



From the editor: Pike River 15 years on

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In this edition we mark 15 years since the Pike River mine disaster killed 29 men. We passed through the initial shock and anger to a promised land of new and more effective legislation and a new regulator. Unfortunately, the necessary regulatory system to underpin the new Act was not delivered under previous governments and our current government wishes to “reform” the incomplete system to deliver less enforcement, more advisory services by WorkSafe and more self-regulation.

For a full picture of where we have gone wrong read the thoroughly researched and eloquent article by Rebecca Macfie (2025) in the [New Zealand Listener of 15 November 2025](#).

Quad bikes

On 7 November 2025 the Radio NZ website reported the death of a farmer due to his quad bike rolling on him (de Graaf, 2025); 15 months earlier Radio NZ reported four such deaths in July 2024 (Anon, 2024). More than 79 people died in quad bike “accidents” in the 15 years to 2023 and in the 13 years to 2023 just under 700 people were seriously injured using quad bikes at work.

My dictionary defines an accident as an “unfortunate incident that happens unexpectedly and unintentionally” but the causal factors of quad bikes rolling over and the consequences for drivers are well known.

But what of the impact of quad bike “accidents” on the families of the dead farm workers? Often, farms are run by couples and the death of one means the other will struggle to keep the business going. There may also be children who are deprived of a parent. We too often overlook the personal and economic impacts of such serious injuries and fatalities.

WorkSafe keeps giving advice and exhorting quad bike owners to fit rollover protection. At what point do we take action to require rollover protection?

I therefore welcome a rapid review in this Journal of 32 articles about quad bikes by Professor Joanne Crawford showing what has been done in Australia and elsewhere and could be done in New Zealand to reduce the number of deaths and injuries.

Asbestos and silicosis

As this edition is published, we also mark Asbestos week (17-23 November), an opportunity to briefly reflect on progress with the elimination and minimisation of the occupational disease due to asbestos and silica dust.

In 1934 in the UK, HM Stationery Office published research on the effects of asbestos dust on lungs (Merewether & Price, 1930). Around the same time, the Chief Medical Officer of one of the major manufacturers of asbestos products warned the Company Secretary of the legal liability implications of asbestos dust. Research in the 1960s showed the high death rate due to asbestosis and mesothelioma in asbestos mines in South Africa (Carter, 2005) that clearly demonstrated the dangers of asbestos products. In the 1980s, another of the major manufacturers eliminated the manufacture of all asbestos and, in its new business model, began safe removal of asbestos from buildings.

It is not just workers who can be affected by asbestos and similar hazardous substances. Dust and other contaminants inadvertently brought from the workplace to the home can be a deadly takeaway exposure, causing harm to the families of workers (Kalweit et al., 2020). We know that workplace dusts in industries such as woodworking, stone working, and waste and recycling can harm the health of workers but what of the cleaners (Beattie et al., 2023)?

Have we learned from such experiences?

New Zealand research by Smartt (2004) for the 25-year period 1974-1999 found that “Deaths from asbestos related lung disease were grossly underestimated”. Asbestos remains the number one cause of occupational disease and death in New Zealand.

And so to silicosis and engineered stone

The British HSE operates in a mature, well-resourced regulatory framework. It has published applied research reports on exposure to silica dust that causes silicosis, and the need to monitor the effectiveness of critical controls (Bradshaw et al., 2010; Easterbrook & Brough, 2009). Since then, engineered stone has been developed (Fazio et al., 2025). When cut or drilled this releases respirable crystalline silica (RCS), causing a range of lung diseases, including accelerated silicosis (Muthu & Edwards, 2025; Tomic et al., 2025).

Engineered stone caused so many deaths in Australia that it was banned in 2024 (Kirby, 2024). Before that, research in Sydney, Australia, by Seneviratne et al. (2024) showed that migrant workers in small business that fabricated engineered stone were “exposed to RCS dust levels which may be associated with a high risk of developing silicosis” and that “dust exposure controls were inadequate with ineffective ventilation and inappropriate respiratory protection”.

In 2025, the Ministry of Business, Innovation and Employment consulted on what action should be taken about engineered stone. A consensus view from the Business Leaders Health and Safety Forum (2025), health and safety professionals (Sissons & Harper-Slade, 2025) and others argued for a ban on engineered stone. Six months later we still await a decision.

Are we doomed to persistently learn late lessons (Green, 2001)?

Our other articles

Psychological contracts

In this edition we also welcome research by Leanne Frost looking into the development of psychological contracts between new workers and their employer. As Leanne writes in her introduction:

Healthy workplace relationships are key to a satisfying employment experience. A critical aspect of these relationships is a clear, mutual understanding of expectations. An employee's belief about what their employer is expected to provide in return for their work forms the psychological contract

What factors influence the development of such relationships?

Temporary traffic management

A great deal of noise has been created around road cones. It is therefore a relief to publish an article about some of the realities about controlling temporary traffic management in the real world. As the authors note:

TTM worksites account for 66 serious and fatal injury crashes each year in New Zealand. To reduce incidents on worksites there has been a shift from prescriptive guidance to a risk-based approach, with the aim of moving to more impactful safety controls.

That shift started about three years ago and is likely to take some years to complete. We look forward to further research showing the results of this intervention.

Conferences: Ergonomists, Hygienists and HASANZ

In the last edition of the Journal we published the abstracts from the New Zealand Occupational Hygienists conference. In this edition we have abstracts from the 2025 Human Factors and Ergonomics Society of New Zealand (HFESNZ) conference. The abstracts from both conferences cover a diverse range of topics that have been investigated and problems solved and provide much for us to think about. I hope that some of the abstracts will be expanded into full articles.

A reminder that the next HASANZ conference will be in Wellington 16-18 September 2026. The Journal will publish conference abstracts.

Artificial intelligence and editorial changes

We have seen the impact of artificial intelligence (AI) across the economy and on teaching, learning and research, and we have decided that future submission to the Journal must include a statement from authors about whether and how AI was used in gathering evidence or writing the manuscript. This will help readers remain confident that the content is reliable and of human origin.

Our authors and anonymous reviewers

This Journal is about research in, or comment on, the practice of workplace health and safety. We are dependent on authors giving their time to write about a topic they have researched or are knowledgeable about. Thank you!

My thanks also to our anonymous reviewers who give their time and knowledge to help ensure the articles published in this Journal are accurate and clearly written.

Together we aim to improve the practice of workplace health and safety in New Zealand and elsewhere.

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