

## Occupational Psychiatry Special Interest Group – newsletter January 2026

Dear OPSIG membership.

**2025.** This was an important year for our [OPSIG](#) and I want to thank you for being part of it. Our first ever whole-day conference [Work and mental health](#) was a tremendous success and it was wonderful to see so many face-to-face at the College. We had a rich residents' poster section and Dr Bex Bennett was a deserving winner of our annual prize with her work: [Occupational psychiatry and the female veteran experience: the role of sisters in service](#)

**Spring webinar – neurodiversity and work.** Our next webinar is on Tuesday 10<sup>th</sup> March 2026 from 3pm – tickets are available now: [Neurodiversity and work: clinical, occupational and organisational perspectives, to support and maximise talent of a neurodiverse workforce](#). We have a fantastic line up planned for you with perspectives from occupational psychology, academia, lived-experience and expert clinical psychiatric practice. The Society of Occupational Medicine resource [Evaluating and supporting neurodifferences at work](#) is also a worthwhile reference for OPSIG members aligned to the subject. It will be a great webinar and we hope to see you online that afternoon.

**Keep Britain Working Review.** Sir Charlie Mayfield's report has now been published: [Keep Britain Working](#) and is crucial reading as we recognise "Britain is facing a quiet but urgent crisis", with a call to action for employers, workers and Government.

**The economic argument.** Focusing more specifically on mental ill-health, this year our Royal College has produced an [Economic Case for Good Mental Health](#). Recently, at the World Congress of Psychiatry in Prague, a coalition of national societies – including RCPsych taking a leading role – signed the [Prague Agreement](#) making an international case for investment in mental health services. These references highlight the eminent treatability of mental disorders like anxiety and depression, with both timely intervention and biopsychosocial treatment. For those in employment an understanding of the bidirectional impact of their work on mental health will be crucial for treating psychiatrists and teams.

**Good work as a treatment outcome.** Our College position statement: [PS01/22 Occupational Mental Health](#) highlights that all mental health professionals should view staying in, returning to, or obtaining, appropriate work as a key treatment outcome. The [2025 Healthcare Professionals' Consensus Statement for action on health and work](#) reiterates this, prompting healthcare staff to ask about work, understand its importance, advise patients on the impact of health and treatment on work, and reasonable adjustments where necessary.

**Prevalence of poor mental health.** This is never more important than now. The [Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England, 2023/4](#) highlights an increased prevalence of common mental health conditions from 17.6% in 2007 to 22.6% in 2023/4 among those 16 – 64, with young people, who have the most working potential ahead of them, being a key concern. You can read our President's response here: [RCPsych response to APMS](#).

**Chair Election.** Last to mention is that my 4-year tenure is almost over and elections for the OPSIG Chair are now live: [SIG Elections](#). My time has been thoroughly rewarding with our [OPSIG](#) and recent years have seen us succeed in expanding our reach into the College membership, developing scope and scale of our events, and seeking to influence policy and change. Please see the details online if you are considering standing and do get in touch if you want to learn more. It has been my privilege to be your OPSIG Chair.

Dr Darren Minshall – Chair OPSIG and Executive Committee for OPSIG