

Addressing Burnout through Employment Law: A Comparative Analysis of Minimalism in New Zealand and India

Nur Hadirah Othman¹, Nadia Maisarah Muhammad Sahir¹, Muhammad Atif Asyraf Anwaar Lukman¹,
Luqman Firdaus Ahmad Fazly¹, Gurprit Singh A/L Sarjit Singh², Mohd Haris Abdul Rani^{1*}

¹Faculty of Law, University Technology MARA, Malaysia

²Faculty of Business, Accountancy & Law, SEGi University & Colleges

*Corresponding Author

DOI: <https://dx.doi.org/10.47772/IJRISS.2025.910000593>

Received: 26 October 2025; Accepted: 04 November 2025; Published: 19 November 2025

ABSTRACT

Burnout is a major challenge in work places around the world that has serious consequences both to the well being of employees and organisational productivity. This article will provide a comparative study of employment laws in New Zealand and India and how their laws tackle the issue of burn out with the objective of assessing the efficiency of the current legal frameworks in dealing with burnout and recommend how legal protections that are already enacted may be enhanced. The study comprises a blend of legal analysis, case studies and policy review in order to examine legal frameworks in the two countries. Through analyzing relevant legislation and case law, the study discovers the strength and the weakness of the existing legal responses to burn out. The study also investigates the role of employers and the government in ensuring burnout is addressed across preventive measures, workplace wellness programmes and support systems. The findings show that while New Zealand had shown substantial improvement in acknowledging the significance of mental health at the workplace, India's legal framework is still in the early phases to address these challenges. The study found that although there is some improvement, the two countries are still struggling in effectively addressing burnout using their current and existing employment law. In New Zealand, the existing policies are not always enforced as rigorously as they should be, in India, the lack of comprehensive mental health provisions in labour law is a significant hindrance. The paper concludes with a set of recommendations on legal reforms such as inclusion of burn-out specific clauses in employment contracts, compulsory wellness programmes for employees, and improved enforcement systems. The research contends that the multifaceted nature of burnout will require comprehensive legal reforms to enhance employee well-being. It highlights the need to adapt the employment legislation to the changing needs of the modern working environments to guarantee better protection and improved mental health outcomes among employees.

Keywords: Burnout, Employment Law, New Zealand, India, Minimalism

INTRODUCTION

Burnout is a trend that has increasingly become important and widespread in the contemporary workplace settings, and this issue has taken a toll on employees. The debate is being held around the globe in different sectors. Burnout, officially recognised by the World Health Organization (WHO), became an occupational phenomenon in 2019, thus attracting attention towards its pervasive impact and its long-term impacts that triggers both individuals and organizations (World Health Organization, 2019). A burnout is a tricky illness, involving chronic emotional exhaustion together with a feeling of disconnection to work and reduced feeling of achievement. Burnout victims usually develop feelings of overload, isolation, and unproductiveness, which result in the deterioration of productivity and job dissatisfaction. This especially impacts those who have high stress jobs, e.g., in the fields of health, education, and finances. As this work in the regions is usually associated with a lot of emotional work and daily interaction with people, employees may very easily become susceptible to the negative side of burnout. The consequences of burnout are mind-blowing-as. According to an article, burnout is costing the world economy almost a trillion US dollars each year in terms of lost productivity, absenteeism, and mental health costs (World Health Organization, 2019). These consequences

usually come hand in hand with the psychological toll that takes on affected individuals, leading to further detrimental mental health issues. Furthermore, this condition was worsened by COVID-19 pandemic, when the boundary line between work and life became thin; anxiety levels exacerbated the threat of burnout among working people in dozens of industries (World Health Organization, 2019). Pandemic was not just a multiplication of pressures in the workplace but it pushed employees to work, adjusting to the new way of working that includes remote work, resulting in an experience of isolation and a decline in work life balance.

Although burnout and its effects become increasingly popular, legal concepts regarding burnout have not been established yet; inadequate in most pockets of the globe. Labor laws are modelled to protect the employees in many countries. As burnout is an understudied topic, the laws are fighting against unrealistic workloads and making sure there is a natural working-life balance within the employment legislation. Several existing worker regulations mostly lay emphasis on physical safety and health, with very little or no focus on the psychological consequences of overworking. In contrast, there are a few countries, especially those countries that have liberalized labor laws such as New Zealand, have started to focus on mental health and its well-being in their models (WorkSafe New Zealand, 2021).

The strategy of New Zealand has been most proactive when it comes to the aspect of mental health promotion at the workplace. Its all round social welfare was to ensure that workers are free of psychological torture through system and progressive policy on labor. The laws aim to mitigate burnout by promoting a healthy working environment and persuading employers to pay attention to employee welfare. This is a method that not only aims at restricting the amount of working hours but also to establish supportive workplaces where employees can regulate their mind in an effective way. On the other hand, countries like India have distinct issues regarding the incorporation of burnout-reduction plans into their labour laws. It is highly significant to have a detailed overview of the underlying issue at hand (Prasetya et al., 2021). Most of the workforce in India is informal and the workers on the informal side lack the protection offered to formal employees such as mental health coverage as evident in the legal framework. The issue is further complicated by the fact that the labor market of India is quite diverse, which means that certain cultural attitudes should be addressed. The stigmatisation towards mental health tends to limit open talks and empathy towards the people experiencing burnout. In addition, the limited availability of mental health services and ignorance of employers and workers are the reasons. Information to the employees regarding the implication of burnout has led to the challenge to incorporate effective legal actions. In this environment, the concept of minimalism in employment law has been advanced as the possible solution to the increasing problem of burnout.

Here, minimalism simply means making things simpler and limiting elements and factors related to the workplace that are laid down in laws in order to cut down bureaucracies, stress on employees as well as their employers by having stringent protections that will not overwhelm organizations. It works by concentrating on the best minimalist laws that have the capacity to lower stress levels at the workplace, enhance mental health, and other substantial legal defenses in order to develop more healthy work environments (Dentons, 2024). This is a minimalist style that is especially applied to countries whose labor markets are complex and extreme regulation may act as a hindrance to the implementation of meaningful reforms. The minimalist system in countries such as India is where the labor market is fragmented and diversified. Such a method will help to ease the pressure on employers and still solve the serious problem of burnout. However, the use of minimalism in the fight against burnout is insufficiently studied, even in countries that apply it to themselves and separate legal, economic and cultural surroundings. The resources to achieve it exist in developed countries, whereas third-world countries have no resources in this to have specific and comprehensive mental health policies. The developing nations are characterized by special issues of health care challenges that should be adjusted and dealt with through specialized legal policies. interventions.

To address the said gap by comparing New Zealand and Indian employment laws, minimalist approaches may be deployed. In respect of two countries offering very different legal environments, New Zealand can be considered an unique case study since it has quite progressive labor laws and extensive social welfare which is developed in order to enhance the well-being of the workers (WorkSafe New Zealand, 2021). The progressive labor laws in a country are not only focused on providing a decent wage and safe working environments to the labour but also in maintaining and enforcing a balance between the employer and the employee that focuses on the wellbeing of the employees.

The comprehensive framework of labor law that applies in New Zealand promotes employers to play a proactive role in the management of the mental health of their employees, including measures to ensure that mental health check-ups and education were given to managers in recognizing symptoms of burnout. The emphasis on the employees well-being has enabled New Zealand to establish a healthy working environment, which attempts to avoid burnout before it develops into a mass problem. On the other hand, India, the country of informal sector, variety of work culture, and fast-evolving labor market, poses a unique problem in the realization of minimalist legal changes (Observer Research Foundation, 2024). The high number of employees in India informal working centers which are working in precarious conditions, having signed contracts and so on, makes it hard to enforce the laws that are created to prevent burnout.

The issue of healthcare makes it difficult to implement effective steps of burnout prevention. There was no broad support system in terms of mental health, causing the problems to only accelerate with a considerable number of employees being exposed to stress and burning out. It is highly significant to have a detailed overview of the underlying issue at hand. (Prasetya et al., 2021). By comparing these two countries, this research seeks to have an insight on protections of burnout provided under labour laws, its effectiveness in treating burnout, as well as minimalist solutions that can be adapted to the situation in a country.

This paper will provide an analysis by comparing these two countries on their utilization of minimalist principles in combating burnout under their employment law. By analyzing the strengths and limitations of each of the countries, one may understand that both of the countries are rather different. The research will present practical guidelines to policymakers and lawyers in countries that are interested in limiting the burnout of their employees. This study will help add to the expanding body of knowledge of understanding the current and future environment relating to the issue of the mind state. This contribution can be considered by other countries when implementing legal reforms that focus on the well-being of employees (Dentons, 2024). The minimalist approach will provide the opportunity to deal with the dire problem of burnout without adding too many burdens to employers and complex regulations. It enables one to develop and implement effective policies that are effective. By keeping the mental health of the workers as a priority in addressing it with such an in-depth analysis, the study aims at enhancing the knowledge world-wide about how minimalism could be used.

One of the most burning problems of the contemporary workforce can be resolved with the help of the employment laws. The results will be extensively beneficial to the countries, and become a great change in seeking the establishment of a healthier and more sustainable work environment. The governments in environments with a focus to enhance well-being and productivity of their workers (Effectory, 2023). By setting up low regulation legal frameworks that concentrate on the basic provisions that the employees require, countries can develop work conditions that promote mental health and exclude a possibility of burnout in their workers. Which results in a more successful and stronger workforce in the long-run.

LITERATURE REVIEW

New Zealand

The problem of workers and professionals experiential burnout is increasing especially in health sector in New Zealand. Burnout is a psychological concern, which is triggered by emotional burn-out, detachment, and loss of satisfaction of accomplishment and is typically caused by extreme work demands and lack of support after a significant amount of time. The causes of burnout in New Zealand are rather multifaceted and include such things as the work overload, and inconsistencies in the healthcare system. There are also some loopholes and hindrances to the course of implementing workable solutions to check this vice that is on the increase.

One of the leading factors behind the burnout in New Zealand is the amount of work that the healthcare professionals particularly the psychiatrists and psychologists handle in New Zealand. The ability of the health structure to meet the demands in mental health is not sufficient since the demands keep rising. It has been concluded that, in New Zealand, burnout affects more than 34 percent of psychiatrists, and due to the overwhelming nature of the profession, many of them attribute their exhaustion to this fact (Chambers and Frampton, 2022). Lack of skills among mental health professionals and the high number of individuals that

need their services is associated with the degree of stress that leads to frustration and hopelessness among the practitioners (Henning, Hawken, & Hill, 2009). The impact of this shortage is particularly experienced in the rural set up whereby, there exists imbalanced distribution of healthcare professionals in the urban centers at the cost of rural areas (Kumar, Bhagat, Lau, & Ng, 2006). This has resulted in more and more complex load and practitioners in these underrepresented regions hence further levels of burnout.

Furthermore, the organization and systematic aspects of New Zealand health sector also play a huge role in burnout. The healthcare system in New Zealand has undergone considerable reorganization in the last couple of decades that included establishment of districts health boards (DHBs) and primary health organizations (PHOs). Despite the changes being all geared towards positive delivery of the services, it has also led to the dissatisfaction of the healthcare professionals besides making them highly stressed as well. The transfer of institutional psychiatric facilities into community facilities has added the pressure to this situation in the sense that the professionals in the mental health community feel inadequately equipped to handle the prolonged nature of their work requirements (Kumar et al., 2006). Further, the increasing administrative load on medical staff, along with the effects of bureaucracy and paperwork, has also exhausted the professionals and created less time to devote attention to treating patients (Chambers & Frampton, 2022). These are system and organizational causes linked with mental exhaustion and depersonalization that many mental health workers incur and constitute the two main dimensions of burnout.

Cultural and societal expectations also cause the issue of burnout among mental health workers in New Zealand. Media coverage on medical practitioners and even more litigious environment has contributed to stress levels among the psychiatrist and the psychologist (Kumar et al., 2006). The doctors and nurses also do not feel appreciated and valued when they are externally attacked or bombarded with the demands of general population that is expected to accept them in fulfilling the given role. The tensions of meeting the physical and emotional needs of the patients along with the pressure of being under the observation of the crowd and locating the path within the new system of healthcare also further predisposes a burn out. Insufficiency of resources in mental health services further defined as staffing and financial-related resources creates a cycle of excessive work load and insufficient recognition, growth of disengagement and frustrations by the mental health professionals.

Nevertheless, irrespective of the fact that the burnout is recognized as a serious professional issue, the legal aid to the burnout victims remains insufficient. The New Zealand does not gear the laws on employment to meet the special needs of the employees exposed to burn out. Despite the general occupational health and safety laws, in certain instances, they fail to take into account the psychological and emotional effect of some of the occupations, particularly the health care ones, on the employees. Burnout is not some individual inability to deal with stress, as Maslach and Leiter (2017) assert, but rather organizational issue, i.e., the one that can be resolved only through a change of organizations. The current legal systems however do not have adequate constructs in aiding the process of managing the systemic factors that entail workload, shortage of staff and shortage of administrative support which are the CAUSES of burnout. What is needed is the piece of legislation that will do more than recognizing the fact that burnout is a personal problem but make it a problem that could be dealt with structurally, at the workplace.

Besides that, there are significant gaps in legal coverage of the mental health professionals in New Zealand who experience burnout. The loopholes that exist in the law and the problem about burn out in the healthcare sector of New Zealand provides evidence that something is needed to be overhaul and this will secure and provide mental health professionals safety and security. Present available packages and legislations on safety and well-being at work are often times inadequate or not enough to address the systematic conditions that encourage burnouts such as work overloads, staffing shortage, and the cognitive pressure of the high stress professions attached to psychiatry and psychology. As much as the existing regulations are about occupational health and safety at large, what they fail to emphasize is on emotional and psychological response to burnout on the employees involved in these jobs thereby creating a loophole without which most mental health professionals turn out to be vulnerable.

Further, burnout is not especially guaranteed under the law in New Zealand. Inasmuch as the burnout issue is gaining ground as a pressing professional concern, the law faculties are yet to devise in a way that will assist

the wounded employees. The current laws on health and safety are merely take into consideration the physical risks but not the emotional and psychological ones that are well known to cause burn out in particularly high workload-high-trauma jobs such as are the case of mental health services. This loophole means that the employees in such regions are only abandoned to defend themselves against the effects of burnout on the long term, as legal remedies or aversive methods cannot be apparent.

The other area that does not have legal frameworks is the support systems of the mental health professionals. Good support networks needed by mental health workers include; proper administration support, limitation of work load, and good access to mental health care. The issue is that however, there is no law that would impose such assistance in the field of healthcare. Introducing laws that implement Wellness programs at the places of work, stress management program, and access to the counseling facilities would be very helpful in preventing burnout. Laws should also be drafted to encompass the availabilities of such help to professionals already feeling the pinch of burnout not with tinge of stigmatization and career implication.

The other problem is also in hiring and maintaining mental health employees particularly in rural areas which also leads to burn out. The below mental health workers is not a new issue and the established policies may be not enough to fix it. The change in legislation need not just be in terms of giving out financial benefits but the legislation needs to be such that it can lead to better working conditions, better work life balance and better professional support which should be provided. Also, there should be some policies that assist and retain mental health professionals by providing favorable working environment and by controlling workloads provision and a long term career development of the same. Burnout, along with recruitment and retention improvement, requires an overall plan that should move beyond compensation into the improvement of the overall general work environment and career satisfaction in mental health care professionals.

Moreover, even as the discussions about the issue and post-pandemic realization continue to increase, the legal system in New Zealand still fails to offer enough protection or even acknowledge burnout as a unique occupational health-related risk. Such a designation has given burnout greater international prominence when the World health Organization attributed the condition in 2019 as an occupational phenomenon, though the translation of that into binding legal obligations shows variation in New Zealand (World Health Organization, 2019).

The implications of burnout have been particularly felt particularly within the context of the COVID-19 pandemic that greatly interfered with normal working patterns and contributed to the systemic tensions that existed before. Author Haar (2023) claims that a significant number of New Zealand workers are sweating in a post-COVID-19 hangover: an emotional fatigue, loss of motivation, and lack of interest in the work. This does not occur in a single field, but it has prominently influenced the working of the healthcare, education, and the professionals in the public service field.

The cases of burnout have been very alarming in the healthcare sector. According to a recent New Zealand Medical Journal, about one third of the surveyed psychologists and front-line health workers were found to show signs of clinical burnout due to heavy workload, administrative overload, and lack of support within their institutions (Fraser, Sauni, & Bennett, 2021). All this is going on when we note the government considering the problem of workforce shortages and the mental health pressure.

That is an equally pathetic story when it comes to the education sector. A report of 2023 by the Newshub Nation said that an exodus of teachers has reached an alarming number because teachers simply could not handle their workloads, were not well-paid, nor did they feel valued or honored (Newshub Nation, 2023). This is consistent with another research conducted by the Education Review Office that discovered that a significant group of principals and teachers were facing extreme amounts of work-related stress, as the vast majority of school leaders reported that their working conditions felt untenable (Education Review Office, 2021).

Although the HSWA in New Zealand obliges employers to mitigate risks to the physical and mental health of the employees, there may be no explicit legal clarification of the term burnout and nor any legally-binding duty to act to control psychosocial risks. To address these gaps, WorkSafe New Zealand published updated

advice in 2024, which lists essential actions that employers must take to recognize and eliminate stress inducing factors, which include role ambiguity, heavy workload, and ineffective change management (WorkSafe New Zealand, 2024). Still, this guidance cannot be applied by force, and its observance is rather voluntary.

Law scholars contend that the soft law care system of New Zealand burnout has not yielded any significant change. According to Dentons (2024), even though a duty of care (according to HSWA) is technically imposed on the employers, burnout prevention often receives no particular attention due to the absence of specific tools or the pronounced course of action in statutory form. In addition, according to Ministry of Business, Innovation and Employment (2024), the problem of unaddressed burnout does not only impact the individual wellbeing, but also carries significant economic costs ~ fostering absenteeism, turnover, and a drop in the performance of business. Small- and medium-sized businesses are particularly at risk since they do not always have the means to apply their well-being programs well or bear operational expenses of burnout-induced absenteeism.

Under-resourcing in mental health services, chronic under-resourcing is further exacerbated by the systemic nature of burnout. According to the Annual Report 2024 released by the Mental Health and Wellbeing Commission, the situation in the field of the public service is still overstrained, which is especially characteristic of the rural areas, as delays in medical assistance only contribute to the overloading of its providers and mental health support recipients (Mental Health and Wellbeing Commission, 2024). Likewise, a survey conducted by the New Zealand Psychological Society found that practitioners have a high level of emotional exhaustion and depersonalization, most of whom characterize themselves as professionally unsupported (Blayner, 2022). This stress among nurses is impact on service provision in addition to creating negative feedback loop: when staff members quit, or work fewer hours, they place more stress on the remaining staff members.

Another source is the cultural attitude. The accepted chains of personal responsibility, stoicism, and resilience still prevail in the majority of workplaces in New Zealand keeping the issue of mental health unpracticed. European Agency for Safety and Health at Work (2022) cautions that when left unchecked psychosocial pressures can be enhanced by digitalisation and greater levels of employee surveillance and performance measurement, particularly in combination with informal workplace cultures that reward long working hours. These trends can be detected in both hybrid and remote working in New Zealand where a lot of employees feel pressure to be available all the time and thus it further limits the separation of professional and personal life.

Even though burnout is slowly gaining prominence as a workplace concern, there is a dearth of legal redresses. Employees who think they have suffered burnout can try to make a personal grievance under the Employment Relations Act 2000, although this again normally involves an onus of actually establishing direct employer misconduct, which is hard to do in general due to the loose and cumulative nature of psychosocial injury. Such a high test of evidence may not encourage most of the employees subjected to discrimination to prosecute them and leave systemic risks unabated.

On the contrary, countries like Sweden and Norway consider psychosocial risks as binding labor laws. The New Zealand model with its guidance documents, indirect expressions, and flexibility on the part of the employer does not have the infrastructure in place to maintain psychological safety at work. As long as the issue of burnout is not officially accepted as a work-related risk that should be addressed through a particular law and legislation, the workers will continue to face the adverse effects of the condition.

India

Burnout is a systemic issue that is gaining recognition in India and is impacting the wellbeing of employees and organisational productivity. However, the existing employment law is still focused on physical safety and does not pay much attention to psychological disorders like burnout. This legal supervision creates a major loophole in the protection of employees against the mental health problems that are already becoming dominant in modern workplaces. The disorganized regulatory framework exposes employees to unresolved

stress, particularly in competitive industries (Saxena, 2024; Kulkarni, 2021). As the burnout rates continue to increase, especially in stressful occupations, a legal change is evidently required; where psychological well-being is incorporated into labour laws (Yadav, 2025).

In India, the Industrial Disputes Act 1947 and the Shops and Establishments Act 1953 offer some protection to employees, such as working hours, rest and wrongful dismissal compensation. These laws however, do not consider burnout as an occupational hazard (Kulkarni, n.d.). In as much as they are intended to safeguard employees against physically challenging environments, they do not take into consideration the psychological pressure or emotional exhaustion which is a factor that leads to burnout (Sinha et al., 2023; Sarkar et al., 2021). Consequently, employees with burnout lack the required legal protection or institutional support.

Burnout is especially common in industries like information technology (IT), healthcare, and finance, where employees have to work long hours, high workload, and lack of autonomy. Chronic stress is common among employees in the Indian IT industry as they are under pressure to stay productive, and they have an unhealthy work-life balance (Kumar, 2021; Gopal, 2024; Economic Times, 2025). In the health sector, research indicates that a quarter of the workers in the sector are experiencing burnout, which shows that there is a systemic risk in the public service professions (Saxena, 2024). However, organisational wellness programs are still rare and unrelated to everyday work activities (Sharma and Garg, 2024; Rao, 2024), which demonstrates that psychological safety is not yet a mainstream practice.

Indian trade unions still have a lot of problems to deal with in the context of the growing informal workforce and the recent changes in the legislation. Das and Singh (2021) point out that the old laws that govern unions, particularly in the public sector banks, include the Trade Union Act 1926 and the Industrial Disputes Act 1947, which prevent them from keeping up with the contemporary employment trends. The emergence of precarious work relations resulted in a strike across the country in May 2025, with unions calling on improved safety and pay levels in informal and contract employment (IndustriALL Global Union, 2023). In June 2023, the International Labour Organization (ILO) was petitioned by central unions over the Industrial Relations Code 2020, which they claim restricts collective bargaining and dilutes labour inspections (IndustriALL Global Union, 2025). Researchers observe that such measures are a strategic move to invoke international standards to supplement poor domestic safeguards (Khan, 2025).

Mental health protection is limited in Indian workplaces. Current Occupational Health and Safety (OHS) legislation is largely concerned with physical health and lacks the global best practices in the area of psychological safety (Yadav, 2025; Saxena, 2024). Although the Mental Healthcare Act 2017 gives people access to treatment of diagnosable mental illnesses, burnout is not a legal or occupational problem (The Talented Indian, 2024). It is more about care after the diagnosis than prevention or early treatment of stress and emotional burnout in the workplace (Patel, 2024).

Occupational Safety, Health and Working Conditions Code (OSHWC Code) 2020 aims at simplifying labour laws and enhancing the welfare of workers. However, even with the new standards of physical safety and working hours, the Code does not directly refer to psychological health and the causes of burnout directly (Narayana IAS Academy, 2025). According to scholars and public health professionals, the Code has significant shortcomings in addressing emotional wellbeing because although it promotes the basic workplace conditions, such as fair pay, physical safety, it does not focus on emotional wellbeing (Sarkar et al., 2021; Financial Times, 2023). The Indian labour law still focuses on physical risk factors, without any explicit legal recognition of burnout as an occupational risk and ignores the psychological burden of contemporary work.

METHODOLOGY

This research adopts a mixed methodology of the legal approach that uses a combination of doctrinal, legal-normative, and hermeneutic approach to determine how New Zealand and India incorporate the legal approach in relation to burnout. Doctrinal approach is applied in analysing statutes, case law and regulations that relate to mental health in the workplace in a workplace whereas juridical-normative approach tests the appropriateness of the current legal frameworks to support the well-being of employees and adherence to standards of justice and fairness. Comparative analysis based on doctrinal-policy framework mainly on three

selection criteria; (a) Jurisdictional relevance (b) Legislative responsiveness and (c) Availability of jurisprudence and policy data to ensure both normative depth and empirical validity. The hermeneutic method underlines this analysis in applying to social-0 cultural-economic contexts of the laws without disregarding the contrasting realities present in a developed country such as New Zealand and the developing country such as India. The comparative legal analysis allows determining the strong points, the weaknesses, and the best practice of each of the systems relying not only on primary but also secondary sources, thus, allowing a candidate to approach the evaluation of legal responses to the issue of occupational burnout in a practiced and pertinent context.

FINDINGS AND DISCUSSION

Burnouts, in both New Zealand and India, are less discussed despite an increasing number of cases internationally and empirical studies showing its adverse effects on the psychological wellbeing of workers and their productivity at their places of work internationally. The research finds both jurisdictions have not come up with the legal framework, which recognises burnout as a direct work-related risk even though the World Health Organisation classified it as an occupational phenomenon in 2019. This legal loophole exists even in such a country as New Zealand that is frequently recognized as the example of the progressive welfare model and employment protection. Its policies do not reach far enough to enforce binding obligations on employers to prevent or manage burnout even though its policies are geared towards general mental well-being. In comparison with India, the latter is even more behind. Their labour laws are based upon systems that focus more on physical safety with little or no emphasis on psychosocial risk.

In New Zealand, relationship factors including flood gate of the cases in healthcare system, shortage of staff, and heavy administrative restructuring has increased burnout, especially in psychiatrists and mental health providers. The literature supports the claims that the rate of burnout of 34 percent or above among the mental health professionals exists due to the lack of resources and unreasonable requirements concerning performance. The current occupational health and safety legal protection is not sufficient since this sort of protection is geared towards physical and not psychological threats. The institutions are also not required by law to offer assisting tools like stress management courses, wellness programs or counseling. In many ways, the country encourages the mental health discussion on the level of the population, but there is no concrete application and institutional safety nets.

More than that, the fact that there is a gap between the increasing consciousness about burnout in New Zealand and the ability of the legal system there to prevent and intercede in the field of burnout is disclosed. Even though the Health and Safety at Work Act 2015 (HSWA) places obligations on employers to manage risks to health (including that of mental health), there are no direct and enforceable provisions in the legislation, which directly address psychosocial risks like burnout. This has continued to make the compliance of the employers uneven.

Empirical evaluation strengthens the obligation of employers under the HSWA 2015. Taking an example of the case of New Zealand Employment Court – *Harris v Minister of Health* (2023), whereby compensation awarded for unmanaged stress shows that judicial intervention only happens whenever policy guidance fails in protecting employees.

The need to address this issue is actualized by sector-specific data. In healthcare, more than a third of psychologists exceed the clinical level of burnout due to the excessive mass of cases accompanied by a lack of systemic support (Fraser, Sauni, & Bennett, 2021). On the same note, there is massive stress and backsliding in the field of education. Education Review Office (2021) revealed that the majority of school leaders have excessive workloads, and a huge proportion of educators are leaving the field because of constant stress (Newshub Nation, 2023).

Although the 2024 guidance provided by WorkSafe New Zealand has been specified and determined as to the handling of the psychosocial risks, it is not binding in a legal perspective. This makes employees susceptible to the action of employers who ignore such recommendations as outlined in the paper by Dentons (2024). Studies carried out by the Ministry of Business, Innovation and Employment (2024) also point out that

burnout has influence on productivity and retention, especially in small enterprises.

Along with shortcomings present in the laws, cultural determinants of lack of open discussions about mental health apply and enforce denial. Most employees find themselves subject to pressure not to show that they are weak to be helped early. New risks associated with digitalisation and boundaries between work and life, according to the European Agency for Safety and Health at Work (2022), also weigh on the mental condition of workers.

The remedies that are available in the current legal framework are also unavailable. Burnout is gradual and not easy to show that it arises as a result of certain moves by an employer and therefore grievances against it cannot be easily sought under laws. In circumstances where burnout has not been recognized under the statutes of occupational hazards, workers are left unattended.

By contrast, there are countries such as Sweden or Norway where a psychosocial risk assessment and burnout prevention is required by national legislation. New Zealand has learnt that its respect to voluntary compliance was not effective. Legal obligations and structural changes are required to aid in guarding against worker burnout and ensure that they are safeguarded.

In India the case is different, yet alarming. India is having a growing issue of burnout that is not well reflected in the employment law of the country. Even though the problem of mental well-being has acquired more publicity, burnout is not an aspect that is regarded as the occupational risk and falls within the scope of the statutory protection. The physical safety and the living conditions are of utmost importance as it is given most attention in legal documents the most important ones include the Industrial Disputes Act 1947 and the Occupational Safety, Health and Working Conditions Code 2020. They do not contain any explicit reference to psychosocial risks and the workers are weakly protected in the case of chronic work-related stress. The Mental Healthcare Act 2017 took a certain positive turn as it represents one of the rare measures to secure the rights of a mentally ill individual, but it is more treatative than prophylactic. It imposes no duty on employers to identify, regulate or reduce psychological workplace harm. Thus, burnout is being dealt with at a point whereby it has developed to become a clinically diagnosable disorder and hence by the time it has developed to that point, the possibility of early intervention has been lost.

This absence of legal mandate is especially an issue in formal sectors such as information technology, health care and finance where the long work hours combined with highly challenging work and the absence of work life balance has led to massive burnout. Nevertheless, wellness programme and psychological services provision in such industries is not regular and not required. Where attempts are carried out they are often superficial, driven by the desire of companies to portray a positive image rather than compliance with the law, and have no relationship to the structural factors that cause burnout.

Cultural stigma makes the problem more complicated as it should be. In most of the workplaces in India, psychological strain remains a taboo topic and the employees may not seek psychological aid either as fearing to be labeled as weak or damaged as far as their profession is concerned. This encourages the culture of silence that delays the intervention process and burnout is not recognized. As opposed to physical damage, psychological fatigue cannot be seen because it is largely inexplicable.

India has an employment regulation that is minimalistic in character compared to the other countries that have a high level of institutional protection. Protections in India are weak because of the absence of legal protection without the complement of strong enforcing systems and welfare. The informal economy in India is heightened by psychosocial risks. The people working under such conditions are generally subjected to much stress with few means to assist and almost no protections by the law even though the trade unions may be able to bring in better mental health protection, because of the old laws and lack of any influence within the informal sector. The fact that it has recently cooperated with international organisations may be regarded as a sign that the level of awareness about the necessity of reform increases, yet it is very uneven on the domestic scale.

Overall, burnout is not understood in the Indian legal system as a problem that exists in the structure of work.

Psychological wellbeing is an outside sphere of employment regulation which lacks statutory classification, obligations enforceable on employers, as well as prevention strategies. As burnout has become a phenomenon that reaches more industries, the lack of official legal strategy continues to leave the majority of the employees vulnerable and unprotected.

There are restrictions to the trade union in relation to advocating mental health in both countries. The laws which guide Indian unions are aged and they did not cover a wide area including informal sectors, but they have delved into working with global institutions such as ILO recently. Burnout is not even a priority in collective bargaining yet in New Zealand unions, which are however more mature. Generally, none of the countries has initiated any legal system that can effectively address burnout as an organizational problem in the workplace. The existing systems are deficient in safeguarding the mental health of workers in the absence of proper legislation and preventive measures, as well as enforced obligations on employers.

RECOMMENDATIONS

The New Zealand and the Indian jurisdiction should see the importance of dealing with burnout as a health risk on the job. Such recognition has to be accompanied with enforceable employer obligations to detect and manage psychosocial risks on the job. Psychological safety must be transformed into a component of occupational health in the legal system instead of a wellness exercise that is graciously felt.

The governments should mandate medium and large businesses on workplace wellness programmes. These will be in the form of mental health screening, stress management training and counselling services as well as mental health leave. These must be substantive and must be practiced on routine basis by putting it in regulations that establish some concrete standards. The preventative measures must be legalized like mandatory check ups, anonymous reporting of burn out and official framework of addressing stress in work places. Evaluation and mitigation of psychosocial risks should be done regularly by the employers through internal reviews. There are sensitive markets like healthcare, education and finance to be covered which have rather high risks requiring certain protection.

India must extend reform to informal economy where least protection is provided by the law. Unregulated workforces should have access to mental health support extended with simplified compliance tools to smaller enterprises, mobile counselling services and cooperation with the non-governmental organisations. The labour inspectors should be trained on psychological risk and be empowered to get people obedient. Mental health should also be propagated as a bargaining commodity by the unions.

New Zealand needs to provide more powers to Worksafe to enforce the standard of mental health. Its current orientation must be strengthened in the form of rules. It should be enforced through the means of penalties, workplace audit, and reporting in industries where burnout has been reported.

The two countries must put more money in data collection through national surveys and work-place audits to provide guidance in reforms and improvements. They should use tax benefits or community appreciation programs to motivate employers that use effective mental health measures. Finally, reforms must be affected by the international best practices. Experiences of other societies such as Sweden and Norway can be used to make customized burnout protection in the light of minimalist legislation that suits local socio-economic conditions.

CONCLUSION

In conclusion, such a comparative analysis indicates that it is high time to redesign the employment law so that it was possible to handle the problem of burnout in terms of New Zealand and India properly. In though the legal and other social welfare support mechanism of New Zealand is to the large extent less hostile to the demands of mental health advocacy the available employment laws are no less wanting in the formal acceptance of burnout as an occupational risk and binding upon the duty of an employer to precautionary and supportive action to make sure that an employee is not left at the mercy of occupational burnout. The Indian case, however, is even trickier, due to the disintegration of the labour market, the prevalence of the informal

job market, the lack of proportionality of the network of mental health support. No matter the new tendencies in the legislation, the Indian legislation is still focusing basically only on the physical health concerns and could not take into their regulatory acts the ideas of the psychological safety, which implies that millions of workers could not discover any official legal way to protect themselves against the burnout.

Seizing the idea of minimalist principles by including it in employment law is an opportunity since it could be implemented in different and resource-scarce contexts. However, this should not just be minimum, but it must also be enforced, institutionalized and culturally accomplished. The findings of this research enable the authors to say that burnout is not only the matter of policy on the workplace or the problem of the local managerial goodwill but requires a structural legal solution to which employer liability is to be the matter of responsibility and human well-being and mental health is to be an inseparable component of the safety of the workplace environment.

To ensure that burnout and its long-term outcomes can be minimized, both countries must cease to idealized wellness talk and begin to implement lawfully enforceable objectives. Cooperation between government departments, employers and unions ought to be developed in such a way that the employment law and employment practice ensure in the safeguarding of mental health. There would be learning all the good things which are done abroad and translating it to the local social economic realities so that a balance can be reached between having a minimalistic legal regime and an all-embracing protection of the working individual. And, it is not a problem of law amendment only because what is addressed in legislation requires to improve the state of human dignity, strengthen and sustain the working population, and the society both to be more healthy and resistant.

REFERENCES

1. Blayner, R. (2022). Understanding burnout in New Zealand's psychology profession. *New Zealand Journal of Psychology*, 51(2), 57–65. https://www.psychology.org.nz/application/files/4016/9344/5023/Blayner_57-65.pdf
2. Das, S. C., & Singh, S. (2021). Trade unionism and industrial relations in Indian organisations: A scientific exploration. *Scandinavian International Business Review*, 11(7), 29–49.
3. Dentons. (2024). Mental health at work – employer's obligations. Retrieved from <https://www.dentons.co.nz/en/insights/alerts/2024/october/9/mental-health-at-work-employers-obligations>.
4. Dentons. (2024, January 30). Employment and health and safety in New Zealand. <https://www.dentons.co.nz/en/insights/articles/2024/january/30/employment-and-health-and-safety-in-new-zealand>
5. Economic Times. (2025, June). India's workforce witnessing early onset of chronic illnesses: Report. The Economic Times. <https://health.economictimes.indiatimes.com/news/industry/indias-workforce-faces-alarming-rise-in-chronic-illnesses-a-wake-up-call-for-employers/121488229>
6. Education Review Office. (2021). Learning in a COVID-19 world – Impact on teachers and principals (Summary). <https://evidence.ero.govt.nz/media/j00jmoyl/learning-in-a-covid-19-world-impact-on-teachers-and-principals-summary.pdf>
7. Effectory. (2023). The emotional and economic costs of overlooking wellbeing in the workplace. Retrieved from <https://www.effectory.com/knowledge/the-emotional-and-economic-costs-of-overlooking-wellbeing-in-the-workplace/>
8. European Agency for Safety and Health at Work. (2022). Digitalisation and psychosocial risks. https://osha.europa.eu/sites/default/files/documents/Digitalisation-and-PSR_EN.pdf
9. Financial Times. (2023). Burnout concerns prompt shift in law firm wellbeing policies. Financial Times. <https://www.ft.com/content/5e2171e5-d4b1-484b-b75f-04c2b4c2e3fd>
10. Fraser, A. (2025). Psychologist Burnout: Exploring the Causes, Consequences, and Coping Strategies of Burnout Among Public Psychologists in New Zealand. University of Waikato.
11. Fraser, A., Sauni, P., & Bennett, S. (2021). Psychologist burnout in Aotearoa: Causes, consequences, and recommendations. *New Zealand Medical Journal*, 134(1535), 61–71. <https://nzmj.org.nz/media/pages/journal/vol-134-no-1535/50a2739f5c-1696470588/vol-134-no-1535-61-71.pdf>

1535.p df

12. Gopal, K.S.U . (2024). Ctrl + Alt + Disconnect: Mental health of India's frontline workers. Observer Research Foundation.<https://www.orfonline.org/expert-speak/ctrl-alt-disconnect-mental-health-of-india-s-frontline-workers>
13. Haar, J. (2023, July 19). Workforce suffering from 'COVID-19 hangover' as burnout risk remains.
14. Massey University.[https://www.massey.ac.nz/about/news/workforce-suffering-from-covid-19-hangover-as-burnout-risk-re mains/](https://www.massey.ac.nz/about/news/workforce-suffering-from-covid-19-hangover-as-burnout-risk-re-mains/)
15. Henning, M. A., Hawken, S. J., & Hill, A. G. (2009). The quality of life of New Zealand doctors and medical students: What can be done to avoid burnout? *The New Zealand Medical Journal*, 122(1307), 10-18.
16. IndustriALL Global Union. (2023). Indian unions ask ILO to discuss attacks on workers' rights.<https://www.industrialunion.org/indian-unions-ask-ilo-to-discuss-attacks-on-workers-rights>
17. IndustriALL Global Union. (2025). Indian unions call for increased fight against precarious work.<https://www.industrialunion.org/indian-unions-call-for-increased-fight-against-precarious-work>
18. International Labour Organization, Committee of Experts on the Application of Conventions and Recommendations. (2024). Application of international labour standards 2024. International Labour Organization.
19. Johnson, A. (2019). Minimalism in New Zealand's approach to workplace burnout: A comparative study. *Employment Law Review*.
20. Khan, Z. (2025). Legal framework for mental health in Indian workplaces: Rights and responsibilities. *Indian Journal of Law and Legal Research*. <https://www.ijllr.com/post/legal-framework-for-mental-health-in-indian-workplaces-rights-and-responsibilities>
21. Kulkarni. (n.d.). Psychological safety and mental health in the workplace: Legal protections and compensation for psychological injuries. Retrieved from <https://www.legalserviceindia.com/legal/article-18413-psychological-safety-and-mental-health-in-the-workplace-legal-protections-and-compensation-for-psychological-injuries.html>
22. Kumar, H. (2021). Managing workplace stress and burnouts in the IT industry in India: A cross-sectional study. *Journal of Cardiovascular Disease Research*, 12(5), 3021–3027. <https://doi.org/10.48047/jcdr.2021.12.05.314>
23. Kumar, S., Bhagat, R. N., Lau, T., & Ng, B. (2006). Psychiatrists in New Zealand: Are they burning out, satisfied at work and, in any case, who cares? *Australasian Psychiatry*, 14(1), 20-21.
24. Maslach, C., & Leiter, M. P. (2017). Burnout: A short history and future directions. In *Burnout research* (pp. 1-14). Springer.
25. Mental Health and Wellbeing Commission. (2024). Annual Report 2024.<https://www.mhwc.govt.nz/assets/Corporate-publications/Annual-report-/MHWC-Annual-Report-2024web.pdf>
26. Ministry of Business, Innovation and Employment. (2024). Preventing burnout: Wellbeing in your business.<https://www.business.govt.nz/wellbeing-support/wellbeing-in-your-business/preventing-burnout>
27. Narayana IAS Academy. (2025, February 4). Mental health & Labour Code. Narayana IAS Academy Navigator.<https://navigator.narayanaiasacademy.com/current-affairs/2025-02-04/Mental-Health-AND-Labour-Co de>
28. Newshub Nation. (2023, May). Burnout on the frontlines – why teachers are leaving in droves.Newshub.<https://www.newshub.co.nz/home/shows/2023/05/newshub-nation-burnout-on-the-frontlines-why-teac hers-are-leaving-in-droves.html>
29. Observer Research Foundation. (2024). New labour codes and mental health compliance. Retrieved from <https://www.orfonline.org/expert-speak/new-labour-codes-and-mental-health-compliance>
30. Patel. S. (2024, December 11). EY worker's death spotlights India's unprotected white collar labour.
31. Reuters. <https://www.reuters.com/world/india/ey-workers-death-spotlights-indias-unprotected-white-collar-labo ur-2024-12-11/>
32. Prasetya, A., Khairunnisa, H., & Aziz, A. (2021). The effect of work stress and burnout on job satisfaction and employee performance: A test of conservation of resources theory. 10.2991/aebmr.k.210928.016. Retrieved from <https://doi.org/10.2991/aebmr.k.210928.016>
33. Rao A. (2024). Mental health at work: A strategic priority for businesses in India. India

- Briefing.<https://www.india-briefing.com/news/mental-health-at-work-a-strategic-priority-for-businesses-in-india-36938.html/>
34. Sarkar, S., Menon, V., Padhy, S., & Kathiresan, P. (2024). Mental health and wellbeing at the workplace. *Indian Journal of Psychiatry*, 66(1), 20–28.
https://doi.org/10.4103/indianjpsychiatry.indianjpsychiatry_608_23
 35. Saxena, V. (2024). A review of occupational mental health status in India. *Online Journal of Health and Allied Sciences*, 23(1), 1–6. <https://www.ojhas.org/issue89/2024-1-3.html> ojhas.org
 36. Sharma, S., & Garg, S. (2024, January 25). Unlocking psychological safety: Why holistic wellbeing is fundamental. *ETHR World*. <https://hr.economictimes.indiatimes.com/news/workplace-4-0/employee-wellbeing/unlocking-psychological-safety-why-holistic-wellbeing-is-fundamental/107131466>
 37. Sinha, S., Chaturvedi, S., Srivastava, R., Shukla, S., & Sharma, S. (2025). Burnout among mental health professionals in India: A qualitative enquiry. *Annals of Neurosciences*.
<https://doi.org/10.1177/09727531251327477>
 38. The Talented Indian. (2024, December 8). Breaking down the Mental Healthcare Act 2017. *The Talented Indian*. <https://www.thetalentedindian.com/breaking-down-the-mental-healthcare-act-2017/>
 39. WorkSafe New Zealand. (2024). Managing psychosocial risks at work. <https://www.worksafe.govt.nz/topic-and-industry/work-related-health/mental-health/managing-psychosocial-risks-at-work/>
 40. WorkSafe New Zealand. (2021). Supporting mentally healthy work. Retrieved from <https://www.worksafe.govt.nz/laws-and-regulations/operational-policy-framework/worksafe-positions/supporting-mentally-healthy-work/>
 41. World Health Organization. (2019). Burn-out an "occupational phenomenon": International Classification of Diseases. Retrieved from <https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases>
 42. Yadav, Y. (2025). Legal recognition and protection of mental health rights of employees in India: A labour law perspective. *Indian Journal of Law and Legal Research*. <https://www.ijllr.com/post/legal-recognition-and-protection-of-mental-health-rights-of-employees-in-india-a-labour-law-perspective>