Influential women in occupational health

In the 20th century, women’s roles as practitioners and leaders of industrial hygiene and occupational medicine rose to new heights as never before. Historic discoveries led to advances in the ways we investigate, treat, and prevent illness. From China to South Africa, the UK to the USA, women in the 20th century illuminated the work of many allied health professions. Representatives include:

- Alice Hamilton (1869–1970) (USA)—Expert on lead; peace and social reformer. Hamilton fought for legal protection from dust, gases, and fumes, pressing for reform of unsafe working conditions.
- Victoire Cappe (1886–1927) (Belgium)—Cappe organised the first group of young women workers affiliated to the Needleworkers Union (Syndicat de l’Aiguille).
- Molly Newhouse (1912–2000) (UK)—British doyenne of occupational health. Newhouse was in obstetrics, helping to liberate a fine little Frenchman, whom she christened: Winston.
- Sophia Kisting (South Africa)—Working to reduce HIV infection, improve reproductive health, and assess workers for silicosis and asbestosis, Kisting seeks to establish one good global standard for working conditions.
- Yiqun Wu (China)—A key international figure in the prevention of lead poisoning. Wu established and now directs China’s biological monitoring programme, which includes 125 provincial laboratories.

The energetic and compelling stories of these influential leaders are epic in scope, real national and international heroes. The idea is to stimulate readers with lessons to be learned from a better understanding of legendary figures and contemporaries whose work was inspired by them. With a longstanding interest in increasing the visibility of occupational health, we recommend all look now, before it disappears.

REFERENCES


APHORISM OF THE MONTH

“Success has 100 parents, failure is an orphan”

In the academic world, we are taught that plagiarism is more or less the ultimate sin, yet in public health practice we are suffering from a deficit of plagiarism and unwillingness to do things that were “not invented here”. Civil servants, on the other hand, get used to hearing their own words and phrases being uttered by ministers. It is part of the job to get them there. We shouldn’t be really too bothered in public health practice if we don’t get the credit for our own ideas, what is important is that things happen to improve the health of the population for which we have some responsibility. The very fact of securing co-ownership will mean that frequently others claim the credit. Perhaps we should take a leaf from the wise parent who rejoices in offspring when they have mastered the art of riding a bicycle when they claim to have done it themselves.

1 Ashton JR. “Not invented here”. J Epidemiol Community Health 2003;56:481.