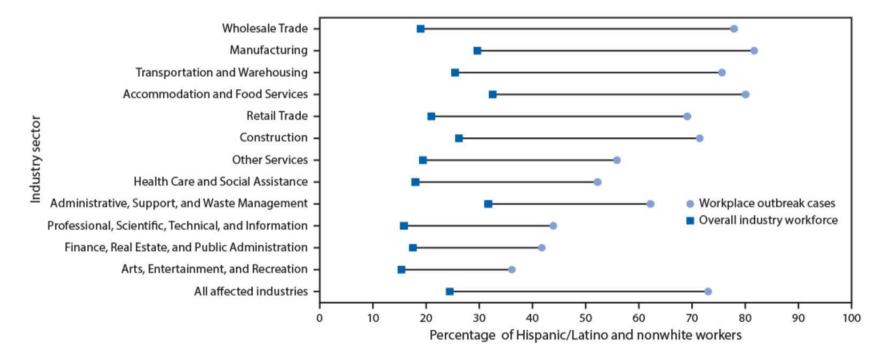
Early Release / August 17, 2020 / 69

David P. Bui, PhD^{1,2}; Keegan McCaffrey³; Michael Friedrichs, MS³; Nathan LaCross, PhD³; Nathaniel M. Lewis^{1,3}; Kylie Sage, MS³; Bree Barbeau, MPH³; Dede Vilven, MPH⁴; Carolyn Rose, MPH⁵; Sara Braby⁶; Sarah Willardson, MPH⁷; Amy Carter⁸; Christopher Smoot, MPH⁹; Andrea Winquist, MD, PhD²; Angela Dunn, MD³ (View author affiliations)





FIGURE. Percentage point difference* between the percentage of workers with workplace outbreak-associated COVID-19 who are Hispanic/Latino and nonwhite† and the percentage of Hispanic/Latino and nonwhite workers within the entire industry workforce, by industry sector — Utah, March 6—June 5, 2020



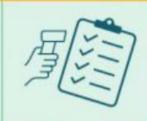


During April-May 2020, 16,233 workers in meat and poultry processing facilities were infected with COVID-19

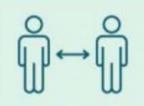
Among infected workers with reported race and ethnicity, 87% were racial or ethnic minorities*

Meat and poultry processing facilities should











Provide culturally appropriate health education materials

Screen workers for possible infection

Encourage hand hygiene and use of face coverings

Increase space between workers

Encourage workers to take sick leave when needed

"Race/ethnicity reported for 61% of cases

CDC.GOV

bit.ly/MMWR7720

MMWR







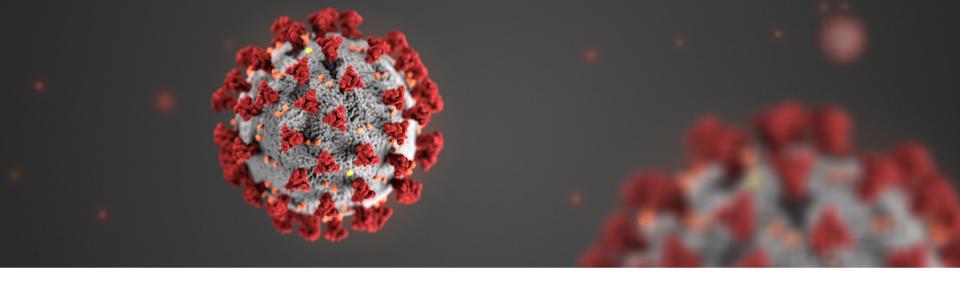
PLAN. PROVIDE TRAIN

Three simple steps to preventing falls.



Where to get more information

- CPWR COVID-19 Clearinghouse: http://covid.elcosh.org/
- CDC COVID-19 Construction: https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/construction-workers.html
- CDC Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus
 Disease 2019 website: www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html
- CDC Prepare your Small Business and Workers for the Effects of COVID-19 website: www.cdc.gov/coronavirus/2019-ncov/community/guidance-small-business.html
- NIOSH Directory of Construction Resources:
 https://www.cdc.gov/niosh/construction/default.html
- OSHA COVID-19 Construction: https://www.osha.gov/SLTC/covid-19/construction.htm
- CDCINFO: 1-800-CDC-INFO (1-800-232-4636) | TTY: 1-888-232-6348 | website: www.cdc.gov/info



For more information, contact CDC 1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



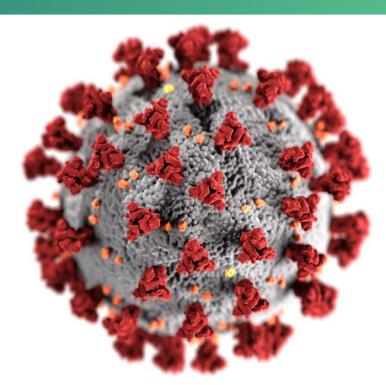
Douglas Wiegand, PhD

Behavioral Scientist,
Division of Field Studies and Engineering,
NIOSH

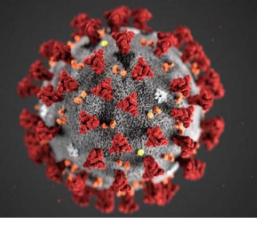
27 August 2020







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Mental Health & COVID-19 in the Construction Industry

Ann Marie Dale, PhD, OTR/L Healthy Work Center

Email: amdale@wustl.edu



Mental Health and COVID-19

- The pandemic has caused increased anxiety and stress in people's lives
- CDC Household Pulse Survey (US National)*

% with symptoms	2019 (2 nd quarter)	2020 (7 day average)	
 GAD-2 (anxiety) 	8.3 (7.3-9.4)	April: 30.8 (30.0-31.7)	July: 36.0 (35.2-36.9)
 PHQ-9 (depression) 	6.7 (6.0-7.4)	April: 23.5 (22.7-24.3)	July: 29.6 (28.8-30.5)

- Mental health concerns during COVID-19
 - Fear of contracting COVID
 - Job loss, reduced work hours
 - Social isolation from friends/family
 - Increased family demands (home school, cooking)
 - Poor mental health resiliency (increased substance use)

*https://www.cdc.gov/nchs/covid19/pulse/mental-health.htm

Substance use and suicidal ideation during the COVID-19 pandemic

- Drug testing results show substantial increase in positivity rate (ie fentanyl 561% higher from 1st to 2nd quarter 2020¹.
- Started or increased substance use to cope with stress or emotions related to COVID-19: 13.3%²
- Seriously considered suicide in the prior 30 days: 10.7% [note: 18-24 year olds- 25.5%]²

¹Millennium Health Signals Report[™], COVID-19 Special Edition: Significant Changes in Drug Use During the Pandemic, Volume 2.1 | Published July 2020

² Czeisler MÉ, Lane RI, Petrosky E, et al. Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020. MMWR Morb Mortal Wkly Rep 2020; 69: 1049–1057. https://www.cdc.gov/mmwr/volumes/69/wr/pdfs/mm6932a1-H.pdf

Before the Pandemic-Construction Worker's Mental Health

- Highest rate of drug overdose fatalities¹
- Highest suicide rate²

43.5 (per 100,000) construction workers vs. 14.2 (per 100,000) for US population

Rate of suicide by	construction trade	(per 100,000 workers)

Ironworkers:	79.0	Equipment Operators:	52.8
Millwrights:	78.7	Construction Managers:	45.7
Masons:	67.6	Electricians:	44.0
Laborers:	62.0	First-line Supervisors:	44.0
Carpenters:	54.7	Pipelayers/Plumbers:	35.4

DOI: http://dx.doi.org/10.15585/mmwr.mm6903a1external icon.

¹Harduar Morano L, Steege AL, Luckhaupt SE. Occupational Patterns in Unintentional and Undetermined Drug-Involved and Opioid-Involved Overdose Deaths — United States, 2007–2012. MMWR Morb Mortal Wkly Rep 2018;67:925–930. https://www.cdc.gov/mmwr/volumes/67/wr/mm6733a3.htm

²Peterson C, Sussell A, Li J, Schumacher PK, Yeoman K, Stone DM. Suicide Rates by Industry and Occupation — National Violent Death Reporting System, 32 States, 2016. MMWR Morb Mortal Wkly Rep 2020; 69:57–62.

Construction work concerns

Concern for:

- Contracting the virus:
 - Construction is often considered essential work; may occur in locations near COVID patients
- Job security:
 - Work postponed or cancelled by customers/owners; material supply slow or interrupted
 - Project schedule stressed if lost time due to COVID cases or others exposed/need to quarantine
- Loss of pay:
 - Missed hours if sick, quarantine, family problem (childcare, home school), no work
- Worksite COVID policies vary:
 - rules have varied from job to job and overtime

Union/contractor supports offered

- Member assistance program/employee assistance program (MAP/EAP)
 - Provide services to promote employee work life balance and wellbeing Results from one health fund:
 - Calls received March-June: 2020= 3921 (28% fewer than 2019)
- Financial support- cover lost time related to COVID-19 (10 days to quarantine or isolation)
 - Short term disability (union)- utilization same from 2019 to 2020 (435 average monthly benefits)
 - Some contractors covered their union employee time loss

Employer actions to reduce anxiety/ and support worker mental health

- Upper management support
 - Company president's message "It's ok to stay home if you are sick."
 - Employees were given the option to stay home if they didn't feel safe. Within 1 month, all employees had returned to work.
 - Childcare issues: Tried to accommodate worker. Not paid for lost time but guaranteed their job

Reassurance from upper management relieves worker anxiety

Employer actions

- Worksite supports- Protections from COVID
 - Visual and verbal reminders to follow best practices (physical distance, hand and face hygiene, wear face covering)
 - Change procedures and environment
 - Stagger shifts, hand washing stations, hand sanitizer, COVID monitor
 - COVID hotline to report concerns
 - Clearly define COVID policies.
 - Work in a routine

Worker feedback

- Said they felt better "seeing" the changes on the worksite
- Felt the contractor was taking the pandemic seriously
- Liked receiving COVID updates particularly early in the pandemic

Employer actions

- Monitor Mental Health of workers
 - Safety personnel keep in close contact with workers- talk to them frequently
 - Watch workers for changes in attitude or behaviors
 - Offer support- try to reassure workers and offer help if they can
 - Deliver mental health toolbox talks with suggestions for self-help and available professional help and "Help" telephone lines if needed
 - Help employees become aware of the EAP/MAP. Post signs with the information.
- Consider offering and taking mental health awareness training:
 QPR Institute [Question, Persuade and Refer]
 - https://qprinstitute.com/individual-training
 Mental Health First Aid
 - https://www.mentalhealthfirstaid.org/

What you can do

- Be empathetic
 - "We are giving more breaks and time off."
 - We've relaxed some of the friction areas, used to be "when will this be completed? Why is this taking so long?"
 - some mutual understanding that piling on pressure does not help these days
- Provide information and resources
 - Give frequent, clear information about COVID-19 and best practices
 - Provide information on available resources (MAP/EAP, Financial help)
- Watch for signs of distress, changes in behavior and offer help

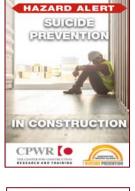
Mental Health resources

- Employee Assistance Programs (EAPs)
- Be educated on federal relief programs (Family First, unemployment) and employee benefits to cover lost time
- Seek union and community resources for financial support, food pantry, community services
 - National Alliance on Mental Illness; COVID-19 Resource and Information Guide. https://www.nami.org/Support-Education/NAMI-HelpLine/COVID-19-Information-and-Resources/COVID-19-Resource-and-Information-Guide
- Encourage increased communication with others to prevent isolation
- Many webinars, free online programs to build mental health resiliency
- Encourage healthy lifestyle (diet, exercise, sleep)

September: Suicide Prevention Awareness

CPWR Resources:

- Hazard Alert: Preventing Suicide Prevention in Construction — <u>English</u> and <u>Spanish</u>
- Toolbox Talk: Suicide Prevention in Construction —
 <u>English</u> and <u>Spanish</u>
- Infographics
 - Start a Conversation English and Spanish
 - Reach Out <u>English</u> and <u>Spanish</u>





AGCMO SUICIDE PREVENTION IN THE CONSTRUCTION INDUSTRY

No está solo.

usted o algulen que conoce necesita ayuda inmediata, comuniquese con la Linux liu evención del función al 1-003-023-053 o envie un mensaje de texto con la palatra " "POLA" ja 151/110 para comunicarse con un consejero en crisia.

https://www.agcmo.org/suicideprevention

SMART MAP PROGRAM THE CONSTRUCTION INDUSTRY ALLIANCE FOR **SUICIDE PREVENTION:**

ADDRESSING SUBSTANCE ABUSE MENTAL ILLNESS AND SUICIDE PREVENTION



Safety Matters

Randall Krocka Administrator Sheet Metal Occupational Health Institute Trust



Randy Krocka SMOHIT Administrator

- Union sheet metal worker for over 40 years
- Worked in the field for over 24 years
- Financial Secretary/Treasurer for SMART local 18 in Wisconsin for 10 years
- SMOHIT Administrator since 2013 to present.



Stress and Anxiety amplified

- Prior to COVID-19 stress and anxiety came in many different forms.
- The virus is spreading....what now
- Working from home for some, and for many construction workers, we are working in a potential unsafe environment.
- What is my new normal
- How do I address this new feeling of anxiousness

Substance Abuse, Mental Health, Suicide

- · We have all heard the statistics on opioids, Highly addictive, over prescribed
- In 2016 over 73% of construction workers injured were prescribed a narcotic painkiller
- In 2017 mare than 70,000 died from a drug overdose making it the leading cause of injury related death in the US.
- Of those 68% involved a prescription or illicit opioid.
- Many times substance abuse, mental health issues or suicide can all be intertwined
- How do we change course

Addressing the Issues

SMART MAP Training



CIASP

 Construction Industry Alliance for Suicide Prevention.

Phone: 609-799-4900
 Fax: 609-799-7032

Email: info@preventconstructionsuicide.com





"Sometimes life is unrelenting as bad stuff piles up....when it does, reach out for help because you don't have to go through these tough times alone"



Safety Matters*



SMART MAP Helpline 877.884.6227 www.smartmaptraining.org





SMART MAP Helpline 877.884.6227 www.smartmaptraining.org



Safety Matters®

SMART MAP HELPLINE 1-877-884-6227

www.smartmaptraining.org

SHOW



LIFELINE

1-800-273-TALK (8255)

www.suicidepreventionlifeline.org

Helpful resources

- https://www.samhsa.gov/find-help/national-helpline
- http://www.elcosh.org/document/4370/d001623/Toolbox%2BTalk%253A%2BCOVID-19.html
- https://www.youtube.com/watch?v=Nap8t4s0UjQ
- https://www.cdc.gov/cdc-info/index.html
- https://preventconstructionsuicide.com/STAND_UP_for_Suicide_Prevention
- https://www.crisistextline.org/text-us/
- https://www.cdc.gov/screening/index.html

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Q&A

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