

In this issue of *Occupational Medicine*

Disasters are a source of serious disruption to the normal functioning of societies wherever they occur around the world. Their impact is not only environmental, but also usually human, material and economic. What then is the role of occupational health practice in addressing the impact of disasters when they occur? Ahmad and Murray present a cogent discussion on this subject in this issue of *Occupational Medicine* [REF XXXXXXX]. Their discussion among other things touches on the Sendai Framework for Disaster Risk Reduction and the opportunities and role occupational health practice can play in all phases of disaster management including prevention, preparation, response and recovery.

The role of occupational health practice is further explored by Redfern and Macphee [OM-18-CA-019] in relation to the facilitation of mentorship for individuals in their care. Their article articulates the importance of mentorship in medicine and recognises the importance mentorship as one of the three distinct components of employee well-being, together with coaching, counselling and mediation. The role of mentorship within the discipline of occupational health practice and its potential benefits to occupational health physicians who frequently work in relative isolation and in increasingly complex organisations is also deliberated.

The responsibility of managers' in managing workplace mental health issues is reported in a small cross-sectional questionnaire study which examined whether knowledge, attitudes and confidence were associated with managers' responses to mental health issues amongst their staff. Bryan *et al* [OM-17-OP-146] found that managers' confidence appeared to be the strongest predictor of their behaviour in contacting employees suspected with or confirmed to be suffering from a mental illness. They also found that mental health literacy was not significantly associated with managers' behaviour in contacting staff members on sickness absence leave for mental health reasons. To alter workplace practices, the authors suggest that manager training should focus on confidence building and stigma reduction.

The influence of personality on disability pensioning and long-term sick leave is explored by Ostby *et al.* [OM-17-OP-198]. This interesting study examined how the influence of "the five big" normal personality traits are associated with disability pensioning and long-term sick leave. They reported a statistically significant association between the personality trait neuroticism and disability pensioning. High neuroticism was found to be associated with risk of disability pensioning while increases in extroversion and conscientiousness were negatively associated with the same variable. No statistically significant associations were found between personality traits and long-term sick leave. They concluded that personality is strongly associated with disability pensioning but not long-term sick leave.

Finally, in an interesting short report which investigated the impact of hand-arm vibration syndrome (HAVS) on functional limitations in workers, with a focus on characterising the impact of HAVS on task-related disability and activities of daily living, Budd *et al.* [OM-18-SR-002] reported that more than half of the 107 participants had reported difficulties undertaking basic activities of daily living required for independent adult living. This study

provides additional useful insights into the impact of this chronic occupational disease on basic daily living activities as experienced by the worker.

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References

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4. Ostby *et al.* Personality and long-term health-related benefits. *Occup Med (London)* 2018; **68**: xxx -xxx
5. Budd D *et al.* Functional limitations in workers with Hand-Arm vibration syndrome. *Occup Med (London)* 2018; **68**: xxx -xxx