

Letters to the Editor

Problems facing women veterinarians, past and present

In "Women in veterinary medicine" (*JAVMA*, Aug 15, 2000, pp 472–476), Drs. Margaret R. Slater and Miriam Slater point out problems that were faced by women veterinarians in the past. They also make it clear that it took external legal and social pressures to open education to women in our generally reluctant profession. They conclude that social trends and our burgeoning numbers should now make women veterinarians optimistic about the future.

As one who graduated in 1947 and is now immersed in our history, I find it hard to be as sanguine as the authors, even though they show that some ways already exist to "make the professional life of practitioners and academics more humane and more equitable for both sexes." I am more inclined to fear that necessary changes will be made too slowly to meet our profession's needs. Consider an example from the past.

At the end of the 19th century, veterinary practice was tightly tied to horses, both in cities and in the countryside. When automobiles appeared on the scene, some veterinary organizations and faculty members myopically asserted that veterinarians who bought and used cars were undercutting the economic base of the profession.

Instead of condemning the tide toward cars, a few individuals, including 2 pioneering women who earned their degrees in 1910, tried something new: dog and cat hospitals. Even though a few classes in small animal medicine had been taught before 1900, and even though the American Animal Hospital Association was founded in 1933, regulatory medicine and food animal practice provided the crutches that kept the profession limping alongside the automobile and tractor until after World War II. Thus, it took at least 40 years for our institutional mind to embrace the kind of private practice that would become the chief image and mainstay of the profession in the second half of the 20th century.

Regarding the present, the authors say, wisely, "whatever...solutions are offered in the future, the needs of women will have to be taken into consideration." However, such needs won't get met automatically. If our profession is to avoid doldrums again, we must focus on ways to make working in veterinary medicine "more humane and equitable" for men and women. There are men who understand this. We need their help to place sizable numbers of women in decision-making positions right away...women who have already experienced problems balancing families and careers in private practice, academia, and other settings...women who can help the veterinary profession

prepare for the time when more women than men will be veterinarians. Tinkering with present-day economics will, I fear, be too much like blaming the internal combustion engine a century ago.

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Types of leadership in the veterinary community

The article titled "Leveling the playing field in veterinary leadership" (*JAVMA*, Sept 1, 2000, pp 630–631), calls for the question, just what is leadership? The root word, leader, offers numerous contradictory definitions such as the primary shoot of a plant—suggesting new fresh growth, something for guiding fish into a trap, or a member chosen to manage activities. What are the criteria for veterinary leadership, what are the dimensions of the playing field, and what are the names of the teams on the field? Leadership presents the same contradictory characteristics; for example, in this century the British people were happy to be led into war by socialist pacifist Neville Chamberlain. When it came to the real-time danger of war, they were happy to be led by Winston Churchill, who had previously been regarded as a dangerous hothead. After the successful prosecution of the war, the British people discharged Churchill in favor of another socialist and a succession of socialists who wrote the history of British experience for the next 30 years. The lesson is that there are different kinds of leaders and different kinds of followers for different circumstances. One kind of leader will attract followers by force, conviction of ideas, and resolute action; the other kind will find an audience of clients looking for a leader.

In either case, becoming a leader requires some desire, work, and commitment to achieve that status. If the desire is to be a custodial leader in a stable establishment committing to move up through the chairs, it is relatively simple and easy. The case for a

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leader who would challenge the establishment and change the course of events is exceedingly difficult, arduous, and most likely expensive.

The veterinary profession is a stable establishment operating compatibly within a stable matrix of the larger society. In its preamble to the executive summary of the KPMG LLP veterinary market study, the AVMA/AAHA/AAVMC Joint Steering Committee identified substantial societal problems as the first listed item of unprecedented opportunities and potential difficulties. The national dialog, such as it has been, has not yet defined what these societal problems are. Furthermore, the class of veterinarians identified as most affected—private practitioners—seem to have neither the organization, forum, nor motivation for engaging the debate. Contemporary society functions through special interest organizations protecting and promoting their own agendas. Private practice veterinarians must organize their own special interest agenda, along the same lines as the Association of American Veterinary Medical Colleges, or submit to competing agendas. Umbrella organizations, such as the AVMA, cannot properly represent practitioners' unique needs. Practitioners must bring their own bulldozer to level the playing field and train a dedicated team to play upon that field. Leadership on this team is wide open for any and all who would aspire to that high office.

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