MASCULINITY AND WORKPLACE WELLBEING IN THE AUSTRALIAN CONSTRUCTION INDUSTRY

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The construction industry is known to be highly masculinised and to have work practices that detrimentally affect employee wellbeing. Drawing on rapid ethnographic research, we explore the wellbeing of female and male construction professionals. This involved interviews with 21 senior female and male business leaders, participant observation of 14 company events, onsite shadowing of 44 male and female construction professionals for 2-5 days and 61 interviews of project staff across 6 major construction sites operated by two multinational contractors in Australia. Our findings reveal significant symptoms of poor mental health such as stress, panic attacks, insomnia, fatigue and anxiety, as well as strains on family life - among men and women. Many employees endure these experiences in silence, adhering to unspoken masculine workplace norms of long hours, total availability, and presenteeism. Employees regularly worked double their contracted hours and discussed the need to 'prove their worth', leaving little time for work-life balance. Despite some efforts to address this by the companies, physical safety appeared a higher priority than psycho-social wellbeing, even in the face of lost productivity. We conclude that the masculinity of the sector is linked to workplace wellbeing for both the men and women that work in the industry.

Keywords: gender, masculinity, workplace wellbeing

INTRODUCTION

"Wellbeing is generally defined as a person's relative satisfaction with various aspects of their lives, based on the interaction between the resources they have (both material and cultural) and their circumstances" (Reeve *et al*., 2016: 7). It is not just a sense of general happiness but a dynamic state within which objective and subjective elements interact (Foresight Mental Capital and Wellbeing Project, 2008; Department of Health, 2015). Wellbeing is multidimensional and impacted by a range of factors including individuals' ability to feel hopeful and cope with life's stresses (Harrison *et al*., 2016: 10), feeling in control of their lives, having meaningful connections and purpose (Nussbaum, 2011) and experiencing positive relationships (Huppert, 2008).

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All of these factors make it especially challenging to implement and assess in the workplace.

Workplace wellbeing research has increased in recent years as it has been linked to productivity (Benedict and Arterburn, 2008; Fenton *et al*., 2014) and evidence that improvements in wellbeing can lead to benefits for individuals (e.g. happiness, confidence, job satisfaction, physical health, work ethic) and organizations (e.g. productivity, staff retention, staff morale and loyalty, a reduction in absenteeism) (Dickson-Swift *et al*., 2014). Despite some efforts to improve the wellbeing of construction workers, workplace wellbeing interventions have proved difficult to implement, with about 70% of construction workers suffering from mental health issues (e.g. anxiety, depression and stress) as a direct result of working in the industry (Fenton *et al*., 2014; Doran *et al*., 2016). Research shows that job demands as well as organisational factors rooted in norms of masculinity are the most frequent causes of work related stress in the industry - and this both amongst men and women (Sunindijo and Kamardeen, 2017). This paper builds on this work and aims to further explore and conceptualise workplace wellbeing of male and female professionals in the construction industry by drawing on research conducted using a rapid ethnographic approach in two construction multinationals in Australia.

Workplace Wellbeing in the Construction Industry

Research shows a multitude of factors that make the construction industry unconducive to workplace wellbeing. For example, a drive for short-term outcomes in project management to maximize productivity (Fenton *et al*., 2014) contributes to "a fragmented and unstable 'dog-eat-dog' environment", that is often "conflict ridden" and characterized by a culture of blame (Watts, 2009b: 522). The construction industry is also known to "operate in stressful environments" (Du Plessis *et al*., 2013: 716) with physical stressors such as poor work site conditions (e.g. excessive noise, and unsafe work conditions) and organizational factors having a significant impact on employee's wellbeing (Sunindijo and Kamardeen, 2017). Job demands such as excessive workload, high job and time pressure, working long hours and nonstandard work schedules, unrealistic deadlines and insufficient time with family appear to be the most frequent causes of work stress and 'psychological injuries' (Sunindijo and Kamardeen, 2017; Bowen *et al*., 2014a). Other factors include: unclear job role and responsibility, inadequate staffing and poor planning, lack of training, lack of feedback and management support, lack of career progression, lack of job security, and poor remuneration compared to excessive job demands (Campbell, 2006; Turner and Lingard, 2016).

In addition to the physical nature of construction work and the organizational factors listed above, the construction industry has an unhealthy work culture, which reinforces and sustains this behaviour (Sunindijo and Kamardeen, 2017). Culturally, construction work is also strongly rooted in traditional masculine values - e.g. control, efficiency and devotion to work (Styhre, 2011); with those displaying different values seen as not 'fitting in' (Cartwright and Gale, 1995). Those who manage to negotiate part-time or flexible work arrangements are often seen as "slackers," not fully committed to their job (Watts, 2009b: 525). This is due to a culture of 'competitive presenteeism' (Simpson, 1998), as well as defensive practice and a 'heroic narrative', which Watts (2009b: 525; emphasis in original) sees manifesting "as a form of *macho competitiveness*". Cockburn (1991) found, for example, that working mothers were

unable to gain legitimacy as 'serious professionals' in the workplace - due to a 'masculinist vision' of professions (Davies, 1996).

Norms of masculinity in the construction industry have been found to impact both men and women who feel the need to adjust their working style so as to 'fit in' (Olofsdotter and Randevåg, 2016). While research shows no significant difference between men and women's wellbeing in the construction industry, women face unique challenges (Bowen *et al*., 2014b; Sunindijo and Kamardeen, 2017). The masculine workplace culture is characterised by both direct and indirect discrimination toward women, which can stymie career progression leading to reduced job satisfaction and security (Dainty and Lingard, 2006). Many women report daily instances of confrontation, close surveillance, sexual harassment and intimidation and feeling emotionally drained (Watts, 2009b; Gyllensten and Palmer, 2005). Women are also found needing to negotiate multiple roles - job demands (masculine norms) coupled with the expectation of running a home (feminine norms), causing lower job satisfaction, higher work-life conflict, turnover intentions, burnout and other mental health issues (Watts, 2009a; Sang *et al*., 2007).

While gender has not been isolated as a significant moderator in workplace wellbeing, it has been found to impact workers' coping strategies (Gyllensten and Palmer, 2005). In male-dominated industries, performing traditional notions of masculinity means that both men and women are likely to believe it is necessary to endure pain and conceal mental health issues so as to display 'toughness', reliability and 'prove' their worth (Wong *et al*., 2016). "Doing dangerous work is frequently equated to doing gender" (Stergiou-Kita *et al*., 2015: 216) leading to 'hyper masculine' behaviours in the workplace (Jensen *et al*., 2014). When performing masculinity, individuals are encouraged to reject characteristics associated with femininity ('no sissy stuff'), with the expectation that workers accept risks, and endure pain without complaint in the workplace (Stergiou-Kita *et al*., 2015; Iacuone, 2005). Similarly, O'Brien *et al*., (2005) found that many men tolerated 'trivial' symptoms of poor health and avoided help-seeking behaviour. This included great elasticity in what was considered 'trivial' and mental health problems such as 'depression' being casually referred to as 'stress'.

Conformity to masculine norms is also positively related to psychological injuries and negatively associated with help seeking behaviours for both men and women (Wong *et al*., 2016; Iacuone, 2005; O'Brien *et al*., 2005). The focus of the construction industry on short-term outcomes and productivity may further interact with norms of masculinity and healthy behaviour in the workplace. Workers are expected to tolerate adverse work conditions without complaints and sacrifice their health to 'get the job done' (Phakathi, 2013). As Paap (2006) shows, in competitive male-dominated industries, workers perform masculinity putting productivity above safety so as to achieve a 'preferred worker' status (Watts, 2009b). On such 'competitive battlefields', help-seeking behaviours are limited (Stergiou-Kita *et al*., 2015; Desmond, 2011).

METHODOLOGY

In this paper we draw on findings from a larger study that sought to examine the interaction of formal and informal organizational institutions on women professional's recruitment, retention and progression in the construction industry (Galea *et al*., 2015). This project adopted a rapid ethnographic approach to reveal the informal rules that are generally undocumented and often, due to their taken-for-granted nature, unrecognised or invisible for those that live them. While rapid ethnography has been

criticised by some classic ethnographers for being a quick and dirty approach to ethnography, it has been found to be an effective solution to the real challenges of fieldwork in time-pressured environments like the construction industry (see for example, Isaacs 2013, Loosemore *et al.*, 2015).

Our rapid ethnography approach included interviews with 21 senior female and male business leaders, participant observation of 14 company events (including diversity training, new employee inductions, graduate assessment centres, leadership training, mentoring initiatives, management 'road shows', and diversity-specific events) and onsite shadowing of 44 male and female construction professionals for 2-5 days and 61 interviews with project management personnel across 6 major construction sites operated by two organizations which were multinational contractors. Interviews, observations and shadowing on site focussed on common work practices (e.g. what time people arrived and left the site), roles on site (e.g. who does what roles, whether roles were associated with particular work practices such as total availability or leadership, gendered roles), informal and formal workplace expectations (hours worked, presenteeism), whether there was a demarcation between project site and site office, the composition of work practices during the day (formal and informal meetings and interactions), who had 'voice' within these meetings and group dynamics (how do people participate etc.) and narrative (what messages are being reinforced).

Shadowing individual workers involved accompanying and observing them in their normal day-to-day working lives and provided an opportunity for informal conversations with participants and included questions such as 'Was that a typical site meeting?' 'Is it important to arrive on site at this time?' 'Was that the normal way that people speak to each other on site'. During the observations of formal company events, researchers made notes and collected artefacts (photographs of room layouts, seating arrangements, who led the events, what was said and by who, corporate messaging posted on walls or issued to employees). After each observation the researchers debriefed and reflected, recording their conversation, to address the challenges of interpretation and analysis in a multi-researcher ethnography, where there are likely to be perceptual differences and various points of agreement and disagreement. In all observations of company events and sites, two researchers were involved to represent the views of both 'insider' (extensive experience in the construction sector) and 'outsider' (gender experts from sociology and political science) and male and female. This combination allowed us to overcome the problem of construction background researchers missing insights which they may also take for granted as part of the industry and vice versa (Baines and Cunningham 2013). These observations were then used as the basis for the interviews conducted with respondents who nominated themselves during the observation process.

FINDINGS

Job Demands and Mental Health

Work life balance was a significant issue for the majority of employees (men and women) in both companies. The widespread acceptance of working long hours and a culture of presenteeism and total availability within the industry made it difficult to balance work with family and social life. For example, a male construction professional (Company B) stated:

> I go home, like, I work a massive day, early mornings. You know, you come home
> around six o'clock or six-thirty; you have dinner, put your kids to bed and then back on

> the computer for another couple of hours working. So, you know, 10 o'clock is probably the norm and then, you know, midnight could be something like the other nights. And doing that has just been taking it's toll.

The challenge of achieving an effective work-life balance was most pronounced for full-time employees with children, with long hours away from home putting a strain on relationships with children and partners, and for young people relocated to work in regional settings.

The data revealed that for men, these practices cut to the core of their health, wellbeing and personal relationships. Stories of divorce were prevalent and often referred to as the 'battle scars' of a construction role by participants.

> On the last job when there was a 32-year-old who was given a project management role. In the process of that job, the PM's [Project Manager's] relationship with his wife broke down and they divorced. He was under enormous stress. He's now pulled through and has a new relationship. But the project took its toll. By proving himself on that job he has set himself up now (Site Manager, Male, Company A).

While mental health related issues - stress, panic attacks, insomnia, fatigue and anxiety - were not openly discussed in public, it was prevalent in the data and the high rate of suicide did not feature in the companies' safety narratives (Milner *et al*., 2017; 2016). During the research, there were three instances of subcontractor suicide reported by participants, all were men. One participant reported that within her Company A project team, three employees were being watched carefully for fears about them taking their own life.

Women participants also reported stress and fatigue in relation to themselves and their personal relationships. Like men, women were expected to endure in silence and without any variation to the existing 'rules-in-use' that implied long hours, total availability and presenteeism. For women with a family, this left them to individually negotiate and execute a balance between the rules in place and attending to their family. Two women participants outlined the issue in interviews encapsulated it this way:

> To give you an example of what my typical day looks like, I set my alarm at 4.00 am in the morning. I try and do an hour and a half's worth of work before my kids wake up at 6.00 am. I then do drop off [to childcare and school]. I have two drop-offs. Then I double-back around and come to site. I'm probably one of the last people to walk in at a quarter-past eight, eight-thirty. And, whether it's something that I am sensitive about or whether it actually happens but I feel like the fact that I'm walking half an hour, an hour later than everyone else is, is noted by everyone in the office. So I then work 'til about five, five-thirty. I go home. I bath the kids. Put them to bed. I eat dinner. Do the washing and ironing and then I do some more work... (Commercial Manager, Female, Company A)

> I do what the boys do but then I go home and I do what their wives do as well (Estimating Manager, Female, Company A).

The sheer workload - paid and unpaid - that women reported doing, led them to reconsider whether construction is a sustainable career and in some cases, leave or take a more junior or part-time position. While female participants spoke of career 'survival', male participants assumed that they could have both, a construction career and family.

Symptoms of poor mental health emerged as a significant issue for many male and female respondents who reported being stressed, fatigued, having sleeping issues, stress related health issues, turning to alcohol and having anxiety attacks. For men, rigid workplace practices such as long work hours, high workload, and expectations of

presenteeism and total availability had a significant impact on mental health and lead to anxiety and depression. For example, a male construction professional (Company B) stated: "it's hard work mate. It's stressful work. Like I said, it's long hours".

For women, the exclusionary nature of the industry, the masculine nature of construction environments, and constant questions of female capability can contribute to feelings of isolation, exhaustion and a lack of confidence. For example:

> Well I'm pretty social. Like, I've lived with people before. I've always lived in shared housing for like the last five years and then came up here and I'm living on my own. Friends are like a huge part of my life so having to hang out with these guys all the time has been a challenge I guess for me. I'd say my personal life has taken a dive, definitely, since being here… being the only girl can be a bit shit" (Construction Professional, Female, company B)

Young people reported that they were considering a move out of contracting for better hours.

Organizational Interventions and Their Impact

During fieldwork a new initiative called 'wellbeing leave' was introduced in Company A that provided employees with an additional three days paid leave per year to spend on their physical and mental wellbeing. A wellbeing leave brochure was issued to all employees, building the case for work life balance and providing employees examples for how they could spend their new wellbeing leave days, including attending "a yoga retreat, a meditation course, a preventative health check-up or carer's respite". The brochure also encouraged employees to take responsibility for their own wellbeing by eating well, keeping active, drinking sensibly, maintaining good relationships and taking lunch breaks.

> I was handed the booklet by a male participant. His image was on the front of the booklet. He told me that each day on the way to site he suffered panic attacks but he was not sure if he would take his wellbeing leave" (Participant Observation, Female 'Insider' Researcher, Site 1, Company A).

While wellbeing leave was mocked in some circles for its emphasis on "yoga and shit like that" (Participant Observation, Male 'Outsider' Researcher, Site 1, Company A) though most participants interviewed were thankful for the additional leave. Nevertheless, they were unsure if their workload would permit it. When asked participants planned to spend their well-being leave with their family or catching up on 'domestic administration' such as going to the bank and hairdresser; no participants said they planned to attend yoga or meditation. On two of the three sites we visited in Company A, wellbeing leave was operationalised through a roster system and appeared to be utilised by employees; we were unable to track whether these rosters were maintained throughout the busy closing stages of these project.

On construction sites, work life balance and wellbeing was led from the front. The attitude of project managers and leaders towards formal wellness initiatives such as the flexibility initiative was found to have a significant impact on the success and implementation of such programs. These, however, seemed to evolve within and oppose an organizational culture based on unrealistic work expectations:

> One of the things I've learned about [Company A] is, at the end of the day, they do, actually give a shit about their people and their attitude towards people who don't is pretty intolerant. They expect a pound of flesh but to a point. They won't ask you for more than you wanna give so, if you don't wanna give, you don't have to give; just don't expect the same returns of the people who wanna give (Operations Manager, Male, Company A).

DISCUSSION

As discussed above, construction workers are expected to tolerate adverse work conditions without complaints and sacrifice their health to get the job done. Paap (2006) shows that in competitive male-dominated industries, workers perform masculinity putting productivity above safety to achieve a 'preferred worker' status (Watts, 2009b: 513). On such 'competitive battlefields', help-seeking behaviours are limited (Stergiou-Kita *et al.*, 2015; Desmond, 2011). When performing masculinity, there is an expectation that workers accept risks, and endure pain without complaint in the workplace (Stergiou-Kita *et al.*, 2015; Iacuone, 2005; Pap, 2006; Stergiou-Kita *et al.*, 2015; Desmond, 2011). We found little evidence of this culture being challenged, instead both men and women try to 'fit in' with the masculine norms of the industry at the expense of their wellbeing.

Research shows that mental health in the workplace is positively associated with its culture, itself embedded in the organization's structure (Noblet and LaMontagne, 2006; Makrides *et al.*, 2007). Continuous demanding and stressful conditions closely impact an employee's mental health (e.g. depression, anxiety, self-esteem, burnout) (Sunindijo and Kamardeen, 2017), leading to reduced productivity and quality of work, as well as absenteeism and turnover (Bowen *et al.*, 2014a; Fenton *et al.*, 2014). At the same time, this hyper masculine culture, means that many workers tolerate 'trivial' symptoms of poor health (e.g. dismissing depression as stress) and avoid help-seeking behaviour (O'Brien *et al.*, 2005).

The data also indicate that current occupational health and safety interventions and policies see safety risks as primarily physical rather than psychological. Indeed, workplace wellbeing programs focusing on individuals and individual lifestyle changes (e.g. access to gyms, healthy food, better ergonomics and environments as well as stress audits and recognition of risk factors for poor mental health) were found to merely address short-term risks rather than the underlying causes and drivers of poor wellbeing such as hyper masculine norms and practices (e.g. long work hours, presenteeism and total availability. These types of programs individualize the issue and hold employees responsible to attend these programs and adjust their individual behaviours to improve their health without recognising the whole-of-organization responsibility to create a healthy workplace environment), thus having limited value (Fenton *et al.*, 2014; Knapp *et al.*, 2011).

Commitment throughout the organization (including management at the highest level) to a culture that is not tied to masculinity is therefore a critical factor - it includes management structure, staff communication and interaction as well as flexible work options, and employees' perception of feeling valued (Dickson-Swift *et al.*, 2014). In the construction industry, the prevalence of norms of masculinity means that notions of 'doing gender' need to be closely examined when investigating workplace wellbeing. Future work in this area will consider the extent to which these findings are specific to the construction industry, as well as addressing more explicitly, the role of non-dominant masculinities in challenging or embedding the hyper masculine norms and practices that impact on wellbeing in the sector.

CONCLUSION

The aim of this paper was to explore the wellbeing of male and female construction professionals through the lens of masculinity. Our findings point to both men and women employees in the construction industry enduring significant risks to their

wellbeing in silence as a result of unhealthy workplace practices. Our findings reveal significant symptoms of poor mental health such as stress, panic attacks, insomnia, fatigue and anxiety, as well as strains on family life - among men and women. Employees regularly worked double their contracted hours and discussed the need to 'prove their worth', leaving little time for work-life balance. We argue that, in large part, these practices are driven by unspoken masculine norms that require long hours, total availability, and presenteeism. The focus of the construction industry on short-term outcomes and productivity may further interact with norms of masculinity and health behaviours in the workplace by reinforcing and institutionalizing values of masculinity. The professional employees in our study were expected to tolerate adverse work conditions without complaint and sacrifice their health to get the job done. Despite some efforts to address this by the companies, physical safety appeared a higher priority than psycho-social wellbeing, even in the face of lost productivity. We conclude that the masculinity of the sector is linked to workplace wellbeing for both the men and women that work in the industry.

REFERENCES

Baines, D and Cunningham, I (2013) Using comparative perspective rapid ethnography in international case studies: Strengths and challenges. *Qualitative Social Work*, 12(**1**), 73-88.

Benedict, M A and Arterburn, D (2008) Worksite-based weight loss programs: A systematic review of recent literature. *American Journal of Health Promotion* 22(**6**), 408-416.

Bowen, P, Edwards, P, Lingard, H, and Cattell, K (2014a) Occupational stress and job demand, control and support factors among construction project consultants. *International Journal of Project Management* 32(**7**), 1273-1284.

Bowen, P, Govender, R and Edwards, P (2014b) Structural equation modeling of occupational stress in the construction industry. *Journal of Construction Engineering and Management* 140(9). doi.org/10.1061/(ASCE)CO.1943-7862.0000877

Campbell, F (2006) *Occupational Stress in the Construction Industry*. Ascot, U K: The Chartered Institute of Building.

Fenton, S-J, Pinilla Roncancio, M, Sing, M, Sadhra, S and Carmichael, F (2014) *Workplace Wellbeing Programmes and Their Impact on Employees and Their Employing Organisations: A Scoping Review of the Evidence Base*. The University of Birmingham: Health Exchange / University of Birmingham. Work, Wealth and Wellbeing Research Group and Network.

Cartwright, S and Gale, A (1995) Project management: different gender, different culture? A discussion on gender and organizational culture - part 2. *Leadership and Organization Development Journal,* 16(**4**), 12-16.

Cockburn, C (1991) *In the Way of Women*. Basingstoke, UK: Macmillan.

Dainty, A R and Lingard, H (2006) Indirect discrimination in construction organizations and the impact on women's careers. *Journal of Management Engineering,* 22(**3**), 108-118.

Davies, C (1996) The sociology of the professions and the profession of gender. *Sociology,* 30(**4**), 661-678.

Department of Health (2015) *The Victorian Happiness Report: The Subjective Wellbeing of Victorians*. Melbourne, Australia: State Government of Victoria.

Desmond, M (2011) Making firefighters deployable. *Qualitative Sociology,* 34(**1**), 59-77.

Dickson-Swift V, Fox C, Marshall K, and Willis, J M (2014) What really improves employee health and wellbeing: Findings from regional Australian workplaces. *International Journal of Workplace Health Management,* 7(**3**), 138-155.

Doran, C M, Ling, R, Gullestrup, J, Swannwll, J and Milner, A (2016) The impact of a suicide prevention strategy on reducing the economic cost of suicide in the New South Wales construction industry. *Crisis,* 37(**2**), 121-129.

Du Plessis, K, Cronin, D, Corney, T and Green, E (2013) Australian blue-collar men's health and well-being: Contextual issues for workplace health promotion interventions. *Health Promotion Practice,* 14(**5**), 715-720.

Foresight Mental Capital and Wellbeing Project (2008) *Final Project Report*. London: The Government Office for Science.

Galea N, Powell A, Loosemore M, and Chappell, L (2015) Designing robust and revisable policies for gender equality: Lessons from the Australian Construction industry. *Construction Management and Economics,* 33(**5-6**), 375-389.

Gyllensten, K and Palmer, S (2005) The role of gender in workplace stress: A critical literature review. *Health Education Journal,* 64(**3**), 271-288.

Harrison, E K, Quick, A and Abdallah, S, (Eds.) (2016) *Looking into the Wellbeing Kaleidoscope: Results from the European Social Survey*. London: New Economics Foundation.

Huppert, F (2008) *Psychological Wellbeing: Evidence Regarding Its Causes and Its Consequences*. London: Foresight Mental Capital and Wellbeing Project 2008.

Iacuone, D (2005) 'Real men are tough guys': Hegemonic masculinity and safety in the construction industry. *The Journal of Men's Studies,* 13(**2**), 247-266.

Isaacs, E (2013) The value of rapid ethnography. In: B Jordan (Ed.) *Advancing Ethnography in Corporate Environments: Challenges and Emerging Opportunities*. Walnut Creek, CA: Left Coast Press, 92-107.

Jensen, S Q, Kyed, M, Christensen, A, Bloksgaard, L, Hansen, C D and Nielsen, K J (2014) A gender perspective on work-related accidents. *Safety Science,* 64(**1**), 190-198.

Loosemore, M, Powell, A, Blaxland, M, Galea, N, Dainty, A and Chappell, L (2015) Rapid ethnography in construction gender research. *In*: Raiden, A and Aboagye-Nimo, E (Eds.), *Proceedings 31st Annual ARCOM Conference*, 7-9 September 2015, Lincoln, UK. Association of Researchers in Construction Management, 1271-1280.

Makrides, L, Heath, S, Farquharson, J and Veinot, P L (2007) Perceptions of workplace health: Buiding community partnerships. *Clinical Governance: An International Journal,* 123(**3**), 178-187.

Milner, A (2016) *Suicide in the Construction Industry*. Deakin University / MATES in Construction.

Milner, A, Maheen, H, Currier, D and LaMontange, A D (2017) Male suicide among construction workers in Australia: A qualitative analysis of the major stressors precipitating death. *BMC Public Health* 17, 584.

Noblet, A and LaMontagne, A D (2006) The role of workplace health promotion in addressing job stress. *Health Promotion International,* 21(**4**), 346-353.

Nussbaum, M (2011) *Creating Capabilities: The Human Development Approach*. Cambridge, MA: Harvard University Press.

O'Brien, R, Hunt, K, Hart, G (2005) 'It's caveman stuff, but that is to a certain extent how guys still operate': Men's accounts of masculinity and help seeking. *Social Science and Medicine, 61*(**3**), 503-516.

Olofsdotter, G and Randevåg, L (2016) Doing masculinities in construction project management: We understand each other, but she…. *Gender Management International Journal,* 31(**2**), 134-153.

Paap, K (2006) *Working Construction: Why White Working-class Men Put Themselves-And the Labor Movement-in Harm's Way,* Ithaca: Cornell University/ILR Press.

Phakathi, S T (2013) ''Getting on" and ''getting by" underground: Gold miners' informal workingpractice of making a plan. (PLANISA) *Journal of Organizational Ethnography,* 2(**2**), 126-149.

Reeve, R, Marjolin, A, Muir, K, Powell, A, Hannigan, N, Ramia, I and Etuk, L (Eds.) (2016) Australia's Social Pulse. UNSW Australia, Sydney and UWA, Perth: Centre for Social Impact.

Sang, K J C, Dainty, A R J and Ison, S G (2007) Gender: A risk factor for occupational stress in the architectural profession? *Construction Management and Economics,* 25(**12**), 1305-1317.

Simpson, R (1998) Presenteeism, power and organizational change: Long hours as a career barrier and the impact on the working lives of women managers. *British Journal of Management,* 9(**s1**), 37-50.

Stergiou-Kita, M, Mansfield, E, Bezo, R, Colantonio, A, Garritano, E, Lafrance, M, Lewko, J, Mantis, S, Moody, J, Power, N, Theberge, N, Westwood, E and Travers, K (2015) Danger zone: Men, masculinity and occupational health and safety in high risk occupations. *Safety Science,* 80(**1**), 213-220.

Styhre. A (2011) The overworked site manager: Gendered ideologies in the construction industry. *Construction Management and Economics,* 29(**9**), 943-955.

Sunindijo, R Y and Kamardeen, I (2017) Work stress is a threat to gender diversity in the construction industry. *Journal of Construction Engineering and Management,* 143(**10**),1-11.

Turner, M and Lingard, H (2016) Improving workers' health in project-based work: Job security considerations. *International Journal of Managing Projects in Business,* 9(**3**), 606-623.

Watts, J H (2009a) Allowed into a man's world' meanings of work-life balance: Perspectives of women civil engineers as 'minority' workers in construction. *Gender Work Organization,* 16(**1**), 37-57.

Watts, J H (2009b) Leaders of men: Woman 'managing' in construction. *Work, employment and society,* 23(**3**),512-530.

Wong, Y, Ho, J, Mon-Ho, R, Wang, S and Miller, I S K (2016) Meta-analyses of the relationship between conformity to masculine norms and mental health-related outcomes. *Journal of Counseling Psychology,* 64(**1**) 80-93.