

Thank you for the opportunity to say a few words today.

The workplace mental health system is in urgent need of reform. On that much, at least, we and the government are in heated agreement.

Workers in NSW need jobs that support mental wellbeing, and when things go wrong, quick access to quality mental healthcare and support.

The draft legislation will not achieve that.

Changes that make it harder for workers to get help through the workers compensation system for psychological injury will push thousands of injured employees straight into a public mental health system that is already at breaking point.

To force workers who are experiencing what is likely to be the worst moment of their lives, to commence and win legal action before being able to get support for a mental health issue is to punch down on some of the most vulnerable people in NSW.

Everyone knows someone who has struggled with their mental health. Mental health issues affect every family in NSW.

Our research tells us time and time again that work is one of the leading causes of mental distress.

But this draft law is built around the idea that workers are faking it.

I wonder if the drafters of this law would be willing to look a fire fighter or a nurse or a paramedic or a social worker in the eye and tell them they are faking their mental distress?

Would they sit in the waiting room of a mental health service, or the emergency department of a NSW public hospital on any night of the week and tell the people who are struggling with mental ill-health that they are faking it?

People who work in the construction industry make up about 9% of the workforce, but 21% of the deaths by suicide. Are these people faking their mental distress?

Change is needed, to be sure. But this is change designed by lawyers, accountants and politicians for a fundamental question of health, wellbeing and workplace design.

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There is a better way. Slow down. Make this reform count to improve workplaces and improve lives. Bring mental health experts together with workers and employers to do the things that reduce harm in the first place.

As a start, we could:

- Design jobs to meet workers' wellbeing needs, including those with pre-existing conditions
- Hold employers accountable for maintaining psychologically safe workplaces
- Resolve workplace relationship issues quickly and focus on rebuilding trust rather than litigating
- Provide adequate interim supports so distressed workers can focus on recovery
- Ensure long-term care is available for those who need it

Let's design a system that improves human outcomes. Doing that will save even more money, and get workers back to work and healthy much faster.

