

Submission: Health and Safety at Work Amendment Bill

**By the Mental Health Foundation of
New Zealand**



18 March 2026
Education and Workforce Committee

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Tuia te rangi e tū nei
Tuia te papa e takoto nei
Tuia i te here tangata
Tihei mauri ora.

He hōnore, he korōria ki te atua ki te runga rawa
He whakaaro maha ki a rātou kua haere ki te wāhi ngaro
Rau rangatira mā, ānei ngā whakaaro me ngā kōrero nā Te Hauora Hinengaro.

Thank you for the opportunity to comment on the Health and Safety at Work Amendment Bill.

The Mental Health Foundation of New Zealand (MHF) has a long history of supporting workplaces to adopt activities that build mentally healthy workplaces, with a focus on developing industry-level wellbeing programmes in farming (see [Farmstrong](#), a nation-wide rural programme that shares practical wellbeing science to help farmers, growers and their families), construction and manufacturing, as well as generic workplace wellbeing resources. For example, the MHF's [Working Well](#) tools and resources help employers take a proactive approach to creating flourishing workplaces that enhance and protect people's mental health. This includes [Open Minds](#), a workplace programme developed especially for managers, which equips them with the confidence and practical skills to talk about and support mental health in the workplace. The MHF also recently published two workplace guides: [Supporting your staff and organisation after a suspected suicide](#) and [Responding to a staff member's suicidality](#).

Concerns about the proposed focus on "critical risks"

The MHF is concerned the Bill is significantly narrowing employers' responsibilities for managing workplace risks. It is our understanding that businesses with fewer than 20 workers ("small PCBUs") would only be required to manage "critical risks",

while the obligations for larger organisations would be refocused on managing critical risks rather than all workplace risks.

We are concerned psychosocial risks¹ that can harm workers' mental health and wellbeing may not fall within the scope of "critical risks". The Bill defines a "critical risk" as a hazard likely to result in death, notifiable injury or illness, or a notifiable incident. It would appear unlikely that psychosocial hazards² that harm workers' mental health would consistently meet this threshold, meaning many workplaces will no longer be required to actively identify and manage these risks, despite well-established evidence that psychosocial hazards can cause serious harm to workers' health.ⁱ Workers, their families, and our health system may ultimately bear the costs of risks and harms that are no longer clearly captured within employers' duties.

The MHF does not support this change. **We recommend that small PCBUs remain obligated to identify and manage the full range of workplace risks, alongside appropriate support and guidance that reflects the realities of smaller organisations.** Psychosocial risks arising from workplace hazards – such as bullying, harassment, excessive workload, low job control, long working hours, and poor work-life balance – may not meet the proposed threshold for "critical" but can still seriously affect workers' wellbeing and their ability to participate safely in work and life outside it. All workers have a right to healthy and safe work and to return home safe.

If the legislation proceeds in its current form, we recommend amending the Bill to explicitly recognise that psychosocial risks capable of causing serious harm to workers' mental health fall within the scope of "critical risks".

¹ *Psychosocial* means the interrelationship between a person's thoughts, emotions and behaviours and their social environment.

Psychosocial risks are adverse workplace interactions or conditions of work where a person is exposed to a psychosocial hazard with the potential to compromise a worker's health and wellbeing. ([WorkSafe, 2025](#))

² *Psychosocial hazards* are the aspects of the design and management of work, and its social and organisational contexts, that may have the potential for causing psychological or physical harm. ([WorkSafe, 2025](#))

Psychosocial risks can cause serious harm to workers and businesses

Workers can be exposed to risks that impact their mental health and wellbeing in any industry and workplace. This is particularly important given that the Health and Safety at Work Act already recognises that “health” includes both physical and mental health. Creating positive conditions – or mentally healthy workplaces – where workers can bring their authentic selves to work is one of the most important factors to achieving worker wellbeing and managing psychological risk. Increased wellbeing also acts as a protective factor, helping to reduce the likelihood and impact of psychosocial harm.

Mentally healthy workplaces are also beneficial for businesses. Evidence shows that for every dollar invested in improving mental wellbeing in the workplace, employers gain a return of \$2.30 through improved productivity, reduced absenteeism and presenteeism, and fewer compensation claims.ⁱⁱ

Conversely, psychosocial stressors such as bullying and harassment create workplace conditions that increase the likelihood of workers experiencing mental health problems, such as depression and anxiety, and increase vulnerability to experiencing suicidal thoughts. Poor employee wellbeing also carries significant costs for businesses, including increased absenteeism and presenteeism (being at work while unwell), reduced work performance, increased staff turnover, higher accident and injury rates, and increased health care costs.ⁱⁱⁱ In 2024, New Zealand lost an estimated 13 million working days due to work absence, at a cost to the economy of \$4.17 billion.^{iv}

Most workplaces in Aotearoa New Zealand are small businesses and need support

Defined as those with fewer than 20 employees, there are approximately 546,000 small and micro-businesses in Aotearoa New Zealand, representing around 97 percent of all businesses. They account for 29.3 percent of employment and contribute to more than a quarter of Aotearoa’s gross domestic product (GDP). As a result, the proposed changes are likely to have a significant impact. Reducing safeguards for such a large proportion of businesses and workers risks undermining workplace health and safety outcomes, rather than supporting them.

The MHF has consistently advocated for the development of simplified, accessible, and fit-for-purpose guidance for small businesses and small-to-medium enterprises (SMEs) to help them manage psychosocial risks. We acknowledge that smaller organisations often lack the resources and capacity required to implement comprehensive health and safety systems. However, the risks faced by their workers are no less important.

The MHF advocates for supplementary, condensed guidance be developed in consultation with small businesses across different sectors to ensure it reflects the realities of smaller workplaces and the types of support they need to manage psychosocial risks effectively. A practical step would be to develop simplified materials to accompany WorkSafe New Zealand's 2025 [Managing psychosocial risks at work: Guidelines for all businesses](#). It is our understanding that, if the proposed changes were enacted, WorkSafe may no longer be permitted to provide this type of guidance to small PCBUs, even if it is requested – a change we would not support.

Our experience working with small businesses across high-pressure sectors reinforces the importance of practical, sector-specific approaches to managing psychosocial risks. The MHF has significant programmes supporting the farming and residential construction sectors, which are known to experience elevated work-related pressures and conditions associated with psychosocial risk.^v These industries are largely made up of small businesses. Our programmes are based on identifying industry-specific mental health risks and sharing practical approaches to managing them from both worker and employer perspectives. This approach supports peer-to-peer learning and industry culture change, rather than top-down information approaches, which tend to be less effective for complex and nuanced issues such as psychosocial health.

In our longest-running programme, *Farmstrong*, a series of evaluations over time (endorsed and made available by ACC) have shown that a social learning approach can support improvements in physical health and safety outcomes, such as reducing injury risks arising from accidents or unsafe work practices. *Farmstrong* delivers a return of \$7.85 for every \$1 invested, and has saved ACC \$52 million in claims costs over the past decade.^{vi}

Conclusion

The MHF appreciates the opportunity to comment on the Health and Safety at Work Amendment Bill. Ensuring that workplace health and safety legislation continues to recognise and address psychosocial risks is essential for protecting workers' wellbeing and supporting productive, sustainable businesses. We urge the Committee to ensure that the final legislation maintains clear obligations to manage risks to workers' mental health alongside risks arising from physical hazards.

Mauri tū, mauri ora,

Shaun Robinson
Chief Executive

References

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