

“A Real Girl and a Real Dentist”: Ontario Women Dental Graduates of the 1920s¹

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This paper explores the educational experience and professional practice of women who entered the dental profession in Ontario in the 1920s. During this period, dentists were educated in Toronto: initially, at a school affiliated with the University of Toronto, and after 1925, at the Faculty of Dentistry, University of Toronto. While few women entered the dental profession until recently, there was a notable influx of women into the profession in the early 1920s. This article reviews the factors that contributed to women's involvement at this time, and provides an overview of their academic and social experiences in dental school. Professional records indicate that most, if not all, of these female dental students practised their profession after graduation, and many had very lengthy careers. The article discusses the significance of marriage patterns and the characteristics of women's professional practice.

Cet article explore l'expérience éducative et la pratique professionnelle des femmes qui choisirent la profession dentaire en Ontario durant les années 1920. Durant ces années, les dentistes étaient formés à Toronto : au début dans une école affiliée à l'Université de Toronto puis, après 1925, à la Faculté de dentisterie de l'Université de Toronto. Alors que, jusqu'à récemment, peu de femmes entraient dans la profession dentaire, il y eut un afflux remarquable de femmes dans la profession au début des années 1920. Ce texte passe en revue les facteurs qui contribuèrent à l'engagement des femmes à cette époque et fournit une vue d'ensemble des expériences académiques et sociales qu'elles vécurent à l'école de dentisterie. Les registres de la profession montrent que la plupart - sinon toutes- des étudiantes en dentisterie exercèrent leur profession une fois diplômées et que plusieurs eurent de très longues carrières. Cet article examine aussi la signification des modèles matrimoniaux et les caractéristiques de la pratique professionnelle des femmes.

One of the women who attended Ontario's dental school in small but significant numbers during the 1920s, Maude Spence, received a fulsome accolade from her fellow (all male) classmates upon graduation: they declared that “while she anticipates a career in Dentistry, we predict a career in wedlock,” though “she will be

¹ I would like to thank Dr. Anne Dale for her valuable assistance with key historical details, and the anonymous reviewers of *HSE* for their advice on revising this paper.

a genuine success in either.” Maude went on to prove their predictions correct: she was “a real girl and a real dentist.”² After her graduation in 1924, Maude Spence practised in Toronto and in Western Canada, before settling in Seattle in the late 1920s and marrying a dentist, Dr. Holway. Maude Spence Holway continued practising in Seattle after her marriage, and despite having four children, had a long and successful career, maintaining a commitment to dentistry throughout her lifetime.³ Like other women in her education cohort, however, she has remained part of a group somewhat neglected in the literature – one that bears similarities to, but also differences from, other groups of women students entering professions in the late-nineteenth and early-twentieth centuries. Several studies have described substantial barriers and difficulties experienced by the very first women to undertake professional training in professions such as medicine, law, and dentistry.⁴ However, as W.P.J. Millar and R.D. Gidney

2 “Mary Maude E. Spence,” *Torontonensis*, 1924, 226.

3 Information about Maude Spence’s career is gleaned from the members lists of the Royal College of Dental Surgeons (1925-1950), and through her obituaries: “Dr. Maude Spence Holway,” *Ontario Dental Association Journal* 43, 1 (1966): 30; “Maude Spence Holway,” *Journal of the Canadian Dental Association* 32 (1966): 140. The obituaries indicate that Spence practised “intermittently” in Seattle from 1926 until 1951; she then moved to Los Angeles, where she was professionally active until her death in 1965.

4 For women’s early experiences in medicine, see, for example, Carlotta Hacker, *The Indomitable Lady Doctors* (Toronto: Clarke, Irwin and Co., 1974); Veronica Strong-Boag, “Canada’s Women Doctors: Feminism Constrained,” in *A Not Unreasonable Claim*, ed. L. Kealey (Toronto: Women’s Press, 1979); Gloria Moldow, *Women Doctors in Gilded-Age Washington: Race, Gender and Professionalization* (Urbana: University of Illinois Press, 1987). For women’s early experiences in law, see Constance Backhouse, *Petticoats and Prejudice: Women and Law in Nineteenth-Century Canada* (Toronto: Osgoode Society, 1991), 293-326; for dentistry, see Committee on Historical Research of the Federation of American Women Dentists, “Women in Dentistry – 1855-1880,” *Journal of the American Dental Association* 15, 9 (1928): 1735-55; Tracey L. Adams, “Gender and Women’s Employment in Dentistry: 1867-1917,” *Canadian Review of Sociology and Anthropology* 35, 1 (1998): 21-42. For women’s employment in a variety of male-dominated professions see Mary Kinnear, *In Subordination: Professional Women 1870-1970* (Montreal and Kingston: McGill-Queen’s University Press, 1995); Penina Migdal Glazer and Miriam Slater, *Unequal Colleagues: The Entrance of Women into the Professions, 1890-1940* (New Brunswick and London: Rutgers University Press, 1987). There are also a growing number of studies of the more recent experiences of women in male-dominated professional schools that highlight discrimination and an often “chilly climate” for women; see, for example, Patricia Bourne and Norma Wikler, “Commitment and the Cultural Mandate: Women in Medicine,” in *Women and Work*, ed. R. Kahn-Hut et al. (Oxford: Oxford University Press, 1982); Lani Guinier, Michelle Fine, and Jane Balin, *Becoming Gentlemen: Women, Law School, and Institutional Change* (Boston: Beacon Press, 1997); Sarah Baker, “Women in Engineering and Architecture,” paper delivered at the Canadian Women’s Studies Association meeting, May 2002; C. Wypkema and A.M. Hunt, *Women and Dentistry as a Profession: A Review Paper* (Toronto: Faculty of Dentistry, University of Toronto, 1975); The Chilly Collective, eds.,

have noted, very little has been written about the education and careers of the second generation of women to enter male-dominated professions, many of whom pursued education between the two world wars.⁵ For the profession of dentistry, this neglect is particularly evident: we know little about either the first *or* second generation of women who entered this male-dominated profession.

Examining women’s experiences of professional education and professional practice during this period helps to elucidate an overlooked chapter in the history of professions and professional education in Canada, and explores the significance of gender to both. Moreover, a closer look at women in professional schools during this era may help to clarify a paradox in the existing literature, identified by Paul Axelrod: despite documented discrimination and inequality, women undertaking professional training in the 1920s and 1930s reported positive experiences.⁶ This article focuses on women who pursued dental education in the 1920s in Ontario.⁷ It draws on university admission and student records, professional records, academic calendars and the dental students’ journal, *Hya Yaka*, to sketch a picture of women’s experiences in dental school. Then, the paper follows these women, after graduation, into dental practice. In both sections, I pay particular attention to women’s relationships with each other and their male colleagues.

Women and Dental Education

Until recently, very few women practised dentistry. During the Ontario dental profession’s first fifty years (1868-1918), only nine

Breaking Anonymity: The Chilly Climate for Women Faculty (Waterloo, Ont: Wilfrid Laurier University Press, 1995).

5 W.P.J. Millar and R.D. Gidney, “‘Medettes’: Thriving or Just Surviving? Women Students in the Faculty of Medicine, University of Toronto, 1910-1951,” in *Challenging Professions: Historical and Contemporary Perspectives on Women’s Professional Work*, ed. Elizabeth Smyth et al. (Toronto: University of Toronto Press, 1999), 215. Mary Kinnear makes a similar argument: Kinnear, *In Subordination*, 22.

6 Paul Axelrod, *Making a Middle Class: Student Life in English Canada during the Thirties* (Montreal and Kingston: McGill-Queen’s University Press, 1990), 117.

7 All of these women either attended or applied to the dental school during the 1920s, or attained a licence to practise in this era. Included in the analysis are two women who graduated from the school in the early to mid-thirties, but they are quite similar to the 1920s graduates in terms of family background and practice experiences, and amongst their number is the first female dental specialist. For these reasons I decided to include these two women in the analysis and focus on the group of graduates between 1921 and 1935.

women formally entered the profession. The first woman to do so was C.L. Josephine Wells, who graduated from dental school in 1893; the second woman, Abbie Walker, graduated over a decade later, in 1904.⁸ Although the profession did not overtly discourage women's participation, few attempted it. In this light, women's entrance into dentistry in the 1920s is truly striking: twenty-seven women entered dental practice between 1921 and 1935, twenty-two of them in the period between 1921 and 1926. How can one explain this surprising bulge in enrolments at the dental school during this period?

The large numbers of women entering dentistry in the early 1920s parallel the huge influx of male dental students after World War I. The war spotlighted health professions, including dentistry, thereby raising their public profile and prestige.⁹ This heightened interest, combined with the promise of matriculation for ex-servicemen, resulted in increased demand for health-profession education. In the fall of 1919, the province's dental school had 375 qualified applicants for the first dental year, primarily ex-servicemen. At the time, the school was "only equipped for maximum classes of eighty students."¹⁰ The profession had a tradition of accepting all qualified students, and therefore endeavoured to accommodate these applicants.¹¹ With the assistance of a grant from the Ontario government to build an addition to the existing building, the school opened its doors in the fall of 1919 to a total of 804 students. This cohort, the class of 1923 (named the "Whiz Bang" class, after the sound of war-time artillery), was the largest ever in the province, and included six

8 Wells was a dentist's wife who entered dentistry after the illness of her husband rendered it difficult for him to support his young family. She was granted matriculation "by the vote of the [dental] board" and allowed to attend the Toronto dental school: University of Toronto Archives (UTA), A1969-0008, Royal College of Dental Surgeons of Ontario (RCDSO) student and licentiate registers (1868-1925), box numbers 12, 13. She had a lengthy career, working in private practice (first with her husband, and then with dentist H.D. Clark), and, later, in insane asylums.

9 Tracey L. Adams, *A Dentist and a Gentleman: Gender and the Rise of Dentistry in Ontario* (Toronto: University of Toronto Press, 2000), 86.

10 D.W. Gullett, *A History of Dentistry in Canada* (Toronto: University of Toronto Press, and the Canadian Dental Association, 1971), 159.

11 At the time, the dental school still accepted people with only partial matriculation with the understanding that they would matriculate within a year or two of beginning the program. This policy was always somewhat contentious, and the RCDSO finally eliminated it in the early 1920s. There were some women in both the first cohort and the early part of the second cohort who entered the school before matriculating, and it is possible that the enforcement of the matriculation requirements discouraged some women from applying to the dental program.

women. This latter figure is notable, since at the time, it equaled the total number of women in dental practice in the province; however, proportionately, women continued to be a mere fraction of those pursuing dental education. The twenty-seven women trained and licensed to practice dentistry between 1920 and 1935 represent only 1.8 per cent of the 1,519 dentists trained during this time period in Ontario.¹²

Enrolments of both men and women in the dental program dropped substantially in the 1930s and 1940s, at a time when women similarly represented less than 2 per cent of all dental graduates. The onset of the Depression was likely an important factor leading to decreased enrolments. Dentistry was particularly hard hit by the Depression – dental care, at the time, was seen as “luxury” health care service that few could afford – and hence may have attracted fewer students. Nevertheless, the numbers of students enrolled in the school in the late 1920s resemble those typical of the years before the First World War. Thus, while low enrolments in the 1930s may, in part, reflect a declining interest in dentistry, they also appear to signal a return to “normal” levels. Changes to the curriculum and program requirements during the 1920s may also have lowered enrolments, but more significantly, they reshaped the nature of professional education in dentistry.

During the 1920s, the length and nature of dental education underwent significant reform. From 1875 on, there was one route into dental practice in Ontario: the dental school run by dentists’ regulatory body, the Royal College of Dental Surgeons of Ontario (RCDSO), in Toronto. Known informally as the “RCDS,” or “the dental school,” the facility became affiliated with the University of Toronto in 1888, at which time graduates received the right to the degree of DDS (Doctor of Dental Surgery).¹³ Like other

12 These statistics are based on an analysis of a 1950 RCDSO list identifying the practice status of all dentists who acquired a licence to practise dentistry in Ontario between 1920 and 1935. It must be noted that while the vast majority of these individuals would have come through the Toronto dental school, a licence to practise in Ontario could also be acquired by those who obtained dental degrees elsewhere in Canada, upon examination by the Dominion Dental Council. However, only a very small number of dentists practising in Ontario had taken this exam. Significantly, the proportion of women at the school did not change significantly from the 1920s to the early 1930s. Women represented 1.8 per cent of the 1920s graduates and 1.98 per cent of graduates in the early 1930s.

13 Initially, students graduating from the dental school were awarded a licence to practise – they became Licensed Dental Surgeons or LDSs – and had the option of sitting for separate exams (for a separate fee), to acquire their DDS degree from the University of Toronto. Between 1893 and 1904, the University of Trinity College also granted DDS degrees to graduating RCDS students who chose to write exams there. Around the turn

professional programs before the First World War, the course at the RCDS was gradually lengthened from two to four years, while an apprenticeship requirement was, first, shortened, and then dropped and replaced by a clinical training component within the school.

Students entering the school in the late teens had to have their junior matriculation (Grade XII) with core science courses and Latin to enter the dental program. With the influx of students after the war, the dental school added a “pre-dental” year to its existing four-year program. This pre-dental year included courses in biology, chemistry, physics, English, French, “modeling” (that is, working with clay to make models), and drawing. At first, only partial matriculants were required to take the pre-dental year, but in 1921-22, all incoming students were required to take the five-year course.¹⁴ The other major change in dental education during this period was the integration of the RCDS school with the university in the 1925-26 academic year, to become the Faculty of Dentistry, University of Toronto. In short order, the matriculation requirements were raised slightly, and the curriculum broadened to include courses in “the relation of science to civilization” and in applied psychology. The move was part of a broader effort to reform dental education in order “to unify the cultural subjects, fundamental sciences and dental studies as it [was] believed that cultural, scientific and professional development cannot be sharply differentiated.”¹⁵ Despite these changes, the nature and content of the dental program in the late 1920s was largely the same as earlier in the decade. The program began with a general emphasis on science courses and the development of “digital skill.” As students progressed through the school, “greater attention [was] given to dental subjects until in the fourth and fifth years, half the time [was] devoted to dental and medical clinics, lectures and laboratory work, and half to the actual practise of dentistry for patients in the Faculty Infirmary under the direction of the clinical staff.”¹⁶

of the twentieth century, policies changed, and all students graduating from the dental school were simultaneously granted dental licences and doctorate degrees. See Gullett, *A History of Dentistry in Canada*; M. Friedland, *The University of Toronto: A History* (Toronto: University of Toronto Press, 2002).

14 The five-year course consisted of the pre-dental year plus four years of dental school; a year consisted of a thirty-two-week session of classes. For the first few years, those with senior matriculation could forgo the pre-dental year.

15 University of Toronto, *Faculty of Dentistry Calendar, 1927-1928*, 12.

16 Ibid. In their second year, students had courses in subjects like chemistry, physics, osteology, histology, physiology, and anatomy, along with laboratory work in aspects of dental practice. In later years, students focused more concretely on aspects of dental practice, and took courses in “crowns and bridges” and “orthodontic techniques,” as well

While trends in women’s enrolments in dentistry mirror men’s, and were similarly influenced by the war and the Depression, it is less clear how alike men and women were in their family backgrounds and school experiences. The University of Toronto admission records contain data on family background for those students who applied to the program after 1925, but data on earlier students are harder to obtain. Of the twenty-seven women who became dentists during this era, I have such information for only sixteen (at least eight women were born outside the province and therefore are difficult to trace).¹⁷ Four of these women had fathers who were dentists, while three others had professional fathers (a medical doctor, a mechanical engineer, and a clergyman). Six other women had fathers employed primarily in white-collar and business occupations. For instance, the father of Helen Manchester (graduate 1927) worked in the provincial government as a chief clerk in the Registrar General’s Department, and later as Director of Vital Statistics, while the father of Thelma Coleman (graduate 1926) was a custom tailor/business owner. The father of Marion Joy (graduate 1922) was the proprietor of the Wonderland Theatre in Toronto. A few others came from farming families. Overall, the socio-economic background of these women dental students was quite varied, relatively high, and likely similar to that of their male counterparts.¹⁸

as metallurgy, pharmacology, dental medicine, pathology, and preventative dentistry, amongst other subjects.

17 Data on students’ backgrounds were gathered from a variety of sources. Information on those few female students who applied to the dental school in the later 1920s, after it became the Faculty of Dentistry, were found at the UTA, A1969-0008, Faculty of Dentistry Admission Records, 1925-33, boxes 163, 164. It was more difficult to trace the family backgrounds of the remaining twenty-three women, and it proved too difficult for those women who were born out of province. I was able to trace many of the Ontario students and identify their fathers’ occupations through published city directories and census records. Women who came from dental families were, in two cases, identified through their fathers’ obituaries published in professional journals (these obituaries listed the dentist-daughters as surviving relatives).

18 In the 1930s, dental students primarily came from professional, business, and farming backgrounds – in fact, more came from the latter background than was typical among university students more generally, and among students in other professional faculties like medicine: see W.P.J. Millar, Ruby Heap, and R.D. Gidney, “Degrees of Difference: The Students in Three Professional Schools at the University of Toronto, 1910 to the 1950s,” in *Learning to Practise: Historical and Contemporary Perspectives on Professional Education*, ed. R. Heap, W. Millar, and E. Smyth (Ottawa: University of Ottawa Press, forthcoming). Women dental students’ backgrounds are similar to those of women medical students, although backgrounds in the skilled trades and farming were more numerous within dentistry: see Millar and Gidney, “Medettes,” 218. Women in this cohort of dentists on average had a slightly higher socio-economic background than those who preceded them; amongst the fathers of the first nine female dentists were a miller,

In age and marital status, the women dental students of the 1920s closely approximated their male counterparts: they tended to be young and single. While some entered dental training after a short time in the workforce, or after attaining a baccalaureate degree, most entered directly from high school. Eleven of the twenty-seven women were from the Toronto area, while seven were from out of province, and the rest from smaller towns and cities across Ontario. The school drew many of its students from the immediate vicinity, but as the only dental school in Ontario, and the only one west of Quebec offering a full dental program, it attracted students from other locales as well.¹⁹

The experiences of these women at dental school can be teased out, to some extent, from academic records and from the journal *Hya Yaka*, published by the dental students. In total, twenty-eight women attended the school in the 1920s and early 1930s, and twenty-five of these women completed the entire course. The remaining three women consisted of one student who dropped out of the program after her first year and proceeded to pursue a medical degree, and two others who came from Australia to attend the final year of the program in order to complete their dental training and earn a DDS degree before returning home.²⁰ An additional two women entered dental practice in Ontario during this period – one after writing the final examinations at the dental school, and another after qualifying in another province and taking a Dominion Dental Council exam.²¹ Academically, the women seem to have done fairly well at the school. While some of them

a carriage maker, a farmer, a dentist, a jeweller, and an engineer.

¹⁹ Dalhousie, McGill, and Montreal universities also had dental schools during this era. The University of Alberta began a dental school in 1918, but the four-year program required students to take their final two years of dental education at either the RCDS in Toronto, or McGill. Information on students' regional location is gleaned from a variety of sources, including *Torontonensis*, published obituaries, and especially records from UTA, A1982-0003, RCDSO, student and licentiate records, boxes 9–13; A1969-0008, Faculty of Dentistry, admission records (1925-1933), boxes 163, 164.

²⁰ In the late-nineteenth and early-twentieth centuries, the RCDS school accepted a number of such students. Dentists trained in Australia and New Zealand, like those trained in the United Kingdom, earned only a baccalaureate degree. Female dentists like Margaret Dillon Steele (graduate 1931) and Elsie Elizabeth Wearn (graduate 1929), like some of their male colleagues, would come to the RCDS school to acquire a doctorate degree. In the early 1930s, some immigrant women dentists from Eastern Europe, and especially Russia, applied to the school in order to attain a degree and a licence to practise in Canada. Although they were accepted, they never completed the program. As noted, the sole female student to drop out of the dental program in this era chose to follow her father's example and pursue a career in medicine.

²¹ UTA, A1982-0003, RCDSO records: examinations and records (1868-1925), boxes 9, 10, and 11.

had trouble in their first year with science courses like physics, chemistry, and histology, or in pre-dental courses like “modeling,” women rarely had difficulty after the first year.²² Many excelled in their courses. Their grades in their clinical and laboratory courses were also, on the whole, quite good. On those occasions where their academic standing was ranked, women’s grades sometimes put them near the top, but more commonly within the top half of students in their year.²³

Harder to ascertain than academic success is women’s involvement in extra-curricular activities and in student life at the dental school. What evidence exists, however, suggests that women’s experiences were positive, despite the masculine culture of the dental school.²⁴ Not surprisingly, given their low numbers, women had traditionally played a more minor role in the extra-curriculum of the dental school. Sports, fraternities, and clubs that were fairly central to college life did not include women. Moreover, some social events, like the annual sophomore-freshman banquet, formally excluded them.²⁵ Hazing tended also to be a male-only ritual. While there were other school clubs and a school journal that women could, and sometimes did, participate in, the women who attended the dental school prior to the 1920s were not fully integrated into the school culture. However, circumstances changed somewhat for women attending the dental school during that decade. While women were still excluded from traditional social events like the sophomore-freshman banquet and the “soph-frosh theatre party,” for the first time they were numerous enough to establish their own parallel female traditions. For instance, a report in *Hya Yaka* reveals that in the 1920s women established a tradition wherein the juniors held a “banquet and social evening” in honour of the graduating seniors. This was an event for women only: “no-one of the ‘stern and silent’ sex was privileged to attend the banquet [but] there were some fortunate few invited to the

22 Miller, Heap and Gidney indicate that in the 1930s the drop-out rate in the faculty of dentistry was about 15 per cent. Thus, it seems that women may have been less likely to drop out than were their male colleagues; the one female who did not finish represents only 4 per cent of the total number of women students in the 1920s. Miller, Heap, and Gidney, “Degrees of Difference.”

23 UTA, A1982-0003, RCDSO records: examinations records, (1868-1925), boxes 9, 10 and 11.

24 Adams, *A Dentist and a Gentleman*, 152-55.

25 One 1916 newspaper article reported that women in these classes were given theatre tickets as a substitute, and apparently “everyone had a perfectly lovely time generally”: “Dentistry Much Improved in Recent Years,” *Dominion Dental Journal* 28 (1916): 297-300.

dance which followed.”²⁶ Before and after the 1920s, such an event would not have been possible because it was extremely rare to have women in both the junior and senior class.

Women students in the 1920s also established their own hazing practices. Hazing was common amongst university men throughout the late nineteenth and early twentieth centuries; although it was not uncommon amongst women, there is no record of it occurring at the dental school prior to the 1920s.²⁷ As Keith Walden has pointed out, historically, hazing rituals for men and women have differed, with men's being decidedly more physical and violent. In this vein, male freshmen at the dental school during the 1920s participated in a “hustle” that resembled hazing rituals of decades past. For some days before the initiation, the sophomore men required the freshmen to wear green ribbons or ties, and/or other marks of their inferiority.²⁸ On a chosen day, the sophomore and freshmen classes would meet in class groups off-campus for a brawl that involved the sophomores stripping the clothes (and the green ties) from the freshmen, generally having their own clothes torn in the process. Both sides splattered the other with eggs, chalk dust, and other substances. By the end of the initiation, the freshmen and sophomores would have the same dishevelled appearance, and the freshmen would have been officially brought into the fold.²⁹ As with other groups on campus, male students regarded these initiations as a very important part of their university experience.

In contrast, Walden asserts, it was common for women's initiations to involve women from all years, and to require “freshettes” to perform in some manner for an audience beyond their student peers. The initiation introduced by the women at the dental school was clearly in this vein. The most detailed account of an initiation occurs in a 1924 issue of the dental student journal, under the title “Freshettes Initiation”:

26 “The Co-Ed's Dinner and Dance,” *Hya Yaka* 22, 6 (1923): 251.

27 A good discussion of hazing rituals at the University of Toronto and its affiliated professional schools can be found in Keith Walden, “Hazes, Hustles, Scraps, and Stunts: Initiations at the University of Toronto, 1880-1925,” in *Youth, University and Canadian Society*, ed. P. Axelrod and J.G. Reid (Montreal and Kingston: McGill-Queens University Press, 1989), 94-121.

28 Keith Walden notes that in the post-war years it was common for science fresh-men to be required to wear green ties in the fall, while medical students wore red: *ibid.*, 108.

29 “The Initiation,” *Hya Yaka* 21, 1 (1921): 8-9; “The Initiation,” *Hya Yaka* 23, 1 (1923): 22; “The Initiation,” *Hya Yaka* 24, 1 (1924): 24-25.

On Tuesday, Oct. 14th the freshettes of the R.C.D.S. were duly initiated into the solemn rites and mysteries of Dentistry.

At 7 PM the two verdant ones made their appearance in middies and knickers, bedecked with the green insignia of inferiority and carrying umbrellas and large watering cans. They carefully and thoroughly sprinkled the sidewalks in the vicinity of the [dental] college for their respected seniors. Due to the generosity of the proprietor of a near-by Café, their cans were kept filled with water.

Their enthusiasm having been thoroughly dampened, they were taken to the College and treated to soda crackers, after which they entertained their tormentors to a duet of “How Green I Am.”

After being led around the College blindfold, visiting the Anatomy Lab, and many such places of interest, they were taken to the surgery where their lower, third, impacted molars were extracted as a momento [sic] of the occasion.

On bended knees, they swore solemn oaths to love, honour and obey “their seniors”, and after which they were taken to an ice cream parlour and regaled to their choice of the menu. Quite exhausted by this evening of unusual activity they were sent home with a warning to be on time for the 8:30 lecture, next morning.

In later years, the hazing rituals took on different forms, and as the numbers of women fell, they became much less elaborate. In the early 1930s the “freshettes were allowed off very easy,” merely “stumbling through God Save the King.”³⁰

Women students’ rituals in some ways resembled the men’s, as they emphasized the inexperience of the new entrants, and forced them to acknowledge the superiority of their elders; both rituals involved a state of undress (to symbolize the stripping off of the old identity to prepare the way for the new). However, just as the male initiation rites were masculine in their violence and physicality, the women’s rituals were notably non-violent and blended a focus on dentistry and dental study – by touring the dental school after hours – with more feminine dress, tasks such as watering, and even a marriage-type oath to fellow women students.

30 “Freshettes Initiation,” *Hya Yaka* 24, 1 (1924): 25-26. The statement on initiation in the 1930s was found in notes on the class of 3T6, published in *Hya Yaka* 33 (1934): 59.

It is also interesting that the women visited the anatomy lab and the surgery, as there was an air of the forbidden about both places. In the past, one argument against women's entrance into male-dominated professions like medicine and dentistry had been that it was inappropriate to teach anatomy to women in a co-ed setting.³¹ Moreover, the clinic, or school surgery, was the domain of the more senior students; it was the "'inmost shrine' or 'sanctum sanctorum'" of the school and "here, according to tradition, the Freshman's feet must never tread."³² By taking the "freshettes" to these "forbidden" places, the other women students introduced them to the professional education and career that were to come; however, by making them do this tour blindfolded the women students underscored both how much the "freshettes" had to learn (they were not quite ready to see these places fully) and the fact that the freshettes would need to rely on other women to make their journey through the school a successful one. While both the men's and the women's rituals aimed at creating within-class and across-class alliances, the women's ritual in particular forged bonds amongst women at all academic levels in the school. In establishing their own rituals, women dental students made a place for themselves at the school. In the process, perhaps, they created a sense of belonging that would follow them out of the school and into the profession at large.³³

Another significant cultural event in women's participation in the college occurred in 1922, when the women established a Canadian chapter of an American dental sorority. This sorority strengthened the dental students' ties with each other and enabled them to forge ties with established women dentists. The executive of the sorority was a mixture of dental students, practising dentists,

31 See Hacker, *The Indomitable Lady Doctors*, 31; James Truman, "Henriette Hirschfeld (Henriette Tiburtius), D.D.S., and the Women Dentists of 1866-73," *The Dental Cosmos* 53 (1911): 1381.

32 "Warning!?" *Hya Yaka* 19, 3 (1920): 114.

33 Defining such a place for themselves within the school was probably quite important given the large numbers of men attending as students, and the all-male faculty. Moreover, the establishment of a dental nursing program at the school in 1919 meant that the women dental students were not the only women at the dental school. These women embarking on professional careers may have felt the need to create some social distance from the dental nursing students, and to define themselves and their interests as distinct. It is noteworthy that dental nursing students also established their own initiation rituals while at the school, and that these initiations differ significantly from those enacted by women dental students, particularly in the former's emphasis on traditional female activities and acts of subordination.

and even some dentists' wives.³⁴ For example, Bridget McDonagh, wife of a professor at the school and the mother of dental student J. Aileen McDonagh, was an honorary president of the sorority in 1924.³⁵ The organization even provided the opportunity for women dental students to forge ties with women training for other professions: for instance, in 1924, sorority members hosted a tea for the Medical Women's Undergraduate Association executive at the home of dental student Lois Adams and Mrs. Dr. Frank (Ada) Adams.³⁶

Organizations like the sorority would continue to be valuable to dental students long after graduation. As a private-practice profession, dentistry grants few opportunities for women to get together with one another. As Flora Cowan (graduate 1926) later argued, the sorority provided practising dentists with opportunities to meet, support, and guide women newly entering the profession. Unfortunately, by the late 1920s, women's enrolment at the dental school declined again, and “there were not enough undergraduates to keep up the sorority and the affiliation with the U.S.A., so it was dropped.” Women dentists clearly felt the need for such an institution, however, and they formed the Dental Alumnae Association to link new graduates with established women dentists, and connect the latter with each other. In 1971, when the numbers of women in the profession began to increase substantially again, women formed the Association of Women Dentists of Ontario.³⁷ The fact that women in dentistry, although small in number, have gone to some lengths to form and maintain these organizations suggests their importance to women dentists who graduated in the 1920s and later.

While it is clear that women at the dental school during the 1920s were able to establish some separate traditions and organizations, the question of how well they integrated with and

34 Keith Walden explains how women's university organizations and rituals often brought together women students with faculty wives: Walden, “Hazes, Hustles, Scraps, and Stunts,” 112. At the dental school, dentists' wives were commonly involved in extra-curricular social events at the school, and they also participated in the dental nurses' alumni association.

35 “Upsilon Alpha Sorority,” *Hya Yaka* 23, 1 (1924): 26; “The Sorority,” *Hya Yaka* 22, 2 (1922), 18.

36 “Sorority Tea,” *Hya Yaka* 23, 1 (1924): 26. Lois Adams was my great-aunt, and Frank and Ada Adams, my great-grandparents.

37 Flora Cowan, “History of the Association of Women Dentists of Ontario,” *Journal of the Ontario Dental Association* 48,10 (1971): 279. At some point in the mid-twentieth century, the women's dental alumnae association seems to have merged with the men's dental alumni association to form one co-ed organization.

related to the male students is still open, and, given a dearth of sources, difficult to answer. It appears that relations between men and women at the school may have remained somewhat formal. One poem written about the three women who graduated in 1921 described them as being inseparable.³⁸ Just the fact that the men occasionally wrote poems about the women at the dental school should be seen as an indicator that they were regarded as being different (men rarely wrote poems about other men!). In their poems, male students praised the women for their appearance and gentle manners. The 1921 poet emphasized both the women's distinctness and their similarity with men:

Though in grace and gentle manners
They differ from the men,
Even here there is a likeness –
They're late for lectures now and then.³⁹

Male students at the school were also publicly supportive of women's efforts to establish their own traditions and institutions. For instance, upon the establishment of the women's sorority, an article in *Hya Yaka* commented that the dental college "had reason to be proud" of this organization, declared that "the move is a particularly commendable one" and wished the chapter "every success."⁴⁰ Similarly, male students praised women's separate social customs as "worthy."⁴¹

While some comments made in the student journal were ambivalent and, at times, patronizing, there is little evidence of hostility or negativity. In fact, there is more evidence of the reverse. As noted earlier, written comments suggest that Maude Spence was well-liked by her classmates. In praising her, one colleague detailed her interaction with her classmates, stating that "she has been at all the College dances and social functions: she doesn't blush often and her presence often put a damper on effervescence in the labs, when solder didn't run as desired."⁴² Comments about other women are similarly favourable. Women at the school were always seen as women first and dental students second, but, at least in print, male dental students questioned

38 E.V.E., "To Our Senioresses (with apologies)," *Hya Yaka* 20, 4 (1921): 160.

39 Ibid.

40 "The Sorority," *Hya Yaka* 22, 2 (1922): 18.

41 "The Co-Ed's Dinner and Dance," *Hya Yaka* 22, 6 (1923): 251.

42 "The Fair Co-Ed of 2T4," *Hya Yaka*, 23, 6 (1924): 221.

neither women’s commitment to their profession, nor their ability to practise it.

Thus, while women did not have the same experiences as men in dental school, and while they continued to be regarded as a somewhat unusual and marginal presence within the culture of the dental school, their experiences seem to have been, on the whole, positive ones. Women formed close ties with each other, and hence dental training was likely much less isolating for the second generation of women dental students than it was for those in the first. Second-generation women certainly had a more substantial extra-curricular life at the school than those women who preceded or followed them. This opportunity to establish female institutions at the dental school may have influenced the practice patterns of 1920s graduates. These graduates tended to have fairly long careers and practised longer (an average of 27.5 years) than those who went before them (averaging 15 years).⁴³ While this difference probably owes much to societal changes in attitudes to women’s work and women’s labour force patterns, it is also possible that the sense of community and female traditions established by the 1920s graduates increased their attachment and commitment to their profession.

Women in Dental Practice

In this section, I trace the careers of those students who gained licences to practise dentistry in Ontario in the 1920s and early 1930s. While it is not always easy to follow the professional careers of women who graduated from dental school in this period, professional records, when combined with other sources like city directories and obituaries, give us some indication of how long and where these women practised. Most helpful for tracing their careers are the lists of its members published yearly by the RCDSO. The first was a list of all Licensed Dental Surgeons (LDSs) practising in Ontario (this list of practising dentists continues to be published today). Every dentist who annually paid

⁴³ The statistics on average length of practice are based solely on those women dentists for whom I have a record of career length – that is, primarily those women who spent most of their careers in Ontario. Many women who worked outside of Ontario, for example Mabel Killins Connell (graduate 1923), who practised in Saskatchewan, and Maude Spence (graduate 1924), who practised in Seattle, had very long careers but because I do not have figures on precisely how many years they practised, they were excluded from the analysis.

their licensing/registration fee was placed on this “active practice” list. The second list, published until 1950, consisted of all those LDSs who were not in active practice in Ontario (or who had not paid their fees). Included on it was everyone who had ever been licensed to practice in Ontario, beginning in 1868; those who had died were marked with an asterisk. Together, these sources provide a comprehensive compendium of dentists practising in Ontario, and sometimes information on those practising elsewhere, and those retired.

The RCDSO records are even helpful in providing some information on women dentists’ marriages: generally, women’s married names or husband’s names were recorded in brackets after the name they graduated with. From these records, we can learn not only approximately when, but also whom, the women married.⁴⁴ While the RCDSO records are good, they do not provide a perfect measure of career length. A dentist could have continued to practise without paying her fees, or could have paid her fees but not actually practised.⁴⁵ Despite these potential biases in the data, however, the RCDSO lists provide a reasonably good measure of the career length of women dentists who received dental training in the 1920s and early 1930s.

As noted, a total of twenty-seven women attained licences to practise dentistry in Ontario during this period, and of this number, at least twenty-three actually practised. The remaining four women left the province immediately after graduation, and there is no Ontario record of their careers. Of the twenty-three women for whom I have records, I can trace the entire careers of nineteen.⁴⁶

44 For instance, beginning in 1928, Elda James (graduate 1922) is listed as “James, Elda (Mrs. Dr. R.G. Harris)” in the RCDSO listings. Hence, through this listing, we can trace her marriage to dentist Ralph G. Harris (graduate 1922), and pinpoint its approximate date as 1928. In a similar vein, Margaret Kinsmen (graduate 1921) is listed in the 1939 directory as “Kinsmen, Margaret (Mrs. W.J. Morrow)” and her address changes from Sarnia to Toronto. With the help of the Sarnia and Toronto city directories, I was able to determine that Margaret Kinsmen left her practice in Sarnia around 1938, and married William J. Morrow, a hospital superintendent in Toronto.

45 Amongst the first cohort of women, one example of each type of error was discovered. For instance, the Toronto city directories listed Abbie Walker (graduate 1904) as practising for about a decade after the RCDSO records indicated that she was no longer in active practice. Similarly Marjorie Milne (grad 1917) was listed as practising up until her death in 1951, yet her obituary states that she stopped practising in 1944. It is quite possible that similar errors exist for women who graduated in the 1920s.

46 Four additional women moved out of province after practising for some time in Ontario. For two of these women, other professional records, including obituaries, indicate that they had lengthy careers; however, since it is impossible to determine the precise number of years they spent practising dentistry, they have been excluded from the statistical calculations.

The average length of practice for these nineteen women was 27.5 years.⁴⁷ The majority of the twenty-seven women – nineteen (70 per cent) – practised for at least a few years in Toronto. After a time, many of these women moved elsewhere, most to establish practices in other locations, including areas as diverse in size and location as Windsor, Chatham, Brantford, Wiarton, and Otterville. Fully one-third of the women (nine) spent most of their careers practising outside of Ontario: five settled in the United States, and four practised in the western provinces.⁴⁸

It is difficult to determine the nature of these women’s careers as the RCDSO records do not include such information. However, at least three of the women are known to have spent at least some of their career working in public-health dentistry. It is possible that a few other women did as well, at least on a part-time basis. Notable amongst public-health dentists was Martha E. Law (graduate 1923), who had a very lengthy career, primarily providing dental care to children within East Toronto schools. Marion Joy (graduate 1922) organized the dental clinic at the Women’s College Hospital in Toronto, and later was in charge of the in-patients dental clinic at Toronto General Hospital. Only one woman from this cohort formally specialized: Margaret I. Cowan (graduate 1935) practised as an orthodontist.⁴⁹

Several studies have noted that women in male-dominated professions have been less likely to marry than other women.⁵⁰

47 While the sheer number of men educated during this period makes calculating their practice statistics difficult, it is clear that on average women’s careers were shorter than men’s. To compare men’s and women’s experiences, the RCDSO listings in 1950 – the last year for which both “in practice” and “out of practice” lists were published – were examined. These listings reveal that in 1950, fewer women than men trained during the 1920s and early 1930s were still in active practice: 44.4 per cent of women compared to 61.5 per cent of men. This suggests that men had longer careers on average. Fully 52 per cent of the women and only 29 per cent of the men had either retired from practice or were practising outside Ontario. Roughly 10 per cent of the men licensed in this fifteen-year period were dead, while only one woman (3.7 per cent) had died.

48 Most of these women stayed out of province, but one returned to Ontario. Two other women practised for at least two years elsewhere, but spent the majority of their lengthy careers in the province.

49 Margaret Cowan thus appears to have been the first female dental specialist in the province. However, Marjorie Milne Legate (graduate 1917) seems to have spent some of her career specializing in periodontics as she associated with the first Canadian periodontist, A.J. McDonagh. While today public-health dentistry is a formal speciality, this was not the case in the 1920s, 1930s, and 1940s, and for this reason I have not counted those women in public health as “specialists.”

50 Glazer and Slater, *Unequal Colleagues*, 6-7; Kinnear, *In Subordination*, 158-59; Katherine Marshall, “Women in Male-Dominated Professions,” *Canadian Social Trends*, ed. C. McKie and K. Thompson (Toronto: Thompson Educational Publishing, 1990),

Nonetheless, the majority of these women dentists did marry. Of the 1920s graduates, eighteen of twenty-seven (66 per cent) are known to have married (some of the others for whom I have little information may also have done so). Of the eighteen women who married, eleven (or 61 per cent) are known to have married dentists or medical doctors (eight dentists, three medical doctors). Women who married dentists typically married a man who graduated from the RCDS school within two years of their own graduation.⁵¹ Two of the women married after they left the province, so I have no data on the occupations of their husbands; data for the remaining women indicate that their husbands were employed primarily in business and the professions, including, for example, a lawyer, an insurance executive, and a hospital administrator.⁵²

What is notable about these marriage patterns is how few women married outside of the profession. Indeed, existing records document only five women who entered dental practice during the 1920s and 1930s and married someone from outside their profession.⁵³ Four of these women married their husbands late in life, after practising dentistry for a minimum of sixteen years as single women. Of those I can trace, there is no female dentist who married outside the profession within fourteen years of graduation; women either remained single, or married dentists or doctors.⁵⁴ While traditional histories of women's involvement in professions have seen professional practice as incompatible with marriage, it appears that for women dentists, it was marriage outside the

113-17. Strong-Boag's figures suggest that the majority of women in the 1920s and 1930s married (only 10 to 11 per cent of women were single at age 45), while Kinnear's and Drachman's data on women professionals indicate that only about 22 to 43 per cent of practising women professionals were married. While these two sources are not directly comparable, they certainly suggest that women professionals were historically less likely to marry. See Strong-Boag, *The New Day Recalled*, 83; Virginia Drachman, "The Limits of Progress: the professional lives of women doctors, 1881-1926," *Bulletin of the History of Medicine* 60 (1986): 69.

51 The exception was Maude Spence, who married a Seattle dentist.

52 These findings are somewhat comparable to the experiences of earlier women dentists: three of them were married to dentists, one was a doctor's widow, and the rest married men who were employed respectively as a school principal, a lawyer, and a co-owner of several men's clothing stores.

53 It is possible that two of the women who married after moving to the United States married men outside of the profession. However, I do not have data to confirm this.

54 The only woman to marry outside of the profession, relatively early in life, seems to have left practice prior to doing so: Aileen McDonagh (graduate 1922) stopped practising around 1928, but does not seem to have married Mr. Kelly, a lawyer, until the 1930s.

profession that was particularly incompatible, and very few women engaged in dental practice actually attempted it.

The marriage patterns of this cohort of women dentists are significant because marriage influenced career patterns and career length. Those single women graduates from this era whom I was able to trace (N=7) averaged a total of 35.7 years in practice.⁵⁵ Long careers were the norm. For instance, Marion Priest (graduate 1929) practised for 43 years in Toronto, while Marion Joy (graduate 1922) practised for 39 to 40 years in the same city. The shortest career amongst single women was that of Anne MacKenzie (graduate 1922). She practised for only 18 years, but her career was shortened by two circumstances: she undertook dental training later in life, and she died at a relatively early age.⁵⁶ None of the other six women practised for fewer than 30 years.

Coming closest to the single women in terms of career length are those women who married quite late in life. As noted, most of these women married outside the profession, and all of them practised, for at least a time, after marriage. Average length of practice amongst the five women who married late is 37.4 years. Because these women spent most of their careers working as single women, it is perhaps not surprising that their career length is quite similar to that of single women. Nevertheless, it is noteworthy that most of these women continued to practise after marriage.

The women who married in the 1920s and mid-1930s had shorter careers. The average career length for those six women whose entire careers I am able to trace (out of eight who married in this era) is thirteen years. Many continued to practise after

55 Two women believed to have remained single practised their entire careers out of the province, and an additional woman practised in Ontario for seven years before moving to Buffalo. Amongst the seven women used for these calculations is Thelma Coleman, who married fellow dental student William McKinley Edmunds before their last year of dental school, but who seems to have divorced him shortly after, and practised all but two of her 39 years as a single woman. Interestingly, Coleman's obituaries mention her brief time practising in Texas (she moved there with her husband after graduation), but neither makes any mention of her ever being married: *Journal of the Canadian Dental Association* 31 (1965): 827; *Journal of the Ontario Dental Association* 42 (1965): 32.

56 Annie Sadie MacKenzie had an interesting career. MacKenzie was born in Nova Scotia and completed a Bachelor of Arts degree at Dalhousie University, where she was an Avery Prize winner in 1911 for distinction in physics, political economy, history, and philosophy. MacKenzie then went on to do post-graduate work at the University of Washington. Later, she moved to Vancouver, where she taught high school for a number of years. She subsequently attended dental school in Toronto, graduating in 1922. After graduation, MacKenzie moved to Winnipeg, where she ran a dental clinic for about eight years. She then spent two years engaged in scientific research in biological chemistry at the University of Toronto in the 1930s. She practised privately in Toronto for five years before her death in 1941.

marriage. The exceptions are Elda James Harris (graduate 1922) and Lesley Leitch (graduate 1931), both of whom retired either at marriage or very shortly after. Others resumed practice after marriage. For instance, Ruth McAllister (graduate 1921) married Lawrence Drew-Brook (graduate 1919) shortly after her graduation, but is listed as practising for about eight years after her marriage. Lois Adams (graduate 1926) practised with her dentist father for a few years in Toronto, before marrying Dr. Harold Batson and settling in Otterville, Ontario, where she was listed as being in active practice for another twenty-six years. Obituaries indicate that even the two women whose careers I cannot entirely trace practised after marriage. For instance, Mabel Killins (graduate 1923) married fellow student J. Lorne Connell (graduate 1924) and moved to Saskatchewan where she had a long and distinguished career, including appointment to the provincial dental examining board.⁵⁷ On average, the women who married dentists or doctors practised for 10.6 years after marriage.⁵⁸

Given the extensive demands of being a wife and mother, and social attitudes during the 1920s and especially the 1930s against married women working outside the home, it is not surprising that married women had shorter careers than single women. Nevertheless, despite these social attitudes, it is interesting that many women who married dentists and doctors would continue practising after marriage. It appears that while marriage outside the profession was incompatible with professional practice, marriage to a dentist or doctor was less so. There are two likely explanations for this phenomenon: the first, economic, and the second, ideological. First, dental practice was very expensive, and women who married dentists likely had greater access to equipment and resources, and perhaps more support for its purchase, than others. Although there were opportunities for women in public health, especially in Toronto, the majority of women dentists still engaged in private practice. Establishing one's own office, building up a

57 Obituary, *Journal of the Canadian Dental Association* 29 (1963): 681-82.

58 Again, this average does not include Maude Spence Holway and Mabel Connell, for whom I do not have complete data, but who I have reason to believe practised for a number of years after marriage. It is also worth noting that there is some evidence that many of the women delayed their marriages. Only a few women married their dentist colleagues immediately after graduation; most married much later. For instance, Elda James married colleague Ralph Harris six years after they graduated from dental school in 1922, while Bertha Maloney married J.C. Blakey roughly seven years after their 1923 graduation. Although likely not an intentional delay, the largest gap between graduation and marriage occurred for Marita Burnet and Harold Morris, who graduated in 1923 but married in the 1950s.

patient base, and running what is essentially a business would be hard enough, but the equipment required in dental practice, including dental chairs, cuspidors, lights, instruments, and so on, is highly specialized and expensive. During the 1920s, it was common for dentists to employ a receptionist, dental assistant, dental technician, and/or others to aid them in their practice. The high cost of dental practice has been previously identified as a barrier for women, and a factor discouraging their participation in the profession.⁵⁹ Given this high cost, dental practice was likely more feasible for those women working with their husbands.

That practice with a partner was more economically feasible for women can even be seen in the practice lives of single women. Unmarried women dentists who had private practices tended either to establish offices in their residences, or to live with their family and practise in association with a male dentist.⁶⁰ Some of these women dentists worked with prominent male dentists, whom they likely met through the dental school. For instance, Flora Cowan (graduate 1926) practised with John A. Bothwell, a professionally active dentist who played a central role within public health. Indeed, working with an established male dentist was likely advantageous for both the women and men involved. Male dentists obtained a capable associate who they might view as less likely than an ambitious young male dentist to leave after a few years to practise independently, taking patients with him. For women, association with an established male dentist would have reduced the expense and difficulty of setting up and running a practice, and possibly provided a mentor or sponsor whose endorsement might counteract any reluctance patients might have about being treated by a woman dentist. Overall, there appear to have been concrete

59 Adams, “Women in the Male-dominated Profession of Dentistry,” 35; *A Dentist and a Gentleman*, 162.

60 “Associateship,” as it characterizes dentistry today, is an agreement by which a dentist works for another dentist in return for a percentage of the overall practice profits. The relationship is one of employment, and yet technically, associate dentists are self-employed. The exact arrangements that early women dentists had with the male dentists they worked with cannot be determined. In some cases, they likely “associated” in this manner, working for a share of office profits. Nonetheless, the records merely specify that they shared office space with other dentists. It is possible that some women ran their own practices out of the same office space as other dentists, or that they were in a more formal partnership with these other dentists.

advantages for women in working with male dentists – whether the women were married to them or not.⁶¹

The economic and social utility of practising with another was likely shared by those women who married medical doctors. Lois Adams Batson seems to have practised with her physician husband out of their family home in Otterville. Similarly, Arabelle MacKenzie McCallum practised with her husband, Dr. Archibald McCallum, at their residence in Toronto, until the Second World War.⁶² While husband and wife were in different professions, dentistry and medicine were likely close enough that such a combined practice was both acceptable and economically feasible. The second explanation for why women married to dentists and doctors practised longer than those who did not is an ideological one. Opposition to married women's work outside the home during this era would likely have encouraged women dentists to stop practising after marriage. However, contradicting these social attitudes was the tradition of women's participation in their husbands' careers and businesses.⁶³ While it was not entirely acceptable for a married woman to work separately from her husband and run her own business in the 1920s and 1930s, it was not nearly as controversial for a woman to work alongside her husband.

The significance of both these economic and ideological influences upon the careers of women dentists in the 1920s and 1930s may be corroborated by the experiences of those women who married later in their careers, in the 1950s. These women remained in practice after marriage, but neither economic considerations nor ideological factors would have strongly encouraged them to stop practising. First, these women had long-established practices and so, presumably, the high cost of practice would not be the barrier it could have been earlier in their careers. Second, while work for married women was by no means the norm in the 1950s, it was becoming more commonplace and was more

61 Some women in the first cohort also worked with established men. For instance, Josephine Wells (graduate 1893) practised out of the same office as H.D. Clark, while Marjorie Milne (graduate 1917) practised for a time with periodontist A.J. McDonagh.

62 During the war, Archibald McCallum joined the army and became a Surgeon-Commander. The family relocated to Ottawa. Ottawa city directories indicate that after the war Archibald remained in the army, while Arabelle established an independent dental practice.

63 The latter tradition was quite evident within dentistry and other professions. A good case in point is the afore-mentioned Bridget McDonagh, who was a very active participant in dental college social affairs, acting as hostess and chaperone, and in the profession's Ladies Auxiliary.

socially acceptable. As a result of these changes, marrying outside the profession may no longer have been the deterrent to practice that it was earlier.

In the previous section, I argued that the close ties that women dental students forged with each other shaped their experiences in dental school, and provided key relations of support for women embarking on a dental career. Examination of the practice pattern data, however, illustrates that while these relationships may have continued to be important for women dentists, relationships with men were more central in shaping women’s experiences throughout their careers. Women tended to practise with men, or in isolation, but never with other women. The only near-exception is Alma McEwen (graduate 1922), who practised in the same building with three women physicians in the 1920s and 1930s. In light of the women’s apparent closeness while at dental school, the fact that women did not practise with each other is, again, suggestive of the value for women in working with or near men. Women may have been a source of moral and social support, but were not necessarily a force to advance or support one’s dental career.

It is also notable that so many women dentists either started, or ended up, with a relative in the dental profession. Within this cohort, four women had fathers who were dentists, eight had dentist husbands, and two of the women were sisters. Moreover, two of the women dentists who married dentists are known to have sent sons into the profession. In sum, about half of the women in this cohort are known to have had a relative who also practised dentistry. This fraction could be even higher given that there are some women about whom we know little. Family ties were important in leading women into dentistry, and also influenced their careers once they were in the profession.

THE LITERATURE on women’s involvement in male-dominated professions has tended to emphasize the hardships that women experienced, and the fact that they did not have the same privileges, opportunities, and experiences as men. While the same could be said about women’s involvement in dentistry during the 1920s and 1930s, there is little evidence of overt discrimination or prejudice against women. Women in dental school in the early 1920s were numerous enough that they were less isolated than their predecessors, and they appear to have been supported by many of their male colleagues and professors.

The nature of women's experiences within dental practice, and to a lesser extent at the dental school, was likely shaped by the fact that dentistry is primarily a private-practice profession. Previous research has documented barriers that professional women have faced upon embarking on their careers – difficulties associated with gaining employment and winning promotions. In dentistry, there may have been fewer institutional barriers. Women dentists were not competing with men for jobs as most dentists practised independently. Employment was not an attractive practice option for most dentists, and thus, women seeking jobs in hospitals and in public-health settings likely had little competition. Moreover, there is little reason why an established dentist would hesitate to take on a female colleague as partner or associate. It is only in the more institutionalized and higher-status areas of dentistry that one can see barriers to women's participation. Women were not active on the RCDSO board, the executive of the Ontario Dental Association, or on faculty at the dental school. Nevertheless, in terms of the actual practice of their professions, there was space for women to work. The structure of private practice in and of itself may have been difficult for women (and hence encouraged their tendency to practise with men), but if they could succeed at dental school and leap the initial hurdle to practice, there was room for women to have a successful dental career.

Dentistry has long been a male-dominated profession, historically defined by men, for men.⁶⁴ In this light, it is striking that many women dentists from the 1920s education cohort succeeded in dental school, and became, like Maude Spence, “real girls” and “real dentists.” Especially notable is the number of women dentists, many of whom married dentists or medical doctors, who managed to have both a marriage and family life, and a fairly lengthy career. It might be rewarding to explore this subject further, in order to elucidate how early professional women managed to negotiate a balance between family life and a career. It might also be profitable to trace the connections between the kind of professional training received, the significance of marriage patterns (for example, spouse's occupation, the timing of marriage) and employment opportunities, in evaluating the success of these women in achieving such a balance.

64 Adams, *A Dentist and a Gentleman*, 4.