
From the Editor

Many of the responses to the topic of women's health indicate a lack of awareness in American society of the importance of women's health. Serious and dedicated health care workers and scholars who for years have supported improvement in women's health are at one extreme of the issue. They are gratified that there is some societal recognition and support for this important field of study. However, these same supporters sometimes bring a microscopic view to the study of women's health by focusing primarily on reproduction and health problems attributed to the unique biology of women. The other extreme denies the uniqueness of women's health problems, claiming that even problems of women's reproductive capacity and biology have their complement in male reproduction and biology. Thus the problems of women are trivialized, and the end result is neglect of experiences that might be described and studied from the perspective of women.

Information about women's health is still meager. Most research, including illness research, developmental research, physical fitness, and sports research, discounts the particular problems or capacities of women. Recently several important scholarly publications have provided insight into the experience of women in health and illness (see the annotated bibliography provided in this issue). These publications provide a basis for developing a more balanced view of human experience—one that includes a woman's perspective.

The articles in this issue indicate a growing awareness of the scope and nature of the health problems of women. I feel that this issue of ANS provides an important stimulus to nursing researchers and scholars who can incorporate an awareness of women's health

into their studies, regardless of their specific research concern. For example, the problem of violence in our society, addressed in the article by Campbell, affects all members of society. The study of violence merits particular focus from many different perspectives; society needs to understand the elderly and violence, children and violence, men and violence, and women and violence. Sensitivity to the experience of women provides new insight into all of these perspectives. Campbell's study illustrates how a significant health problem in our society is experienced by women, how the experience of men affects women, and shows the need for continued study and theory development in this area of concern.

There remain significant differences in society based on sex, culture, class, education, economy, and inheritance. Perhaps there is a need to determine the role of biology and environment in creating differences based on sex, but there is a basic need to recognize and understand that there *are* significant differences in human experiences based on sex. Health care workers can then begin to effect improvements in the health of all members of society.

I am confident that the majority of readers of this issue, as a professional group comprised predominantly of women, will find something personal contained in this issue. I urge the readers of this important issue to absorb both the professional and the personal messages contained here. The most important step that women can take in improving the health of women is to improve their own health. I hope that you will find something here to facilitate that effort.

Peggy L. Chinn
Editor