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Mental Health and Wellbeing Commission Gatekeeping Raises Alarm Bells

The Physicians and Scientists for Global Responsibility New Zealand (PSGRNZ) is raising serious concerns about whether New Zealand's Mental Health and Wellbeing Commission (MHWC) can fulfil its statutory mandate to improve mental health outcomes, if nutrition for brain health is deemed out of scope.

Despite extensive scientific literature linking nutrition, metabolic health and nutrient status to mental health outcomes, these factors are largely absent from the Commission's policy language, monitoring frameworks, advisory processes and published outputs.

PSGRNZ was prompted to signal this issue after its recently published report, *Reclaiming Health: Reversal, Remission and Rewiring*, was [emailed as an open letter](#) to the Commission with a request that it be forwarded to the Board and senior executives.

One working day later, the Commission responded:

"The paper you have sent falls outside areas we have prioritised in our Statement of Intent. It is not something we can bring to our immediate attention."

Nine days later, PSGRNZ was advised that the decision about whether the Commission's Board and senior leadership would even receive the material was left to executive discretion. The charity says this raises serious questions about transparency, independence and openness to external evidence within a public oversight body.

In its [earlier open letter](#) to the Commission, which was also sent to members of Parliament, senior executives across the health agencies, and the Auditor General, PSGRNZ had highlighted the troubling:

"absence of a policy mandate to assess diet and nutrition by age, sex, developmental stage, ethnicity, or metabolic vulnerability across key health strategies, including those for children, Māori, Pasifika, pregnant women, and mental health."

The Commission is yet to step into this gap to evaluate the role of higher dose micronutrient treatments as an adjunct intervention for people with brain-related psychiatric conditions. The *Statement of Intent 2025-2029* signals the Commission's work programme up to and including 2029. Under the Mental Health and Wellbeing Commission Act (2020) and amendments to the Pae Ora (Healthy Futures) Act 2022, the Commission is required to assess medium- and long-term trends affecting mental health and wellbeing outcomes.

PSGRNZ is concerned that the Commission appears to be replicating Ministry of Health approaches, treating mental health almost exclusively as a psychological and social issue, while systematically excluding biological and metabolic dimensions of brain health.

Following the Commission's response, PSGRNZ reviewed the Commission's extensive report archive and found its work is largely oriented toward monitoring service access and delivery, tracking system performance indicators, and producing reports and dashboards on service utilisation.

PSGRNZ lead researcher and Reclaiming Health author Jodie Bruning said:

"While these activities provide information about how the system is functioning, they do not address whether the system itself is adequate, complete, or based on the best available evidence for improving mental health outcomes."

The charity is concerned that the Commission has significantly underestimated the scope of its statutory powers.

Nutrition excluded as an adjunct intervention

PSGRNZ had identified that [Reclaiming Health](#) fills a critical and unexplored gap in the Commission's work. The January 2026 report outlines the foundational role of nutrition in mental health, including dedicated chapters on [psychiatric nutrition](#) and [food addiction](#). Highly refined foods may increase the risk of poor brain health and psychiatric diagnoses, and health coaching can address these concerns.

The report [highlights](#) that lower-socioeconomic groups are more vulnerable to insufficient nutrition, leaving them at higher risk of poor metabolic and mental health outcomes; and that [health targets](#) are decoupled from policies. [Part III of the report](#) outlines suites of interventions which can directly support these groups, including [chapter 12, Whole of System Reform](#).

PSGRNZ trustee and Auckland-based doctor Paul Butler noted that:

“Children, young people and pregnant women have higher nutrient requirements due to key developmental phases. Yet the Commission remains silent on the role of nutrition and dietary reform in supporting brain health, and on appropriate therapeutic options for people who do not respond to psychiatric medication or experience intolerable adverse drug effects.”

PSGRNZ argues that current mental health treatment approaches raise serious ethical issues, particularly in relation to lack of therapeutic choice, lack of informed consent, and the exclusion of lower-risk adjunct interventions.

Others share these concerns:

“If people are not informed about the role of high-dose vitamins and minerals in supporting brain health, informed consent is compromised,” stated Professor Julia Rucklidge Director of Te Puna Toiora, the Mental Health and Nutrition Research Lab at the University of Canterbury. “New Zealand trials show that broad spectrum micronutrients support optimal brain function, while lacking the serious side-effect profile of many commonly prescribed psychiatric medications.”

“The Commission is monitoring the system, not interrogating it,” Bruning said. “Oversight has been reduced to internal performance measurement, rather than independent inquiry into what actually improves human outcomes.”

PSGRNZ is calling on the Mental Health and Wellbeing Commission to:

- exercise its statutory powers to conduct wide-ranging inquiry beyond service monitoring
- incorporate biological and metabolic determinants into its analytical frameworks
- seek independent expert advice on nutritional psychiatry and brain health

“The Commission was created because existing approaches were failing,” Bruning said. “Oversight that reproduces the same framing cannot resolve a crisis that continues to deepen.”

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RECLAIMING HEALTH: REVERSAL, REMISSION & REWIRING.

- [LINKS TO: OPEN LETTER; EXPERT STATEMENTS OF SUPPORT; 3 PAGE SUMMARY PAPER + RECOMMENDATIONS FOR REFORM; CHAPTER-BY-CHAPTER READ.](#)
- [LINKS TO: RECLAIMING HEALTH FAQs.](#)

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