

Mental health: A neglected area of occupational health and safety

Commemorated annually on 28 April, the World Day for Safety and Health at Work initiative provides an important opportunity to reflect on the health status of the South African construction industry – one of the key enablers of socio-economic development and service delivery.

The event was launched by the UN's International Labour Organization in 2003 to promote the prevention of occupational accidents and diseases across all industries. For Professor John Smallwood, professor: Construction Management at Nelson Mandela University, it's a vital rallying point, and one that he believes should be extended to include an emphasis on well-being in general.

To date, the performance track record for health and safety (H&S) in South African construction is mixed. "Our industry continues to receive unfavourable media coverage due to trench collapses, building, support work and slab collapses, fatalities, injuries, disease, and damage to public property," he explains.

"Therefore, in many cases, there's a need to move from the 'Basic' stage (i.e. 'Little interest in H&S – doing the minimum to get by – and exposed to significant H&S issues') to the 'Compliant' stage in terms of the H&S journey model. From there, the next phase is the 'Proactive' stage, and then the ultimate 'Resilient' stage (i.e. 'World-class H&S performance – creating a process of continuous improvement/innovation')," he continues.

Traditional standpoint and 'safetyitis'

Historically, Smallwood says the focus in terms of H&S has been guided by thinking such as 'the manifestations of safety-related failures are immediate', and 'the manifestations of health-related failures are long-term.'

"Regrettably, despite legislation existing in the form of the Occupational Health and Safety Act (No. 85 of 1993), there's evidence of a 'safetyitis' trend – a 'disease' that, among others, militates against affording



occupational health (OH) the status it deserves," he continues.

The Ergonomics Regulations amplified the need to address ergonomics, which is directly related to OH. Furthermore, Smallwood says enlightened construction stakeholders have expanded the H&S agenda to include primary health (PH), including, among others, PH promotion. An increasing focus on mental health further expands the agenda and is in line with international research.

Key PIC findings

This is well illustrated by last year's World Day for Safety and Health at Work media release, which presented the key findings of an exploratory study. This was undertaken by Working Commission W123 'People in Construction' (PIC) of the International Council for Research and Innovation in Building and Construction.

The top five research priorities included: mental health (1=), workforce engagement (2=), H&S (2=), and workforce well-being

(4=). The top five research gaps included: mental health (1=), workforce engagement (2=), workforce well-being (2=), and human rights (4=). Overall, the top five issues – based on the mean of the percentage responses, research priorities and research gaps – were mental health, workforce well-being and workforce engagement.

Finding the balance

"Clearly, sound mental health is the key. In construction, compressed project schedules, the physically demanding nature of the work, exposure to hazards and risks, long hours and being separated from family and friends on remote sites, all increase the stress burden. This amplifies the need for industry, organisational and project-level interventions," Smallwood adds.

"Appropriate project durations, a ban on weekend work, and the inclusion of mental health and well-being in the Construction Regulations and H&S programmes constitute minimum interventions," he concludes. **35**