

# The Crane Report



## THE MACHO CULTURE – CULTURAL SOFTENING

### ABSTRACT

This section examines the persistence of a “macho” culture within the construction industry and its potential contribution to elevated male suicide rates. While cultural norms have often been blamed for discouraging men from speaking openly, a deeper barrier may lie in the terminology itself: the phrase “mental health” carries derogatory connotations for many older workers, who may reject support framed in those terms, while still acknowledging stress or strain. This language gap risks limiting engagement with otherwise well-intentioned initiatives. At the same time, evidence suggests culture alone cannot explain suicide risk. The entry of women into construction has not produced a corresponding rise in female suicides, and Nordic countries that have pursued cultural “softening” from the 1970s still report heightened suicide among construction workers. Similar patterns appear in female-dominated professions such as nursing. Taken together, the findings suggest that while cultural framing and language shape how support is received, the deeper drivers of suicide lie in structural and occupational pressures.

Anthony Hegarty MSc

DSRM Risk & Crisis Management

© 2025 Anthony Hegarty / DSRM. All rights reserved.

No part of this publication may be reproduced, distributed, or transmitted in any form or by any means, including photocopying, recording, or other electronic or mechanical methods, without the prior written permission of the copyright owner, except in the case of brief quotations embodied in critical reviews or scholarly articles.

## Section 7 – The Macho Culture – Cultural Softening

- Is the hyper-masculine culture really a contributing factor in construction industry suicides?
- Why the Hyper-Masculine Culture Exists?
- Can Construction Be Done Without Macho?
- Macho in the Nordics
  - Stop the Macho Culture Initiative
- Elevated Suicide Rates Among Swedish Construction Workers
  - The Gothenburg university study
- Workplace Culture or Work?
  - Suicide by Female Nurses
  - Nurses & Construction Workers – Suicide
- The Unintended Consequences of Cultural Reform in Construction
- The Reforming of the Police
- Cultural Softening Initiatives
- Alienation by Well-Meaning Systems







The Macho Culture in the Construction Industry.

Is the hyper-masculine culture really a contributing factor in construction industry suicides (will a process of “cultural softening” fix things)?

Much emphasis has been placed upon the suggestion that the macho, hyper-masculine culture that apparently exists within the construction industry is contributing to the higher rates of suicide.

To explore this, we needed to understand how such a culture came to define the industry in the first place.



WARNING  
Men  
At  
Work







## Why the Hyper-Masculine Culture Exists

The construction industry has, historically, involved:

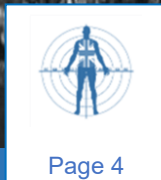
- Manual labour, high physical risk, and danger
- Work that often rewards toughness, stoicism, and hierarchy
- Transient crews and freelance work that discourage vulnerability or community
- A culture built over generations of male dominance, where “showing weakness” could cost respect or even employment

That culture did not happen by accident; it grew around the real risks and pressures of the work.

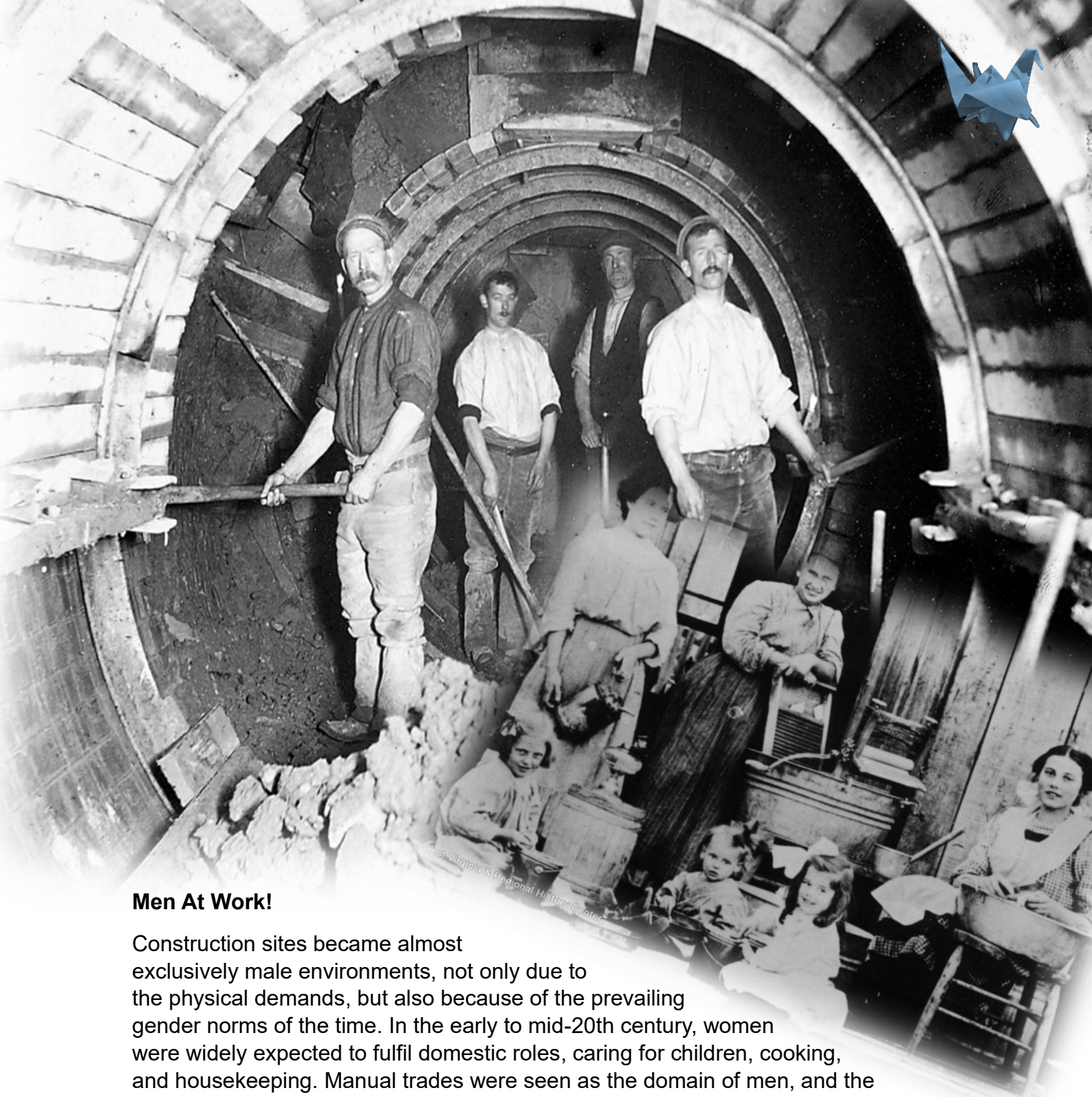
## The Historical Roots of Hyper-Masculinity in Construction

The construction industry’s masculine identity is deeply rooted in its historical reliance on sheer physical labour. Before the widespread use of mechanisation, most construction work was carried out manually using basic tools. Digging trenches meant swinging pick-axes and shovels; lifting heavy materials required brute strength, assisted only by simple block-and-tackle systems or hand winches. Shifting earth or stone involved physical force and rudimentary equipment such as wheelbarrows. In those conditions, strength was not merely helpful, it was essential.

This level of physical exertion created an informal entry barrier: only the strongest could manage the work, and resilience was both a necessity and a source of status.





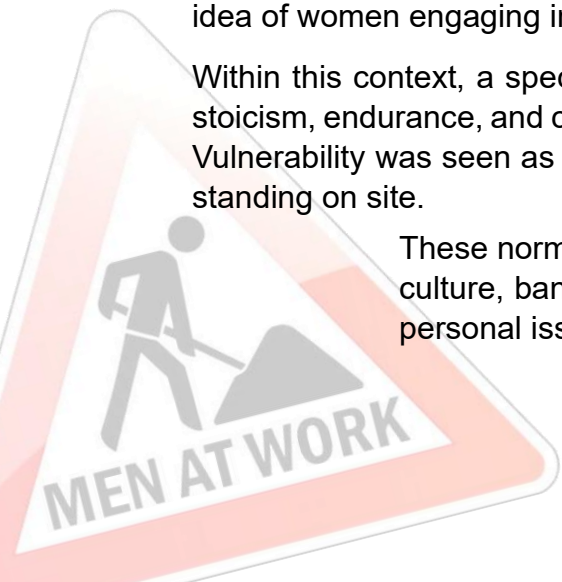


### Men At Work!

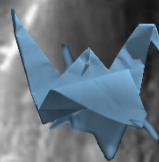
Construction sites became almost exclusively male environments, not only due to the physical demands, but also because of the prevailing gender norms of the time. In the early to mid-20th century, women were widely expected to fulfil domestic roles, caring for children, cooking, and housekeeping. Manual trades were seen as the domain of men, and the idea of women engaging in such labour was largely dismissed or discouraged.

Within this context, a specific version of masculinity took hold: one that valued toughness, stoicism, endurance, and clearly defined hierarchies based on age, strength, and experience. Vulnerability was seen as weakness, and showing weakness could cost a worker his job or standing on site.

These norms were passed down through generations, reinforced through site culture, banter, after-work drinking, and a deeply embedded expectation that personal issues were to be kept private and never discussed on the job.







As late as the 1970s & 1980s, few UK women were employed in construction. The father of the writer of this report often spoke of the harsh winter conditions at the Alfred McAlpine North Wales Dinorwig Power Station site.

Even as the physical demands of the industry began to ease with the introduction of machines, new tools, and improved safety standards, the culture persisted. In many respects, it became part of the industry's identity, lingering long after its original justification had begun to disappear.







## So, Can Construction Be Done Without Macho?

We found that construction companies in the UK (and elsewhere) have been involved in a process of “cultural softening” for some time, with admirable success. These policies have seen an influx of women into the construction industry.

**But have they resulted in fewer suicides?**

We found that the industry appears to have culturally shifted in areas, such as:

More women and diverse leaders:	Supervisory and management roles (which alters group dynamics and softens "alpha" norms).
Structured mental health programmes:	Integrated into safety programmes.
Peer support networks on-site:	Normalised through leadership.
Clear accountability and protections:	Workers feel safe speaking up.
Leadership modelling vulnerability:	Supervisors and foremen encouraged to openly talk about stress, burnout, and therapy.
Changes in apprenticeship training:	Mental health and interpersonal skills built in early.

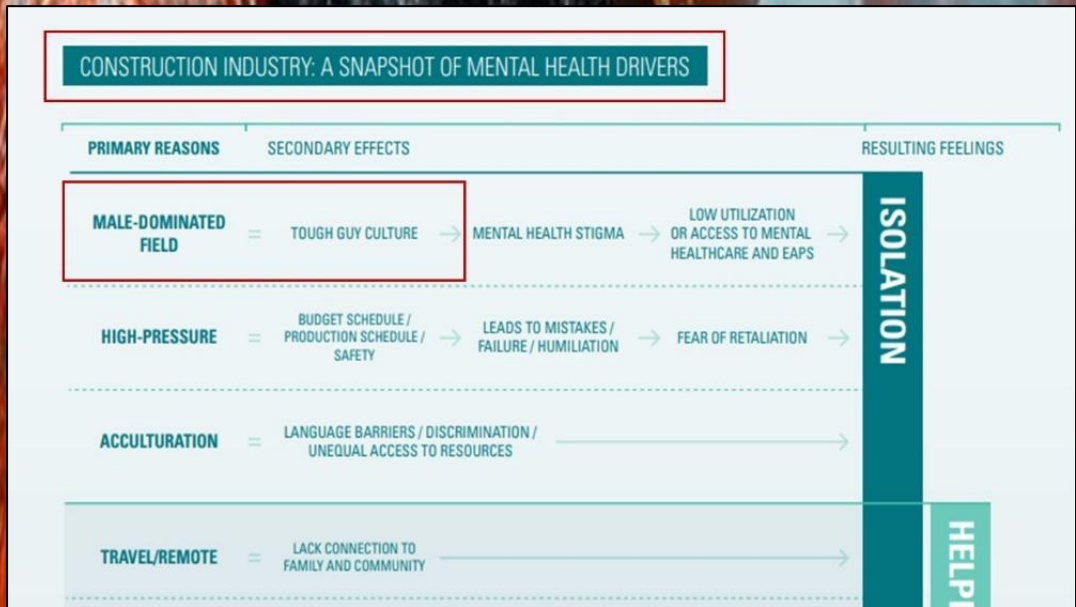






Balfour Beatty US's Zero Harm programme presents the "Tough Guy Culture" as a mental health driver within its Suicide Prevalence in the Construction Industry literature.

But is it accurate?



In the UK, whilst these construction industry cultural changes have been taking place, the parallel suicide rates have been increasing. If we are to accept that the "macho culture" is contributing to the suicide rates, should we not expect those rates to fall as the new culture becomes normalised?

In defence of the (softening) policies, such major changes in culture take time and we must be patient. But as people (predominantly men) in construction are committing suicide daily, is it reasonable to ask for patience?

However, we found that construction industry softening policies have been in effect since at least 1972 in Nordic countries.







## Macho in the Nordics

**We therefore examined Nordic countries** which have a considerable history of such cultural change policies; Denmark and Sweden, where such policies have been employed at least since 1972.

We examined the historic policies of a number of Nordic companies, one of which has a considerable presence in the UK construction landscape.

DK Ramboll (Denmark)	An engineering and design consultancy, became employee-owned in <b>1972</b> . Since then, it has focused on diversity and inclusion.
SE NCC (Sweden)	Major Nordic construction firm. 1 - Stella Network (1998) - to increase female managers. 2 - NCC Job School - support refugee integration & promote gender diversity. 3 - NCC New Start - to diversify language, and sexual orientation. 4 - May 2025, <a href="#">Financial Times named NCC one of Europe's best employers</a> .
DK Scandi Byg (Denmark)	Modular construction company. 1 - Boss Ladies Initiative (Ambassadors) - promote gender diversity in industry. 2 - April 2024, 10% of production team female.
DK STARK Danmark (Denmark)	2021 - Gender Diversity Pledge signatory - 60/40 gender balance by 2030.
SE Beijer Byggmaterial (STARK Group) (Sweden)	2022 - Diversity Charter Sweden signatory.
SE Skanska (Sweden)	2006 - Set a target of 35% women recruits from civil engineering programmes. Exceeded target with 40%, reaching 45% by 2011. 2019 - launched women-only carpenter apprenticeship.

The cited programmes from Sweden and Denmark, date back nearly 50 years, and have aimed to “soften” the industry through gender equity, respectful leadership, and anti-harassment reforms. **But we discovered a 2018 publication** in which senior leaders were still acknowledging the depth of the cultural challenge:

*“Unfortunately, we have problems with a macho culture and sexual harassment in our industry and we need to accept our responsibility for bringing about a change.”*

**Fredrik Johansson, Department Manager, NCC Building, Western Region.**

Published in media release by [NCC Construction](#)





## “Stop the Macho Culture” Initiative:

Mr Johansson’s concerns were despite an existing broader project to bring about change. In response to growing concerns over sexual harassment and broader behavioural issues within Sweden’s construction sector, the “**Stoppa Macho Kulturen**” campaign was launched in 2015 as a joint initiative by Byggcheferna (The Association of Construction Managers) and the union Byggnads. It aimed to challenge outdated norms, educate workers, and promote more respectful, inclusive environments across worksites.



## Thoughts:

---

If the Macho-Culture is contributing to suicides within the construction industry, should we expect to see lower numbers in these Nordic nations?

---

Is it a leading contributor to suicide, or only an issue that is no longer tolerated?

---

While the Nordic countries have clearly been progressive in confronting cultural and behavioural risks, we wanted to determine whether these changes have resulted in a reduction in their suicide rates. We did this by reviewing related published academic research...







## Elevated Suicide Rates Among Swedish Construction Workers – Higher than the UK!

A comprehensive Swedish cohort study published in [BMC Public Health](#) in 2024 analysed data from over 1.5 million men between 2002 and 2019. The study found that **male construction workers had a 50% higher risk of suicidal behaviour** compared to the general male working population. A separate study of 43 Swedish construction workers, found issues such as difficulty in discussing mental health issues, substance abuse, and the stigma surrounding mental health.

Notably, **occupations such as labourers and rock workers** within the construction sector exhibited [hazard ratios of 1.4 and 1.5](#), respectively, indicating a significantly elevated risk...

...“Our [interviews revealed](#) that many workers do not report or seek help when they feel mentally unwell, and that some self-medicate with alcohol and painkillers.”

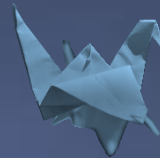
Another [study](#) focusing on 389,132 Swedish construction workers followed from 1987 to 2018 reported 1,618 suicides and 4,774 non-fatal self-harm events. The highest risks were observed among labourers, rock workers, and sheet metal workers.



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.







### Persistent Occupational Disparities in Finland

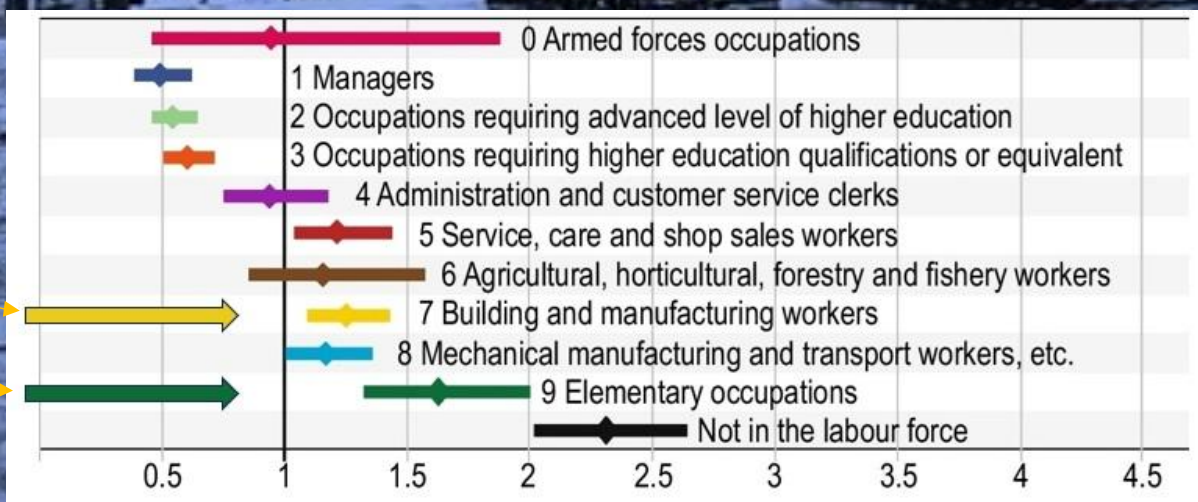
In Finland, a [longitudinal study](#) examining suicide mortality from 1970 to 2019 revealed that manual workers consistently had a 1.6 to 1.8 times higher risk of suicide compared to managers and professionals. Whilst overall suicide rates have declined over the decades, the reduction among manual workers, including those in construction, has been slower and less pronounced.

### Limited Data on Denmark

Specific data on suicide rates among Danish construction workers is limited. However, broader occupational health studies in Denmark indicate that manual labour roles, which include construction, are associated with a significantly higher risk of suicide compared to non-manual professions. This aligns with international / UK trends and reinforces the need for tailored mental health strategies within physically demanding sectors.

### Sweden: Male Construction Workers

A comprehensive [study](#) by the University of Gothenburg, analysing data from over 1.5 million Swedish men between 2002 and 2019, found that risks were highest for Elementary occupations, building and manufacturing workers. *Managers and Occupations requiring advanced level of higher education* had the lowest risks.





The [Gothenburg University study](#) attributes several factors to the heightened suicide risks of construction workers which include:

- **Macho culture and stigmatisation of mental illness:** A workplace atmosphere that discourages open discussions about mental health.
- **Lack of support from management:** Instances where workers' mental health concerns are overlooked or dismissed.

We questioned the accuracy of this opinion given the enormous efforts made across the construction industry over some years, particularly in the UK.

**We also questioned:** If the macho culture of the construction industry is truly the driver of suicides, why are only male workers showing elevated suicide risks, despite increased female participation?

The absence of women in the construction suicide data could be due to various factors:

### 1. Gender Differences in Suicide Patterns

- Regardless of industry, more men die by suicide.
  - 2009-2023 Sweden: [Male suicides more than double female](#)
- Male suicide is influenced by *how* distress is expressed and acted upon, not just *why* it occurs.
- Women are more likely to experience depression or attempt suicide, but men are more likely to use lethal means, leading to higher fatality rates.

### 2. The Hyper-Masculine Culture May Specifically Harm Men

- A culture that discourages emotional vulnerability may disproportionately impact men, especially those conditioned to view help-seeking as a weakness.
- Women entering construction may already be resilient to this culture, or are more likely to seek peer or professional support, or perhaps are not expected to conform as rigidly to its norms.

### 3. Women May Not Be Experiencing the Same Stressors

- Are female recruits subject to the same site stressors such as job insecurity and remote postings?
- What percentage of women occupy frontline labour-intensive roles, as opposed to design, project management, and compliance etc?

### 4. Suicide Data May Lag Behind Demographic Changes

- We must of course be prepared to challenge the data. The [BMC study](#) ran until 2019, so the full mental health impact on a newer more gender diverse workforce may not yet be visible.

### 5. Survivorship Bias in the Industry

- Is the turnover of women higher than that for men?
- Men may feel more pressure to remain due to economic, identity, or cultural reasons.
- Women who remain in the industry may be those with thicker skin and less affected by the challenges.







## Workplace Culture or Work?

We considered whether a clearer explanation may lie, not in workplace culture, but in **the nature of the work itself**. Suicide risk may stem less from how workers express or suppress emotions, and more from the occupational environment, stressors, and access to means. This hypothesis is strengthened when we look beyond construction to other sectors with elevated suicide rates.

**Nursing, for example, is a profession dominated by women and would be perceived as compassionate rather than macho.** Yet despite this, it shows a significantly elevated suicide rate.



## University of Manchester – [Suicide by Female Nurses](#)

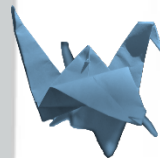
A 2020 study by the University of Manchester found that female nurses in England faced a 23% higher suicide risk than women in other professions, a striking parallel to the pattern seen in male construction workers.

The study also revealed that most female nurses who died by suicide were not in contact with mental health services, and many had experienced workplace stress, substance misuse, or used means to which their profession gave them access.

This suggests that the core risk factors may be structural and occupational rather than cultural or gendered.







## Some key findings of the Nurse Suicide Study... 2020

Elevated Risk Within a Specific Occupation	<ul style="list-style-type: none"> <li>• Female nurses had a <b>23% higher risk</b> of suicide than women in other jobs.</li> <li>• This parallels the increased suicide risk seen in construction workers, particularly labourers and skilled trades.</li> </ul>
Mid-Life Vulnerability	<ul style="list-style-type: none"> <li>• <b>43% of suicides</b> occurred among nurses aged <b>45–54</b>.</li> <li>• Similar trends appear in male construction workers, with a clustering of suicides in mid-to-late working age.</li> </ul>
Low Engagement with Mental Health Services	<ul style="list-style-type: none"> <li>• <b>60% of female nurses who died by suicide had no contact with mental health services</b>.</li> <li>• Suggests a <b>barrier to access</b>, fear of stigma, or a professional culture that discourages help-seeking — all very applicable to construction.</li> </ul>
Self-Poisoning and Access to Means	<ul style="list-style-type: none"> <li>• High rate of <b>self-poisoning (42%)</b>, with drugs like <b>psychotropics, opiates, and paracetamol</b>.</li> <li>• While poisoning is less prevalent in construction suicides, the <b>“access to means” risk</b> (tools, heights, vehicles, etc.) parallels the risk from pharmaceutical access in nursing.</li> </ul>
Workplace and Financial Stressors	<ul style="list-style-type: none"> <li>• <b>18% of nurses had recent work-related problems</b>; higher than other professions.</li> <li>• This is a key mirror to construction, where job insecurity, seasonal work, and injury-related downtime create intense pressure.</li> </ul>
Substance Misuse and Self-Harm Histories	<ul style="list-style-type: none"> <li>• <b>41% alcohol misuse, 20% drug misuse, and 64% history of self-harm</b>.</li> <li>• Similar patterns are reported in construction, where drug and alcohol misuse are prevalent coping mechanisms, often hidden until too late.</li> </ul>

While the 2020 report provided valuable initial insights into suicide among female nurses, we found an updated study published in 2024 by the University of Manchester expanded the scope to include both male and female nurses across a 12-year period. The broader dataset enabled a more robust analysis, confirming many of the original findings while highlighting subtle shifts in some risk patterns...







## University of Manchester Comparative Studies: 2020 / 2024

Overall, the core trends remained consistent: occupational stressors, access to means, and underutilisation of mental health services continue to be key contributors to suicide risk within the nursing profession. The table below offers a direct comparison between the two reports, illustrating how these persistent risk factors mirror those observed in the construction sector.

Notably, the 2024 findings show that both male and female nurses experience elevated suicide risk, despite working in a profession often viewed as empathetic and collaborative rather than macho. This reinforces the argument that the root causes of suicide in high-risk occupations are structural: shaped more by the nature of the work, exposure to risk, and barriers to care, rather than by cultural attitudes alone.

Category	Female Nurses 2020 Report (Period: 2011–2016)	Male & Female Nurses 2024 Report (Period: 2011–2022)	Change / Insight
Elevated Risk Within a Specific Occupation	<ul style="list-style-type: none"> <li>• 281 suicides total, 73% female.</li> <li>• Suicide risk 23% higher than women in other jobs.</li> </ul>	<ul style="list-style-type: none"> <li>• 494 suicides total, 70% female.</li> <li>• Risk remains elevated across female/male nurses.</li> </ul>	Larger dataset confirms sustained occupational risk, now includes male nurses.
Mid-Life Vulnerability	43% of female nurse suicides were aged 45–54.	38% of all nurse suicides were aged 45–54.	Slight drop, but mid-life remains the peak risk period.
Low Engagement with Mental Health Services	60% of female nurses were not in contact with mental health services in the year before death.	56% of all nurses had no contact with mental health services prior to death.	Minor improvement; access remains a major gap.
<b>Self-Poisoning &amp; Access to Means</b>	42% of suicides were via self-poisoning (common drugs: psychotropics, opiates, paracetamol).	41% of suicides via self-poisoning. Same substances prominent.	Consistent pattern. Access to lethal means remains key risk factor.
Workplace & Financial Stressors	18% of nurses had documented work-related problems. Financial issues also noted.	Workplace and financial stressors remain frequently reported (exact % not always stated).	Theme consistent; adds to case for structural rather than cultural risk factors.
Substance Misuse & Self-Harm Histories	<ul style="list-style-type: none"> <li>• Alcohol misuse: 41%.</li> <li>• Drug misuse: 20%.</li> <li>• Self-harm history: 64%.</li> </ul>	<ul style="list-style-type: none"> <li>• Alcohol misuse: 39%.</li> <li>• Drug misuse: 23%.</li> <li>• Self-harm rate not re-stated.</li> </ul>	Minor fluctuation; substance misuse still widespread and relevant.







As seen in the nursing profession, where **access to medications** has shaped suicide method profiles, the construction industry must also consider how visual representations of suicide may impact vulnerable workers with similar environmental exposure.

*It is also noteworthy here that our assessment of suicide data in Section-8, demonstrates that those in construction - working from height, appear to be at the highest risk of suicide.*

This emphasis on access to means aligns with best practice guidance in suicide prevention, which advises against explicitly depicting methods or locations associated with suicide.

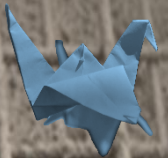
In Section-3 of this report, we referenced a suicide prevention video produced by AKT & BAM that showed a construction worker climbing over a rooftop safety rail, a scene intended to set up a positive intervention.

While clearly well-intentioned, such depictions can inadvertently increase risk by reinforcing familiarity with high-lethality means, especially in professions where such access is routine.





We compared the nursing studies to what we understand about suicides in the construction industry...



### Comparing the Nursing findings with Construction

Nursing Insight	Application to Construction
Access to lethal means: pharmaceuticals as a risk factor	Access to lethal means: tools, machinery, heights, and vehicles
Stigma around seeking help	Cultural similarity: stoicism, “get on with it” mindset in both professions suppresses disclosure.
Workplace stress linked to suicide	Emphasises need to examine employment conditions, especially subcontracting, lack of sick pay, and redundancy threats.
Peak age bracket for suicide (45–54)	Reinforces the need to tailor interventions toward older, long-serving workers, who may hide distress.
High rates of suicide outside mental health contact	Interventions need to go beyond clinical settings. e.g., on-site check-ins, toolbox talks, peer listeners.
Pattern of alcohol/substance misuse	Reinforces the need for education on drugs/alcohol, especially tailored to pain management / off-site use.





## The Unintended Consequences of Cultural Reform in Construction



These findings suggest that, despite cultural reform initiatives aimed at creating more inclusive and supportive work environments, construction workers in the Nordic countries continue to face elevated risks of suicide.

Could this help explain why efforts within the UK construction industry to reduce suicides by the softening process are not showing the desired results?

The softening process is a broadly implemented initiative. But whether it is the solution, or a part solution to the issue of suicides is highly questionable.

However, if we consider again, the demographics of those most at risk; men above the age of 45, who may have been in the industry for several decades, is it possible that there exists generational resistance to change.

The process of “cultural softening,” despite its good intentions, can itself be a source of stress, identity loss, and demoralisation for core members of a workforce who feel disoriented, undervalued, or alienated by the change, leading to stress and anxiety, and the desire to seek out coping mechanisms.

**This is particularly relevant in industries tied to strength, risk, and public service, such as:**

- Construction
- Policing
- The military
- Firefighting

These industries share common values as well as educational attainment levels:

- Grit and endurance
- Mastery of hard physical skills
- Team loyalty built through shared risks
- A no-nonsense, action-oriented mindset







## The Reforming of the Police

When reform initiatives, however well-meaning, begin to reframe the very nature of the work, can it be experienced, not as support, but as a dilution of pride, purpose, and professional identity?

We will note a few observations on one of these other industries here, the police service.

*It is for the reader to form their own views on the effectiveness on policing today.*

- The branding shift from "Police Force" to "Police Service" was symbolic, but powerful.
- Promotion of younger, academically-qualified managers led to a feeling among front-line (mainly working class) officers that experience was devalued.
- The move toward social work roles over crime-fighting alienated officers whose identities were rooted in action and enforcement.
- Many retired early or disengaged, and there were claims that standards slipped.

The police analogy is provided because the softening policies have been highly visible. The impact these policies have had on the "street-level" workforce has been largely negative, and perceived to be more fitting in a metropolitan white-collar office culture, and not at the pit-face of the crime fighting.

### England & Wales Police Voluntary Resignations

- 2012 - 1,158
- 2022 - 3,433
- 2024/25 financial year - 8,795 (6%)

We found research had been conducted by [Portsmouth University](#) School of Criminal Justice which found that "officers are not resigning due to the often challenging and stressful occupational role of being a police officer, but rather because of internal, organisational issues."

"Officers felt that they weren't valued or **even known** by their line manager, and described relationships with their managers as poor and distant."







## Cultural Softening Initiatives

It is essential to consider that initiatives designed to ‘soften’ workplace culture may inadvertently alienate the very individuals they are intended to support. In industries with strong vocational identities, such as construction, policing, and military, rapid cultural change can provoke a sense of loss, confusion, or even betrayal; and cultural displacement.

### Can we say with certainty that...

- Tradesmen’s identities are not being softened or made to feel outdated?
- Narratives do not suggest that masculinity is a “problem,” so they will not be interpreted as criticisms of those who see themselves as the backbone of the industry?
- Senior members of the industry are not made to feel, directly or indirectly, that resisting participation in culture change programmes is no longer welcome?
- Senior workers continue to feel valued by the culture changing industry?



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.





# Lattes & Lagers



We spoke with multiple tradesmen across the UK, Canada, US, and Australia, and there was a general perception that the type of individuals depicted in the above image, were developing policies to fix the personal problems of the type of men depicted in the lower image. One worker commented...

*"I don't care about these modern-day inclusion ideas, but I do care about being judged by people who hadn't done my job, and didn't know my story."*

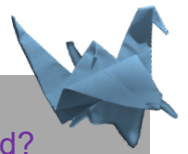


...Officers felt that they weren't valued or *even known* by their line manager, and described relationships with their managers as poor and distant...

*(Police analogy from previous page)*







## Alienation by Well-Meaning Systems

### Have the modern softening changes been well-implemented?

Many of the cultural reforms in policing, the military, and now construction, whether around inclusion, anti-racism, or mental health, are designed and implemented by people who unlikely share the background or lived experience of the target group.

The university-educated, HR-certified psychologist, no matter how well-meaning, often cannot understand the internal world of a man who left school at 16 and has worked in all weathers for 20 years under physical strain and job precarity.

### Why are some front-line workers not engaging in the reforms?

He learns not to engage in what he sees as a tick-box exercise, or worse, to resent it. That man can often view posters telling him to “open up” with suspicion; designed by people who have never worn a hard hat, or done a 60-hour week on an unsatisfactory day rate.

Language itself can deepen the divide. For many men born in the 1970s and 80s, the word “mental” still carries derogatory associations. However well intentioned, “mental health” remains a phrase they resist, as it implies something clinical or broken that needs fixing. These workers will readily acknowledge stress, strain, or having a bad day, but recoil from being labelled as “mental.” This unintended stigma means that the very terminology of support can act as a barrier to engagement.

The industry may be aware of this, which might have motivated them to develop roles such as on-site mental health first-aiders, well-being ambassadors or champions. Yet we also learned that workers can become suspicious of these individuals, seeing them as management mouthpieces. Through no fault of their own, these champions often feel trapped between team loyalty and HR expectations, which further erodes their credibility.







## Section Conclusion

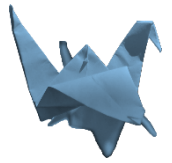
Our investigation showed that the link between macho culture and suicide is more complex than often suggested. While construction has historically been shaped by toughness and endurance, we found that efforts to soften this culture, including greater female participation and wellbeing initiatives, have not translated into lower suicide rates. In fact, comparisons with Nordic countries, which have pursued cultural softening for decades, suggest that suicides can remain high despite such changes.

Our findings also showed that other sectors without a macho culture, such as nursing, experience similarly elevated suicide rates, influenced instead by factors such as access to means.

We further observed that softening policies can alienate the very demographic most at risk, echoing patterns seen in policing. These findings challenge the assumption that dismantling macho culture alone will reduce suicides, and suggest that deeper structural and occupational factors must be addressed.







## 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](https://www.dsrmrisk.com/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](mailto: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.

