The Crane Report

SUICIDE RISK IN CONSTRUCTION – DATA ANALYSIS

Section-8

ABSTRACT

This section presents an evidence-based analysis of suicide risk within the construction industry between 2015 and 2024. Whilst industry narratives frequently highlight certain trades, our findings clarify the specific occupations most at risk, with those working at height demonstrating significantly elevated vulnerability. Examination of mortality patterns, including COVID-19 impacts, reveals that both skilled and unskilled workers share structural risk factors, including financial insecurity and pressure to work despite personal or health crises. The data underscore systemic vulnerabilities that perpetuate both physical and mental health risks across the sector, challenging prevailing assumptions about high-risk trades.

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Section 8 – Suicide Risk in Construction – Data Analysis

Investigating a Significant Period

In order to fully understand construction industry suicide motivations, our investigation examined major national and international events that occurred between 2015 and 2024, a significant period which saw a rapid rise in suicide incidents.

Drawing on ONS *raw* data for suicides among construction tradesmen, we noted that building trades n.e.c., carpenters, joiners, painters and decorators, and plasterers are frequently cited in industry podcasts as being among the highest-risk groups. However, our analysis will show that such portrayals are misleading. We present an evidence-based assessment identifying the specific trades and sectors most at risk.

Our findings indicate that those employed to work at height face a significantly higher suicide risk. This raises a critical question: in cases recorded as “accidental death falls,” *how was suicide definitively excluded as a cause*?

We further highlight that COVID-19 mortality rates were disproportionately higher among those in Elementary Construction Occupations compared with the national average. The data also reveal that both skilled and unskilled workers share common vulnerability clusters, exposing structural weaknesses across the industry. These shared vulnerabilities contribute to the persistence of risk for both physical illness and mental health crises.

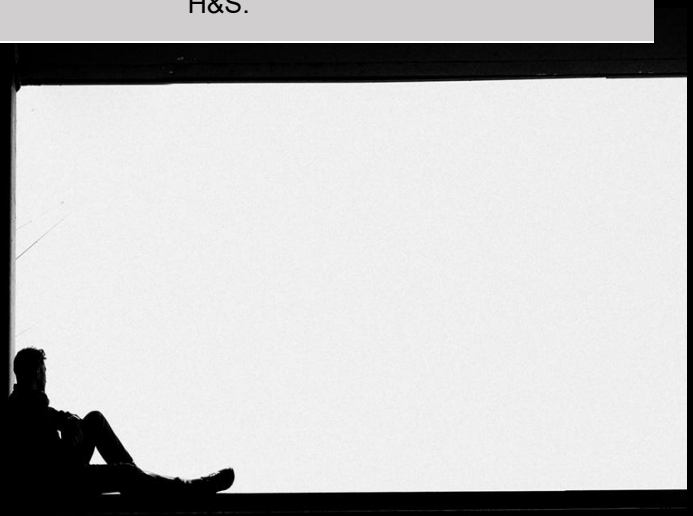
One such vulnerability is a chronic lack of financial resilience. For many, this means that when work is available, despite elevated risks such as COVID-19, they feel compelled to attend. Similarly, when grappling with personal crises where time away might be beneficial, limited financial options often result in workers continuing to perform their duties, regardless of the toll on their wellbeing.

We also look closer at the job losses through the COVID-19 period to assess if the commonly cited factors in construction industry suicides, that is the misclassified self-employment scheme, and the CIS employment system, stands up to scrutiny.

One of the major questions we set ourselves was:

Between 2015 and 2021 UK Construction industry suicides rose from 26/100,000 to 34/100,000. *What major social issues or challenges did the UK and the construction industry suffer, during that period*?

Period	Key National Issues	Construction Industry Impact	Personal Impact
2015–2019	Austerity Measures & Public Sector Cuts	Job insecurity.	Low pay, weakened support services.
2020-	Housing Crisis & Rising Living Costs	Relocated project workers unable to find affordable accommodation.	Rents consuming large % of income making project unaffordable. (*Additional to primary residence*)
2016-2020	Brexit	Currency fluctuations impacted supply chains. EU workers departed UK.	Economic uncertainty
2020–2021	COVID-19 pandemic, lockdowns, NHS strain	Sudden layoffs & fear of job losses.	Isolation, mental health decline. NHS mental health services overwhelmed. Increased strain at home.
Existing issue	Precarious Work Culture (in Construction)	Self-employment via alternative schemes.	Workers pushed outside safety nets.
Existing issue	Drug Use in the Industry	Increased usage as coping mechanism.	Addiction risks & knock-on impact for H&S.



While the first three issues listed in the table, austerity, the housing crisis, and Brexit, were not unique to the construction industry, they unquestionably affected those working within it, as they did the wider population. These national pressures created a difficult backdrop; however, they do not, in isolation, account for the sharp rise in suicides among construction workers between 2015 and 2021.

We have considered COVID-19 *not* because it uniquely impacted the construction industry, but because our analysis of mortality data revealed a pattern closely aligned with suicide trends in the sector. This correlation highlights shared vulnerabilities between both unskilled and skilled workers, one of which is the employment structure known as the Construction Industry Scheme (CIS). *This finding leads directly into the next, final, Section-9, Boxed In.*

Before addressing CIS, we first present our investigation into how construction industry suicide data is being represented by trade, and how certain portrayals have distorted the broader risk landscape.

Issues relating to drug use, which often intersect with mental health and suicide risk, has been examined separately in Section-6, Construction & Drugs.

The ONS Data

In the early stages of our investigation, as is common across much of the wider industry, we encountered the widely circulated suicide tables produced annually by the ONS, which presents ***absolute (raw) numbers*** of suicides by trade. This 2015 table, derived from official records (along with other years), appears to be being utilised as an indication of suicide risk, and in this particular year, the highest-risk group would appear to be the Construction and Building Trades n.e.c., a category we understand is used for skilled workers who may lack formal qualifications. This appeared to corroborate prevailing assumptions that tradespeople operating in an uncertain middle ground, skilled yet less formally recognised, were particularly vulnerable to suicide.

ENGLAND & WALES – 2015 – MALE & FEMALE

Ranking	SOC code	TRADE	Suicide Incidents
1	5319	Construction & building trades n.e.c.	96
2	5316	Carpenters & joiners	45
3	5323	Painters & decorators	45
4	5315	Plumbers & heating & ventilating engineers	31
5	5314	Roofers, roof tilers & slaters	20
6	8159	Construction operatives n.e.c.	19
7	8151	Scaffolders, stagers, & riggers	17
8	5317	Glaziers, window fabricators & fitters	15
9	5321	Plasterers	13
10	5322	Floorers & wall tilers	13
11	5313	Bricklayers & masons	13
12	8152	Road construction operatives	10
13	5249	Electrical & electronic trades n.e.c.	5
14	5311	Steel erectors	4
15	5330	Construction & building trades supervisors	3
16	8153	Rail construction & maintenance operatives	1

Within this table, we identified three trades typically associated with working at height. As discussed throughout this report, the concept of "**Access to Means**" refers to the method chosen by individuals who die by suicide, a choice frequently influenced by the tools, environments, or materials linked to their occupation. For example, in Section-7, we contrasted suicides within the construction industry with those among nurses, who appear more likely to choose drug poisoning, reflecting their access to pharmaceuticals.

From an investigative perspective, the relatively low number of suicides recorded in these height-related trades initially seemed counterintuitive. Drawing on our expertise in suicide and death investigations, we anticipated these occupations to rank considerably higher.

Subsequently, we accessed the **Durham University NOMIS system**, which manages labour market statistics on behalf of the ONS. After obtaining the workforce population size for each cited trade in 2015, we calculated the suicide rate per 100,000 workers to provide a more accurate assessment of the actual risks.

NOTE: We incorporated the female data because the numbers were so low they would not have any statistical impact on the results, but taken alone, they could have created a distorted picture of the actual numbers.

$$\text{Rate per 100,000} = \left(\frac{\text{Number of suicides}}{\text{Workforce size}} \right) \times 100{,}000$$

Amended 2015 table depicting the adjusted data based upon suicide rates…

ENGLAND & WALES – 2015 – MALE & FEMALE

Ranking Movement	Updated Ranking	SOC code	TRADE	Suicide Incidents	Suicide Rate / 100,000
+6	1	8141	Scaffolders, stagers, & riggers	17	55.01
+10	2	8142	Road construction operatives	10	53.19
+2	3	5314	Roofers, roof tilers & slaters	20	47.39
-1	4	5323	Painters & decorators	45	42.77
-4	5	5319	Construction & building trades n.e.c.	95	42.06
+8	6	5311	Steel erectors	4	37.73
+3	7	5322	Floorers & wall tilers	13	35.23
0	8	5317	Glaziers, window fabricators & fitters	15	35.04
0	9	5321	Plasterers	13	33.24
-8	10	5316	Carpenters & joiners	45	22.1
-7	11	5315	Plumbers, heating & ventilating installers / repairers	31	20.9
-1	12	5313	Bricklayers	13	20.18
-7	13	8149	Construction operatives n.e.c.	19	19.38
+2	14	8153	Rail construction & maintenance operatives	1	8.69
-2	15	5249	Electrical & electronic trades n.e.c.	5	6.84
-1	16	5330	Construction & building trades supervisors	3	5.95

In the adjusted table, occupations involving work at height have moved up the table, with scaffolders occupying the top position, depicting the highest risk trade, in terms of suicide. We then replicated this analysis for the years 2016 to 2021, to determine any significant patterns…

	2016	
1	Scaffolders, stagers, & riggers	86.36
2	Plasterers	42.98
3	Glaziers, window fabricators & fitters	35.51
4	Construction & building trades n.e.c.	33.73
5	Painters & Decorators	33.64
6	Steel erectors	31.91
7	Bricklayers	31.74
8	Carpenters & joiners	27.44
9	Construction operatives n.e.c.	27.28
10	Roofers, roof tilers & slaters	26.84
11	Plumbers, heating & ventilating installers / repairers	19.19
12	Electrical and electronic trades n.e.c.	15.66
13	Floorers and wall tilers	14.7
14	Road construction operatives	6.09
15	Construction and building trades supervisors	6
16	Rail construction & maintenance operatives	0

	2017	
	Scaffolders, stagers, & riggers	73.8
	Steel erectors	54.05
	Plasterers	49.07
	Roofers, roof tilers and slaters	45.25
	Painters & Decorators	44.05
	Glaziers, window fabricators and fitters	34.28
	Construction and building trades n.e.c.	31.02
	Construction operatives n.e.c.	28
	Bricklayers	23.46
	Carpenters and joiners	23.04
	Rail construction and maintenance operatives	22.72
	Floorers and wall tilers	22.15
	Plumbers and heating and ventilating installers and repairers	16.66
	Electrical and electronic trades n.e.c.	11.88
	Road construction operatives	6.06
	Construction and building trades supervisors	1.89

The first thing we noticed is that across 2016 and 2017, scaffolders maintained the top position. Steel erectors and roofers also moved up in 2017…

To build an accurate picture of suicide within the construction industry, we need real stories. That is why we are inviting participation in the Stage 2 Investigation; an anonymous survey open to anyone with insights into lives lost or saved. The findings will be made publicly available to support the development of more effective intervention strategies and targeted policies.

	2018		2019	
1	Scaffolders, stagers, & riggers	68.96	Scaffolders, stagers, & riggers	73.77
2	Steel erectors	55.55	Roofers, roof tilers & slaters	66.03
3	Roofers, roof tilers & slaters	53.52	Road construction operatives	64.17
4	Construction & building trades n.e.c.	43.67	Bricklayers	54.28
5	Plasterers	37.36	Plasterers	45.78
6	Painters & decorators	34.2	Painters decorators	41.2
7	Carpenters & joiners	33.36	Construction building trades n.e.c.	40.83
8	Construction operatives n.e.c.	29.98	Glaziers, window fabricators fitters	39.26
9	Bricklayers	29.7	Carpenters joiners	26.55
10	Plumbers, heating & ventilating installers / repairers	25.73	Construction operatives n.e.c.	26
11	Rail construction & maintenance operatives	22.72	Rail construction maintenance operatives	25.31
12	Floorers & wall tilers	21.05	Plumbers, heating & ventilating installers / repairers	22.69
13	Glaziers, window fabricators fitters	18.18	Floorers & wall tilers	22.38
14	Road construction operatives	10.05	Steel erectors	16.66
15	Electrical & electronic trades n.e.c.	7.68	Electrical & electronic trades n.e.c.	7.22
16	Construction & building trades supervisors	5.96	Construction & building trades supervisors	1.73

2020		
1	Scaffolders, stagers, & riggers	175.43
2	Roofers, roof tilers & slaters	66.51
3	Floorers & wall tilers	49.54
4	Road construction operatives	41.95
5	Construction & building trades n.e.c.	41.57
6	Painters & decorators	39.17
7	Glaziers, window fabricators & fitters	37.97
8	Plasterers	35.94
9	Carpenters & joiners	34.59
10	Bricklayers	34.36
11	Construction operatives n.e.c.	27.55
12	Plumbers, heating, & ventilating installers / repairers	22.39
13	Rail construction & maintenance operatives	18.01
14	Electrical & electronic trades n.e.c.	17.86
15	Construction & building trades supervisors	2.12
16	Steel erectors	0

2021	
Roofers, roof tilers and slaters	111.88
Scaffolders, stagers, & riggers	95
Plasterers	58.11
Road construction operatives	51.81
Glaziers, window fabricators & fitters	50.35
Steel erectors	50
Painters & decorators	45.56
Bricklayers	38.52
Construction & building trades n.e.c.	36.42
Carpenters & joiners	35.3
Construction operatives n.e.c.	25.28
Floorers & wall tilers	21.27
Rail construction & maintenance operatives	19.6
Plumbers & heating & ventilating installers / repairers	18.93
Electrical & electronic trades n.e.c.	14.46
Construction & building trades supervisors	2.1

In this 2021 (*Suicide Rate*) table, it is evident that Roofers and Scaffolders retain the top two positions within the adjusted datasets, while Steel Erectors have climbed 10 positions up the rankings.

This (*Steel Erector's*) increase is likely attributable to the rise in suicides from 2020 (0~4); and would likely have risen further had the workforce size not expanded in 2021, which rose from 4,300 in 2020 to 8,000 in 2021, thereby diluting the rate.

2020 also saw major job losses across the UK Construction Industry which may have resulted in an increase in 2021 suicides.

At the beginning of this section, we made mention of the construction industry suicide rates rising steeply between 2015 and 2021, which we have now reproduced. Given that scaffolders and roofers, and to some extent steel erectors, are consistently found within the top spots, we wanted to review the data as one set, from 2015 to 2021.

2015 ~ 2021		
1	Scaffolders, stagers, & riggers	80.93
2	Roofers, roof tilers & slaters	56.81
3	Plasterers	45
4	Painters & decorators	39.9
5	Construction & building trades n.e.c.	38.37
6	Steel erectors	37.18
7	Glaziers, window fabricators & fitters	34.69
8	Bricklayers	33.09
9	Road construction operatives	29.86
10	Carpenters & joiners	28.75
11	Construction operatives n.e.c.	26.22
12	Floorers & wall tilers	26.2
13	Plumbers, heating & ventilating installers / repairers	20.97
14	Rail construction & maintenance operatives	19.01
15	Electrical & electronic trades n.e.c.	12.53
16	Construction & building trades supervisors	3.09

Whilst Road Construction Operatives have appeared within the top positions across this 7year period, they have not been as consistent as trades such as Scaffolders & Roofers, and as such, in the group analysis for 2015 / 2021, they positioned 9th.

However, the presence is a concerning one, and those involved in this industry should desire an explanation.

Given the grouped findings across the years (2015~2021), we felt we needed to **extend the analysis** to include the latest available data.

It should be noted that the following 2022, 2023, and 2024 tables have been calculated using the "absolute" annual suicide data published by the ONS. However, workforce population data from the NOMIS system is currently only available up to 2021 (up to the time of writing this report – August 2025). Workforce data is available from the CITB, but this is UK wide and as such we did not feel we could use it with suicide data limited to **England and Wales**.

Whilst we considered using projected workforce figures from CITB Workforce Outlook publications, these produced risk scores that appeared disproportionately high. Given that workforce size fluctuations within the trades examined have remained relatively stable since 2011, we concluded that the most accurate assessment would be achieved by applying the **2021 NOMIS workforce employment data** to each of the three years to be analysed. These figures can be reviewed and updated once new NOMIS data becomes available.

2022		
1	Steel erectors	87.5
2	Roofers, roof tilers & slaters	80.41
3	Scaffolders, stagers, & riggers	75
4	Road construction operatives	56.99
5	Painters & decorators	51.89
6	Glaziers, window fabricators & fitters	46.76
7	Plasterers	46
8	Floorers & wall tilers	39.51
9	Construction operatives n.e.c.	36.66
10	Construction & building trades n.e.c.	35.93
11	Carpenters & joiners	32.54
12	Bricklayers	31.82
13	Plumbers, heating, & ventilating installers / repairers	28.4
14	Rail construction & maintenance operatives	19.6
15	Electrical & electronic trades n.e.c.	16.52
16	Construction & buildings trades supervisors	2.1

2023		
	Scaffolders, stagers, & riggers	110
	Roofers, roof tilers & slaters	97.9
	Steel erectors	62.5
	Plasterers	48.42
	Painters & decorators	48.1
	Road construction operatives	46.63
	Construction & building trades n.e.c.	46.13
	Carpenters & joiners	41.91
	Rail construction & maintenance operatives	39.21
	Bricklayers	38.52
	Glaziers, window fabricators & fitters	35.97
	Floorers & wall tilers	33.43
	Construction operatives n.e.c.	32.86
	Plumbers, heating & ventilating installers / repairers	32.77
	Electrical & electronic trades n.e.c.	10.33
	Construction & building trades supervisors	8.42

2024		
1	Scaffolders, stagers, & riggers	150
2	Roofers, roof tilers & slaters	132.86
3	Rail construction & maintenance operatives	78.43
4	Plasterers	60.53
5	Painters & decorators	53.16
6	Floorers & wall tilers	51.67
7	Steel erectors	50
8	Construction & building trades n.e.c.	49.53
9	Bricklayers	46.9
10	Carpenters & joiners	39.71
11	Road construction operatives	36.26
12	Plumbers, heating & ventilating installers / repairers	30.58
13	Construction operatives n.e.c.	30.34
14	Construction & building trades supervisors	14.73
15	Glaziers, window fabricators & fitters	14.38
16	Electrical and electronic trades n.e.c.	6.19

Across the additional three years (2022/2023/2024) we see the same pattern of Scaffolders and Roofers, and to some extent, Steel Erectors, with Road Construction Operatives finishing 4th, 6th, and 11th.

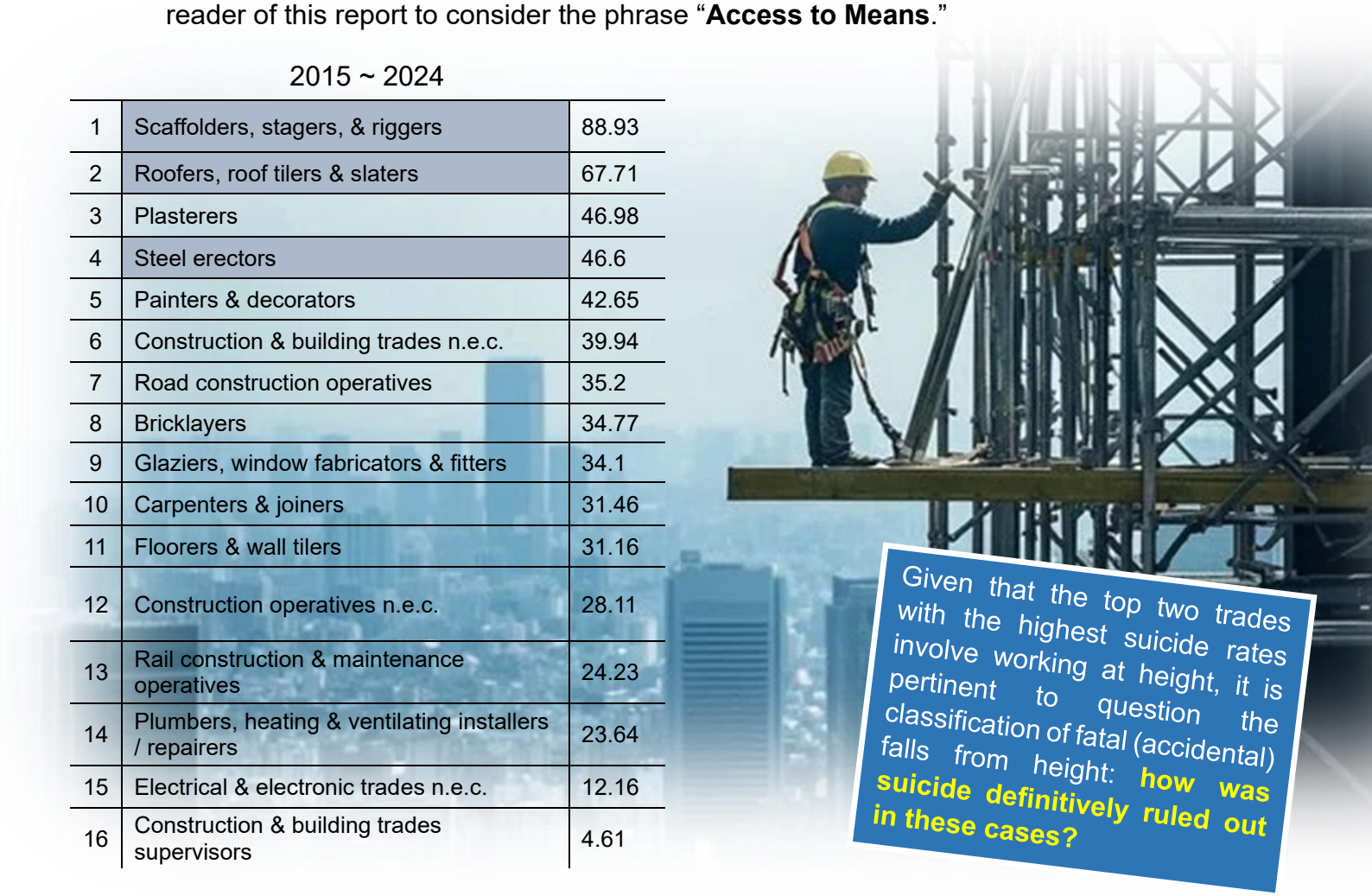
Finally, we decided to further extend the broader 2015 / 2021 **group analysis** to include the 3years to 2024…

Here we present this final data set which confirms that the higher risks of suicides within the 16 trades we have analysed are with Scaffolders, stagers, and riggers; and Roofers, roof tilers, and slaters. Steel erectors, whilst carrying a slightly lower risk, should be monitored.

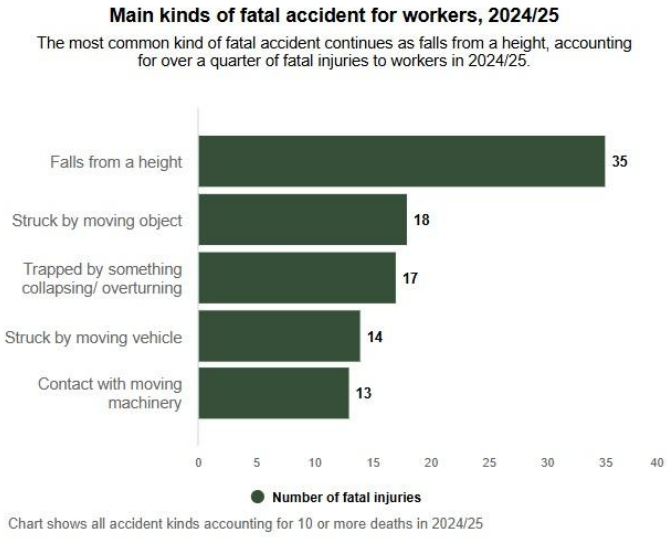
Notable about these trades is that they require working from height, and we remind the reader of this report to consider the phrase "**Access to Means**."

2015 ~ 2024

1	Scaffolders, stagers, & riggers	88.93
2	Roofers, roof tilers & slaters	67.71
3	Plasterers	46.98
4	Steel erectors	46.6
5	Painters & decorators	42.65
6	Construction & building trades n.e.c.	39.94
7	Road construction operatives	35.2
8	Bricklayers	34.77
9	Glaziers, window fabricators & fitters	34.1
10	Carpenters & joiners	31.46
11	Floorers & wall tilers	31.16
12	Construction operatives n.e.c.	28.11
13	Rail construction & maintenance operatives	24.23
14	Plumbers, heating & ventilating installers / repairers	23.64
15	Electrical & electronic trades n.e.c.	12.16
16	Construction & building trades supervisors	4.61



Given that the top two trades with the highest suicide rates involve working at height, it is pertinent to question the classification of fatal (accidental) falls from height: **how was suicide definitively ruled out in these cases?**



On **12th August 2025** (6:00pm) we sent a Freedom of Information request to the HSE regarding the table shown to the left.

1. Does this table refer to Construction Industry Falls - or all falls?
2. If "all falls," how many fatal falls were recorded within the construction industry?
3. What regions of the country did the construction industry fatal falls occur?
4. Is suicide considered in such incidents, and if so, how was it definitively ruled out in these cases?
5. Were toxicology tests conducted on the deceased individuals?

UPDATE: 3RD February 2026: There has been no response from the HSE, but please see the update to this investigation on page 22.

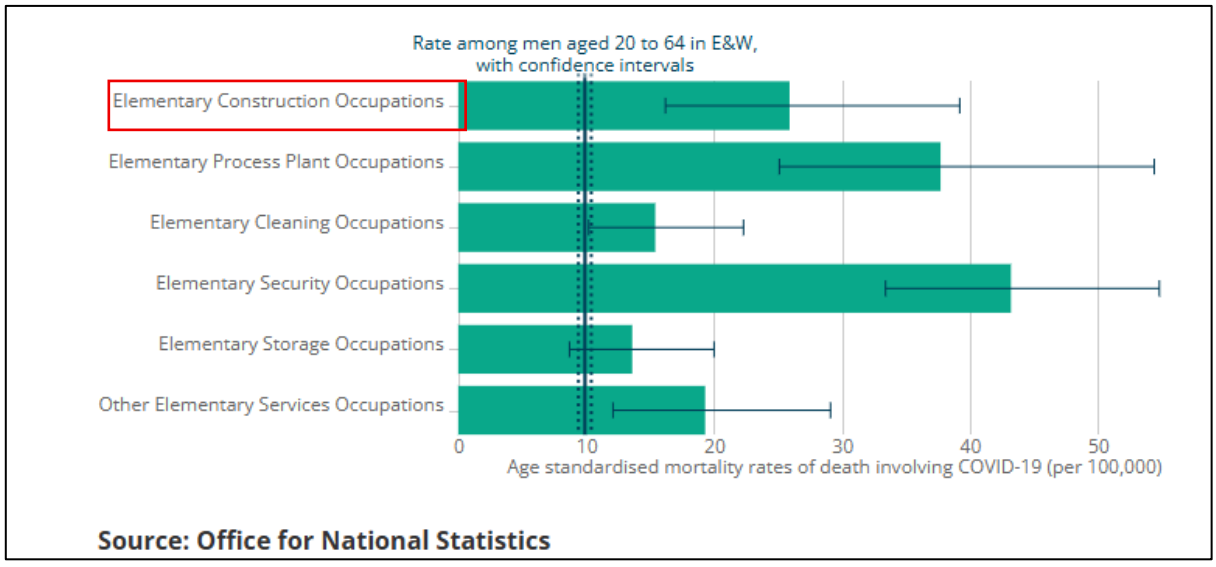
The Impact of COVID-19

Having corrected for workforce size, our suicide risk tables now placed skilled trades, rather than unskilled labourers, at the top. However, when we looked beyond suicide data and examined other health outcomes, a different but related vulnerability pattern emerged.

During the COVID-19 pandemic, ONS figures showed that Elementary Construction Occupations experienced the highest male death rate across the sector, at 25.9 deaths per 100,000 males aged 20–64. This pattern appears to confirm the intuitive assumption that those in the most physically exposed and **economically precarious situations felt compelled to continue working through the crisis**, increasing their personal (*and familial*) risks.

COVID-19 PANDEMIC – (England & Wales Data)

COVID Deaths: Elementary Construction Occupations



Source: Office for National Statistics

Whilst this mortality data does not align directly with the adjusted suicide rankings, it does highlight that **unskilled workers face acute risks of a different kind**. The overlap in vulnerability, whether to disease or to suicidal ideation, might point to systemic, cultural, and or economic pressures that can manifest in multiple harmful ways.

Our review indicates that the construction trades can display a cluster of recurring vulnerabilities which appear to be shared across skilled and unskilled workers, which may help explain why certain groups in the industry remain persistently vulnerable to both physical illness and mental health crises.

Shared Vulnerabilities	Human Impact
Economic Insecurity	• Lack financial buffers to CIS or short-term contracts. • Live paycheck to paycheck, vulnerable to health & economic shocks (e.g., missed days due to illness, sudden layoffs). • **Fear of income loss - may have continued working despite COVID risks.**
Lack of Autonomy & Support	• Limited control over work conditions / protections, leading to higher stress. • Lack access to occupational health support, unions, or HR structures. • Low engagement with mental health resources.
Isolation & Stigma	• Some roles are physically isolating, with workers often operating alone or in small, disconnected teams. • Hyper-masculine cultures - mental health discussion stigmatised. • Workers may suppress problems until they reach crisis point.
Education & Literacy Gaps	• Lower levels of education may impact health literacy, meaning workers are less likely to understand, trust, or access health and mental health support. • During COVID, this could have meant misunderstanding safety protocols or vaccine guidance.
Exposure to Hazardous Work & Living Conditions	• Physically demanding or high-risk environments (e.g., demolition, height work) can take a heavy toll on health. • Living in shared or crowded housing, increased both virus transmission risk and the potential for social stress.
Delayed or Denied Care	• Skilled or unskilled workers may delay seeking medical help, (COVID or mental health), due to fear of losing work, cost, or stigma.

By July 2020, according to a report in the New Civil Engineer, the UK construction industry had laid off some 7,000 workers, *with more to come*.

Firm	Job losses	Firm	Job losses
Arup	350	Gardiner & Theobald	70
Atkins	280	Ibstock	375
Bam	150	Keltbray	300
BDP	70	Mace	300
Beard	35	Osborne	75
Cemex (South Ferriby cement plant)	110	Rider Levett Bucknall	45
Coleman	50	Sisk	60
Crest Nicholson	130	T Clarke	80
Cundall	40	Travis Perkins	2,500
Esh Group	67	Wates	300
Forterra	225	Willmott Dixon	100

New Civil Engineer – July 2020

This table excludes the then expected job losses to be announced by Bam, Kier, and Mace.

The New Civil Engineer report perhaps should have made a distinction between job losses of those working within the Construction Industry Scheme (CIS), and those who were fully employed. This distinction is important because the potential outcomes of mass layoffs could have negatively impacted the most vulnerable…

Relevance	**CIS**	**FULL TIME EMPLOYEE**
Employment Status Exposure	Typically, self-employed subcontractors; losing a contract *terminates all their income*.	Might be furloughed under the government's job retention schemes, preserving some earnings.
Economic Resilience	Left to navigate financial hardship independently.	Benefited from furlough support.
Sector Complexity	Construction companies use a mix of CIS subcontractors and directly employed staff. Job losses could therefore have hit one group disproportionately, but overall numbers likely mix both.	

The CIS system and the misclassified self-employment trend are often cited as being causal in construction industry suicides. Therefore, should we have expected a sharp rise in suicides with such large-scale layoffs?

The substantial job losses recorded across multiple construction trades during the COVID-19 pandemic inevitably placed additional financial, social, and psychological pressures on affected workers.

For many, the sudden loss of income was compounded by uncertainty over the timing and availability of new contracts, alongside reduced access to support networks due to lockdown restrictions.

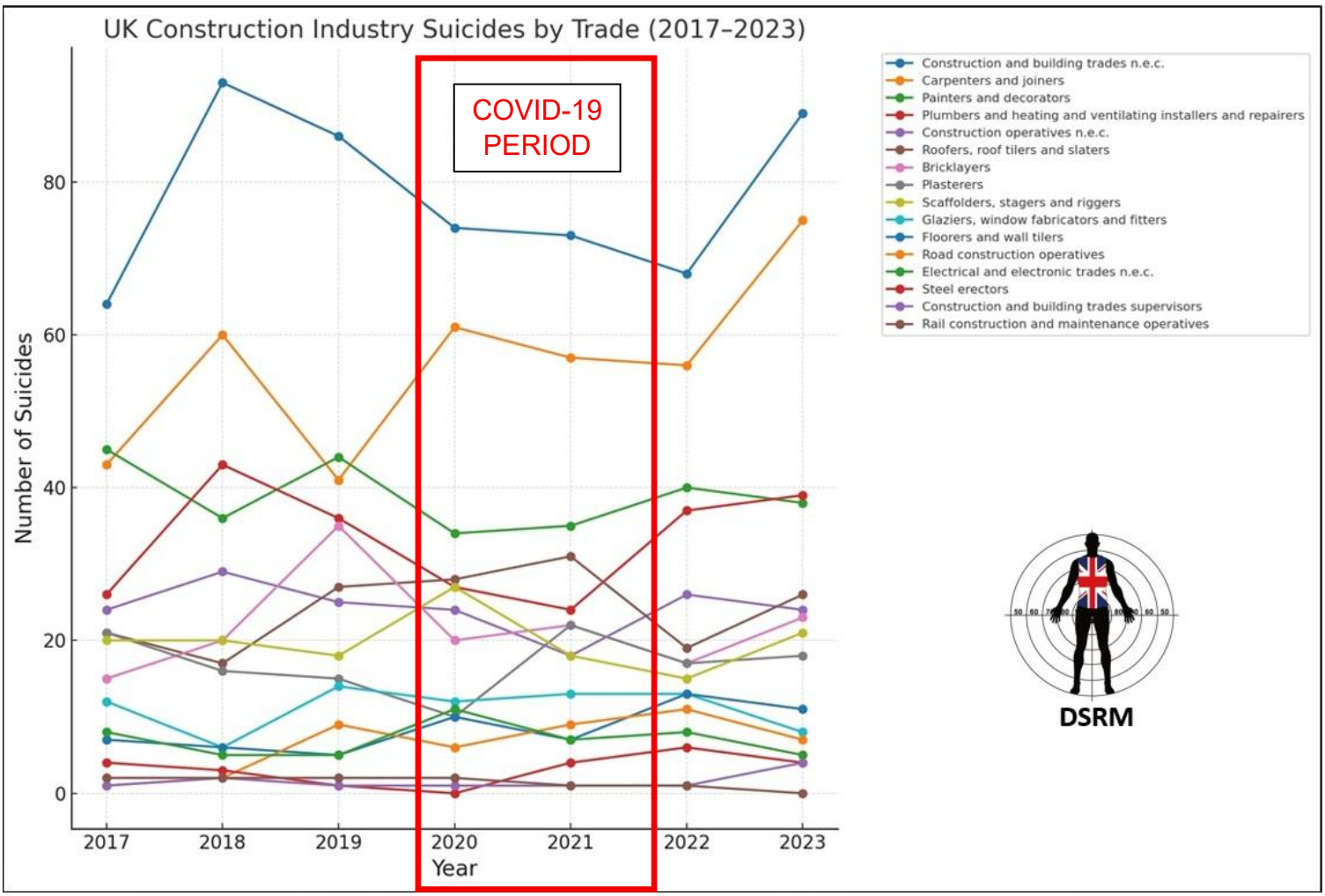
These conditions are recognised risk factors for mental health decline and, in some cases, suicidal behaviour. While the following chart presents the raw number of suicides per trade (*not rates adjusted for workforce size*), it allows us to explore whether the disruption in employment patterns coincided with notable changes in the numbers of suicides across the trades most affected.

We noted both spikes, and drops, which coincided with the COVID-19 job losses of 2020-2021

Significant Rises (≥ 20% increase)	
Roofers, roof tilers & slaters	→ Jumped **63%** from 2020 (28) to 2021 (31), *despite overall workforce reductions.*
Bricklayers	→ Rose **75%** from 2019 (20) to 2020 (35), then dropped again by 2021.
Plasterers	→ Increased **50%** from 2019 (15) to 2020 (22).
Scaffolders, stagers, & riggers	→ Rose **50%** from 2020 (18) to 2021 (27).
Electrical & electronic trades n.e.c.	→ Increased **57%** from 2019 (7) to 2020 (11).
Floorers & wall tilers	→ Increased **43%** from 2019 (7) to 2020 (10).

Significant Falls (≤ −20% decrease)	
Plasterers	→ Dropped **−54%** from 2020 (22) to 2021 (10).
Construction operatives n.e.c.	→ Fell **−31%** from 2020 (24) to 2021 (18).
Steel erectors	→ Fell sharply from 2020 (4) to 2021 (0).
Road construction operatives	→ Dropped **−33%** from 2020 (9) to 2021 (6).

We have visualised this COVID-19 period suicide data with a graph you can view on the next page…



Did COVID-19 Impact Construction Industry Suicides?

Although the COVID-19 pandemic brought significant disruption to the construction workforce, suicide numbers in the years immediately before the pandemic were not dramatically lower than those recorded during or after it. In fact, some trades experienced a drop in suicides during the main COVID layoff period, suggesting that the pandemic was not a singular causation factor. Instead, it appears more likely to have acted as an intensifier, the "final straw" for individuals already under strain from long-standing pressures within the industry, and or *existing issues outside it*.

What were other industry sources saying?

At the time, several industry voices highlighted the sharp increase in suicides among construction workers during the pandemic. The Lighthouse Club, citing ONS data, noted 507 construction-occupation suicides in 2021, a rise of 24 from 2020 and the highest per-employment rate on record (*Lighthouse Charity*). Similarly, Mates in Mind emphasised elevated suicide risk (3.7× the national average in 2020), pointing to pandemic-related pressures such as isolation and job insecurity.

Did these observations match official records?

However, contemporaneous public-health analysis and ONS data suggest the broader national suicide rate did *not* rise during the first lockdown. Registered suicide counts between April and July 2020 were actually lower than the same period in previous years (*Office for National Statistics*), and real-time surveillance data research published by *The Lancet* found no statistically significant increase in suicides post-lockdown.

Did the DSRM investigation findings support either of the two opinions?

We approached this question as two distinct investigations,

- first into the raw suicide data for the construction sector
- and then into the recalculated suicide rates by trade

Both analyses produced consistent findings: no clear pandemic-era surge was evident, and in some trades, numbers even fell during the main layoff period, as shown in the above chart.

Together, these observations reinforce that while the pandemic likely intensified underlying vulnerabilities for some workers, it did not appear to trigger a universal, immediate spike in suicide rates across the sector.

This led us to a major question…

If the COVID-19 period, which saw large-scale layoffs, prolonged site closures, and severe disruption to earnings, did not produce a rise in suicides in the UK construction industry (in either raw counts or recalculated trade-specific rates), how can we reconcile this with the long-standing claim that CIS payment structures, misclassified self-employment, and job insecurity are primary causal factors in construction suicides?

Our dual investigations…

- first into the raw suicide data,
- and later into suicide rates by trade

…found no universal pandemic-era surge. In fact, some trades recorded notable declines during the peak layoff months.

If CIS-related insecurity were the dominant driver of suicide risk, the unprecedented instability of 2020–21 should have triggered a sharp and broad-based rise. It did not.

This does not erase the potential harm commonly spoken of about misclassified self-employment and insecure payment systems, but it does force a reassessment. The prevailing advocacy position may have overstated their direct causality, focusing campaign efforts on a single structural target while neglecting other critical risk vectors.

The evidence now suggests that suicide in construction is the result of a more complex web: long-term industry pressures, cumulative mental health strain, cultural factors, and personal vulnerability.

The pandemic data makes clear that if we want to reduce suicides within the construction industry, we cannot afford to keep campaigning on the wrong issue.

Section Conclusion

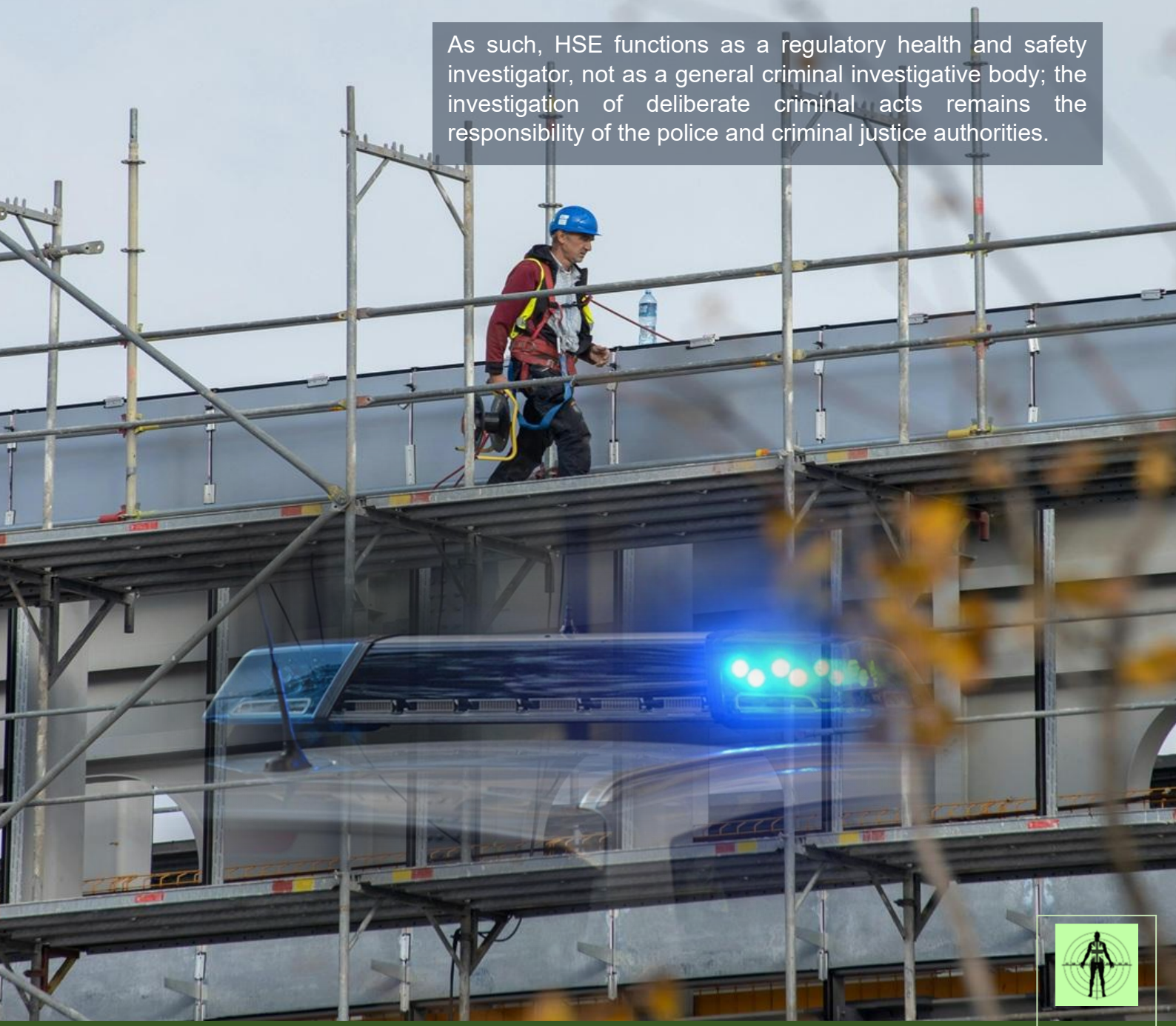
The absence of a pandemic-era spike in suicides, even under the stress of mass layoffs and site closures, suggests that systems like the Construction Industry Scheme (CIS) and misclassified self-employment may not be exerting the acute influence on suicide trends that has often been assumed.

However, these structures continue to shape the day-to-day realities of the workforce and, in some cases, can place workers in difficult, restrictive situations that limit their options and strain their resilience. While such pressures may not typically manifest as mental illness, they can leave individuals feeling trapped, a dynamic we explore in the next, Section-9, Boxed In, where we examine how systems like the Construction Industry Scheme and misclassified self-employment can confine workers within narrow, often precarious, choices.

Statutory Basis for HSE Investigation Authority

The Health and Safety Executive's investigatory powers are derived from section 14 of the Health and Safety at Work etc. Act 1974, which enables the Executive to investigate "any accident, occurrence, situation or other matter whatsoever" where this is necessary to further the purposes of health and safety regulation. This authority is framed around work-related safety outcomes, including the identification of risk, systemic failure, and preventable harm.

As such, HSE functions as a regulatory health and safety investigator, not as a general criminal investigative body; the investigation of deliberate criminal acts remains the responsibility of the police and criminal justice authorities.



Implications for Incidents Involving Suicide

The investigatory remit of the Health and Safety Executive, as established under section 14 of the Health and Safety at Work etc. Act 1974, is framed around the investigation of accidents, occurrences, situations, or other matters insofar as such investigation serves the general purposes of health and safety regulation. This statutory framework is directed toward identifying failures in risk management, unsafe conditions, or systemic deficiencies arising from work activities.

Suicide does not fall naturally within this framework. In law, suicide is not an accident, as it is not an *unintended* event, and since the decriminalisation of suicide in England and Wales by the Suicide Act 1961, *it is not a criminal offence*.

As a result, incidents involving suicide do not readily engage either the criminal investigative jurisdiction of the police (beyond confirmation of non-suspicious circumstances) or the regulatory investigative remit of the HSE, unless there is clear evidence of a work-related health and safety breach contributing to the death.

Therefore, such incidents may fall into an investigatory gap, whereby no authority is tasked with conducting a substantive examination of the human, organisational or contextual factors surrounding the death. In the absence of a defined regulatory or criminal pathway, these incidents may be administratively recorded as accidents or non-suspicious deaths, despite the absence of an accident mechanism and without a proportionate investigation into causation, contributory factors, or preventability.

This structural limitation risks the loss of critical learning, obscures the human context of the incident, and may lead to the mischaracterisation of the event within safety records, thereby undermining both accurate reporting and meaningful prevention.

Implications for Duty holders and Industry Reporting
A Governance Gap

This governance gap also presents a material risk to duty holders. In circumstances where a death by suicide occurs at or in connection with a workplace, organisations may be required to submit a RIDDOR report despite there being no identifiable breach of health and safety law, no accident mechanism, and no failure of duty of care.

While such reporting is undertaken in good faith and in compliance with regulatory expectations, the resulting classification can create a misleading impression of organisational culpability or safety failure where none exists.

This risk is not attributable to shortcomings within the industry itself. Rather, it reflects broader societal trends, including a documented increase in incidents of suicide across the country, extending well beyond the construction sector.

As these incidents increasingly intersect with workplaces by circumstance rather than causation, the absence of a clear investigative or classification framework becomes more pronounced.

Without a proportionate mechanism to distinguish between accidental harm, regulatory failure and non-accidental death, organisations may be exposed to unwarranted reputational, legal, and commercial consequences, while the underlying human and societal factors remain insufficiently examined.

Investigation Stage 2 / Stage 3 - We Request Your Support

Roadmap of the Investigation

Stage 1 – Desk-Based Investigation

Analysis of existing literature, statistics, international models, cultural influences, and industry narratives. (*This document*.)

Stage 2 – Survey of Experiences

In an online survey we are asking you to promote across the sector, designed to capture personal testimonies: what contributed to lives lost, and what brought others back from the brink. https://www.dsrmrisk.com/survey

Stage 3 – Industry Collaboration

Structured dialogues with construction firms, unions, and industry bodies to explore their views on root causes and the adequacy of current responses. We invite your input, thoughts, ideas, and what you see as solutions…***just a few lines*** –

"*What do you think is the problem?*" (This phase is currently running in parallel with Stage 2)

Please send your thoughts to: contact@dsrmrisk.com (Anonymous is Okay)

Stage 4 – Expanded Data

Incorporation of data from Scotland and Northern Ireland (*not currently included in official ONS reporting*), alongside further refinement of UK-wide analysis.

Together, these stages aim to provide both evidence and lived experience, enabling a clearer understanding of risk and more effective prevention strategies.

Stage 4 will be the Final Crane Report.