

Speaker's corner

Influential women in occupational health

Today, epidemiological concerns about safety and health in the workplace draw communities together. From asbestos related disease to lead poisoning, we are informed of the social and monetary costs of poor health. In this context, amidst globalisation and power transitions, the struggles (and success) in occupational health are especially relevant.

The *JECH* Gallery series that debuts this month "Influential women in occupational health"¹ highlights advances by women in occupational health, providing a venue to see the female face of many important contributors. The underrepresentation of women in scientific research has been underscored in many studies,² with a paucity of biographies contributing to a shortage of role models for students and professionals in the field. The aim of the series is to rectify this, in small part, by calling attention to a few great people. These are creative leaders with passion, interesting, and influential in the world around them.

TWENTIETH CENTURY: WOMEN TAKE THEIR PLACE 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 medicine, recognised that small doses of asbestos caused mesothelioma, which led to an asbestos ban. During the second world war, one of her first duties was in obstetrics, helping to liberate a fine little Frenchman, whom she christened: Winston.

- 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.
- 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.

The hope is that a new generation can taste the fruits of their labours, celebrate contributions from their hard work and perhaps, inspire some to enter and lead the field. In an age of increasing competition and fragmentation in health and social care, the continuing work in occupational health is a pressing and pertinent focus.

Our 12-part series takes a look at how the occupational health community is responding to health challenges around the world. How have other generations responded to similar conditions? What are the best minds saying about how we might protect our populations from large scale health problems? Viewers in the Gallery will move through high and low periods in history, in a geographical tour of public health—from the USA to the UK, from South Africa to the Pacific Rim.

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.

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- 2 Dewandre N. European strategies for promoting women in science. *Science* 2002;295:278–9.

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".¹ 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.

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