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Women and Children Only: María Teresa Saleme and the Feminization of Dentistry in Argentina

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Key Words: Argentina, dental practice, dental schools, dentistry, feminization, first-wave feminism, gender, Latin America, Lebanese immigrants, professionalization, women

Abstract

Women currently form the majority of dentists in Latin America, yet the historical reasons for this development have not been explored. As early as the second decade of the 20th century, a high number of dental students in Argentina were women, yet the stories of these early women dentists have not been told. This study uses the life of María Teresa Saleme, a pioneering woman dentist, as a case study to describe the experiences of early woman dentists in Argentina. This study posits that the way in which the professionalization of dentistry occurred in Argentina set the stage for the subsequent predominance of women in the field. Sources include archival research and personal interviews. In addition, a review was undertaken of the current literature on early women dentists, the history of dentistry in Argentina, and the professionalization of dentistry.

Introduction

After graduating from dental school in Buenos Aires in 1917, María Teresa Saleme returned home to Tucumán, a province in the northwest of Argentina, to establish a dental practice. The Saleme family still has two bronze placards that used to be displayed next to the doorway of her dental office, which doubled as her home [Figure 1].¹ The first placard reads: "M.T. Saleme de González Fernández, Dental Surgeon." A second placard, added later, reads: "Women and children only."

The story of María Teresa Saleme, who was one of the first women dentists in Argentina, and who was also my great-aunt, has always fascinated me. How, I wondered, did she become a dentist in 1917, a time when it was almost unheard-of for women to enter the professions? And why was her practice limited to women and children? I sought answers to these biographical questions and others.

María Teresa's story interested me, too, because it occurs at a particularly fraught historical conjuncture. In the late 19th and early 20th centuries, Argentina was a wealthy country, both in absolute terms and relative to other countries, including English-speaking ones. Because of the turmoil caused by industrialization, war and various pogroms, and because of Argentina's relative wealth, massive waves of immigration flowed to Argentina, primarily from Europe, but also from the Middle East.² Moreover, the year 1917 occurred during what is now called the first wave of feminism. At this time, feminists fought for voting rights and for equality of educational

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opportunity, while still clinging to the Victorian notion that men and women should remain in separate spheres.³ Finally, the year 1917 comes at the tail end of what is commonly agreed to be the professionalization of dentistry. Professionalization is a term used by sociologists to describe the process by which an occupational group defines itself as a profession by establishing qualifications and ethical norms. In addition to filling in missing biographical details, I wanted to understand how my great-aunt's story fit into the larger narratives of immigration, feminism, and professionalization.



Figure 1: Bronze placards

Method

To gather information on María Teresa Saleme, I obtained archival documentation from the Archivo histórico de Tucumán. I also interviewed family members who have personal knowledge of, and documents relating to, my great-aunt. The persons interviewed were: her granddaughter, Constanza González Albornoz; her daughter-inlaw, Adolfina Albornoz Robles; and her nephews, Alejandro Saleme Martínez and Horacio Saleme Martínez. In addition, I reviewed the existing literature on early women dentists, the history of dentistry in Argentina, and the professionalization of dentistry that occurred in Argentina and elsewhere at the end of the 19th century and the beginning of the 20th.

The Professionalization of Dentistry

Schapira defines a profession as "a group that has the ability to organize itself, supported by an ideology of expertise and social service." Professionalization brings with it autonomy and monopoly, legitimated by the State. Schapira and Adams, in their respective studies of the professionalization of dentistry in Argentina and the province of Ontario, Canada, concur that professionalization occurred in both instances between the end of the 19th century and the beginning of the 20th. Schapira and Adams concur, too, that the dental profession, in both instances, sought to increase its prestige by distancing itself from its origins in the artisan trades of barber-surgery and blacksmithing.^{4,5}

For the Argentine dental profession, however, the attainment of autonomy remained elusive. In contrast with Ontario, which in 1868 became the first jurisdiction in the world to enact legislation allowing the dental profession to regulate itself, until the 1940s dentistry in Argentina was considered to be a subdiscipline of medicine. Until the 1930s, dental offices were subject to inspection by medical doctors.6 In 1947, when the University of Buenos Aires finally established a separate Faculty of Dentistry, the rationale given was that medical doctors could not be expected to have proficiency in the particular craftsmanship required of dentists. Thus, as Schapira argues, the dental profession used artisanship as a pretext to liberate itself from the control of the medical profession, while distancing itself from its artisan origins.

Adams argues that the public health campaigns that took place in Toronto, Ontario, at the turn of the century, in which schoolchildren were taught about oral health, were racially tinged. She argues that dentists, who at the time were almost exclusively white, Anglo-Saxon Protestants, believed that the poor oral health of immigrants was a sign of their lack of civilization and even their moral depravity. It could be argued that the campaign of the Argentine medical and dental professions to outlaw *curanderos* (traditional healers) was also racially tinged, since most *curanderos* were not of European descent.

The Feminization of Dentistry

Adams notes that, in the literature on the feminization of the professions, feminization has two definitions: an increased rate of women's participation in a given occupation, and changes in the actual practices of an occupation due to the participation of women.7 Feminization, she adds, is inversely correlated with the status of a profession. In the case of clerical work, for example, the increased participation of women led to a subsequent decline in the status of the occupation. In the case of pharmacy, however, it was a decline in the autonomy of pharmacists that triggered a reduced interest on the part of men, which in turn led to increased opportunities for women. In the case of Argentina, it seems likely that the dental profession's initial lack of autonomy made it less attractive to men, which facilitated the entry of more women.

Adams argues that, while women were never formally barred from dentistry in Ontario as they were from medicine and law, the first generation of women dentists was marginalized and encouraged to practice dentistry in a way that conformed to social expectations.⁵ In other countries, women dentists were likewise encouraged to pursue gendered roles. In an early example of this, an advertisement appeared in French newspaper sometime between 1827 and 1848, stating: "Miss Hélène Purkis, dentist for ladies, pupil of her uncle, 1st arrondissement. This artist, honorably mentioned, advises persons who have had the misfortune to lose their teeth in part or in whole, that she replaces them without pain, inexpensively, in perfect imitation of nature. She cares for teeth, cleans them, cauterizes them, fills them, and always tries to keep the ones that remain. Consultations are free.⁸ (Translated by the author)

Hélène Purkis describes herself as a "dentist for ladies." Not only does she limit herself to women patients, but she uses the more genteel term "ladies." Since women whose names are mentioned in public, for example, in a newspaper, risked being labelled as disreputable, she emphasizes that her name is mentioned "honorably." This was perhaps also done to reassure potential patients that their names would not be sullied by associating themselves with her. Like other early women dentists, she has a relative (her uncle) who was a dentist. Like many modern dentists, she provides the first consultation for free.

Hyson, writing of early women dentists in the United States, provides more examples of this phenomenon. Annie D. Ramburger graduated from the Pennsylvania College of Dental Surgery in 1874, after which she established a practice treating only women and children. M. Evangeline Jordon graduated in 1898 from the University of California School of Dentistry and subsequently limited her practice to children, becoming the first pediatric dentist in the US. Hyson projects that by the year 2020, 20 percent of US dentists will be women, while noting that, in Europe and South America, women already dominate the field.⁹ It is estimated that women currently comprise 70 percent of the dentists in Argentina. (https://www.lavoz.com.ar/ ciudadanos/dos-de-cada-tres-egresados-de-la-uncson-mujeres)

The First Dentists

It was in the 18th century that an individual was first authorized to perform dentistry in what is now Argentina. In 1779, an Irishman who had studied medicine in Paris, Miguel O'Gorman, was appointed the first *protomedicato* (Chief Medical Examiner) of the Viceroyalty of the Río de la Plata.¹⁰ In 1781, O'Gorman granted the title of "bleeder and tooth-puller" to Pedro José de Faya.¹¹ In comparison, it was not until 1841 that legislation was passed in North America, in the state of Alabama, authorizing the issuance of dental licenses.¹² At the time, the lines between medicine and dentistry were not as clearly demarcated as they are now, so it was seen as fitting for a surgeon (a "bleeder") to also act as a "tooth-puller."

At the beginning of the 19th century, all the dentists in Argentina were foreigners, due to the fact that there were no universities with dental programs. The University of Buenos Aires did not yet exist, while the much older University of Córdoba offered only theology and law. In 1828, Pedro Balloy, a

Frenchman who had studied dentistry in Paris, arrived in Argentina and settled in Córdoba.¹³

In 1837, another Frenchman, Tomás Coquet, became the first person to receive a dental diploma in from the University of Buenos Aires¹⁰. He was also the personal dentist of Juan Manuel de Rosas, a *caudillo* (strongman) who ruled the province of Buenos Aires and, later, the Argentine Confederation.¹⁴ It must have been stressful indeed to be the personal dentist of a famously ruthless dictator.

In 1846, another Frenchman, the phlebotomist Juan Etchepareborda, was authorized to "extract, fill and clean teeth."⁴ Based on his surname, he may have been born in the Basque region of France, near the Spanish border. In 1854, enthused by the electric street lights that he had seen in Paris, he staged a public demonstration of the use of electricity for street lighting, briefly illuminating the Plaza de Mayo.¹⁵

The first woman to become a dentist in Argentina was also a foreigner. In 1888, Céline Duval, a Frenchwoman who was already a dentist, obtained authorization to practice in Córdoba. The first woman dentist who was not a foreigner had a family member who was a dentist. In 1889, Ángela Zuloaga de Boucoucona, the wife of a well-known dentist, passed her licensing exams.¹⁶ While María Teresa Saleme was among the first women dentists, she was not the first.

Schapira notes that process of professionalization requires, as a precondition, the association of the profession with a university, which acts as an agent of legitimization. This occurred in 1892, with the establishment of the Dental School of Buenos Aires, which was a branch of the Faculty of Medicine of the University of Buenos Aires.¹⁷

Early Life

María Teresa Saleme's exact date of birth is unclear. Her dental license states that she was twenty years old in 1918, but in reality, she was probably twenty-two at the time. She was said to be ten years older than her brother Alejandro (my grandfather), which means that she was likely born in 1894. The possible subtraction of two years from her age may have been enabled, indirectly, by the policies of Julio Roca, who was the governor of the Argentine Federation at the turn of the century. Roca had led a campaign to take control of birth records, among other things, away from the Catholic church and many birth records were lost as a result.

María Teresa Saleme was born in San Miguel de Tucumán, the capital of the northwestern province of Tucumán. Founded in 1565, it was a key city during the Spanish colonial era, due to its strategic location at the midpoint between Buenos Aires and Upper Peru (modern-day Bolivia). By the end of the 19th century, it was still important enough to draw large numbers of immigrants. Tucumán benefitted, moreover, from a newly built railroad—no longer extant—linking it to the capital, and from protective tariffs on sugar and wine.²

María Teresa's father, Elías Saleme, was a Maronite Christian who born in what is now Lebanon, which at the time was part of the Ottoman Empire. It is not clear what Elías did for a living, but he may have worked for his brother, Fortunato, who owned the El Pacará cigar factory, along with land on which he grew tobacco.¹⁸ María Teresa's mother, Matilde Díaz Olavarría, was a midwife who was born in Haro, La Rioja, a province in the historic Old Castile region of Spain.

Schapira notes that the first dentists in Argentina were often foreign-trained dentists who had immigrated to Argentina after studying elsewhere, or first- and second-generation immigrants who studied dentistry in Argentina.⁴ In this respect, María Teresa, the daughter of immigrants from Lebanon and Spain, was typical. Adams further notes that first women dentists often had family members who were dentists or medical doctors.⁵ In this respect, María Teresa, the eldest of six children, was also typical. María Teresa may have been inspired to become a healthcare practitioner by the example of her mother, who was a midwife. María Teresa may, in turn, have served as an example to her brother Alejandro, who would become a surgeon, and to her future brother-in-law, Juan Fontana, who would become a dentist and marry her sister Elisa.

Although María Teresa's choice of career was unusual, she did come from a progressive family that approved of women who worked outside the home. Three of her four sisters had careers, albeit in fields that were traditionally open to women. Elisa and Gabriela were schoolteachers, while Casilda was a music teacher who taught at the academy of the composer Enrique Mario Casella before opening her own school.

A photo of María Teresa Saleme shows an attractive young woman who looks into the camera with an intelligent and purposeful gaze (Fig. 2).¹⁹ The photo is undated, but based on the short, bobbed hairstyle and the boxy, waistless dress, it appears to have been taken in the 1920s. She enjoyed playing the piano and painting religious motifs, both respectable hobbies for a young woman in the traditional, conservative city of San Miguel de Tucumán. Her descendants still have one of her paintings. According to her family, she was drawn to dentistry for the same reason that she enjoyed painting: she had a high degree of *manualidad*, which can be translated as "handiness" or "manual dexterity."



Figure 2: María Teresa Saleme

A desire for social prestige was also probably one of the reasons that she was drawn to dentistry. As Adams notes,in 19th century Canada, the dental profession had become a vehicle for social mobility. As Schapira notes, in 18th century Argentina, dentistry was not initially considered to be a genteel profession, since dentists work with their hands. At the time, the only genteel professions were law, the military, and the priesthood. By the early 20th century, however, it had increased in prestige, making it a vehicle for upward mobility.

Dental Studies

Maria began her studies at the University of Buenos Aires in 1914, at a time when the Dental School was still part of the Faculty of Medicine. The original Faculty was a grand structure, located in the genteel neighborhood of La Recoleta, near the Clínicas teaching hospital. It was built in 1890 by the Italian architect Francesco Tamburini,²⁰ who also built the Casa Rosada (the seat of the national government) and the Teatro Colón (a renowned opera house).²¹ Designed with the goal of combining theory and practice, it housed programs in medicine, pharmacy and dentistry.

Her studies lasted three years. Siutti, in his study of the history of dental education in Argentina, notes that when the dentistry program was originally inaugurated in 1891, it was a one-year program. In 1894, this was increased to two years; in 1910, it became three years; and in 1919, four years. María Teresa was among the first dental students to be taught by a professor who was a dentist. Until 1913, only medical doctors were allowed to teach dentistry. In 1917, she was awarded a diploma in dental surgery. The university did not begin to award doctorates to dentistry graduates until 1920.¹⁰ The explains why the placard that would later be placed outside her dental office does not contain the title *doctora*.

Did she encounter any obstacles, due to her gender, in pursing her studies? Her family reports that she was one of five women in her class. In comparison, in the province of Ontario, Canada, a total of nine women became dentists in the first fifty years of the profession, 1868-1917.²² This indicates that the progress of women, at least with respect to the dental profession, proceeded more quickly in Argentina than in other advanced nations. The high number of women in her class suggests, moreover, that dentistry may have been viewed as an unusual but acceptable pursuit for a woman, particularly when compared with medicine. In dentistry, unlike medicine, students were not required to examine unclothed men. Not only were there a significant number of female students enrolled in dentistry, they were even in leadership roles. In 1921, a mere four years after María Teresa Saleme graduated, the editor of the dentistry student journal was a woman, Elvezia Tatarletti.²³ Adams notes that in the 1920s there was a sudden influx of women dental students at the University of Toronto, which suggests the existence of a worldwide trend.

In the case of María Teresa, the biggest obstacle by far was the fact that she came from a city that did not, at the time, have a school of dentistry. A man could solve this problem by living in a boarding house while pursuing his studies, but for a woman it was a different matter. As the Mexican-American writer Sandra Cisneros reports, among traditional Latin American families, until quite recently, it was not considered respectable for a young, unmarried woman from a good family to live on her own while studying.²⁴ On the question of where María Teresa lived while pursuing her dental studies, the family is divided. One relative insists that María Teresa's father accompanied her to the capital and that she continued to live under her father's roof, while another insists that the family would not have had the means to afford this arrangement. Yet another speculates that she may have boarded with a friend of the family. The most likely scenario is that she lived in a boarding house for women.

At any rate, the debate underscores the cultural factors that limited the options of women who aspired to become dentists. Women who wished to further their studies were at the mercy of their families. A woman who wanted to further her studies in another city, but who came from a family that did not that did not believe that unmarried women should live on their own, was out of luck. A woman who had ambitions to become a dentist, but who came from a family that did not believe women should pursue higher education, was also out of luck. To cite an example from within María Teresa's own family, her younger brother Alejandro married a woman (my grandmother Silvia) who wanted to go to university, but had been forbidden to do so by her family.

Dental Practice

María Teresa Saleme returned home to San Miguel de Tucumán upon completion of her studies, which was noted in a brief article in the local newspaper El Orden on January 9, 1918.25 The headline of the story reads "An Advance for Feminism: The First Woman Dentist in Tucumán." The story goes on to say: "Miss Maria Teresa Saleme has just graduated as a dentist from the Faculty of Medical Sciences of the Federal Capital, Odontology Section, completing her studies without having to repeat any courses and with excellent grades. Miss Saleme, who will be establishing her dental office in this capital, being the first woman among us to undertake such an enterprise, represents an exponential increase in the advance of feminism in our Republic. We illustrate these lines with a photograph of the young woman dentist, whom we wish much prosperity in her profession, the exercise of which she is just beginning, and who will surely serve as a role model for the young women of our province" (Fig. 3).

What is striking about this article is its use of the "feminism," both in the title and in the first sentence. Feminism is a word that first began to be used around 1910 and that remains controversial one century later.²⁶ The first sentence is mildly condescending, congratulating Maria Teresa on her grades, as if she were a schoolgirl. In the second sentence, the anonymous author notes the extraordinary nature of her achievement, which is singular ("the first woman among us to undertake such an enterprise") and has national implications ("in our Republic"). The phrase "an exponential increase in the advance of feminism" contains an implicit acknowledgement of the hurdles that she must have overcome. It also expresses optimism that the progress of women would continue to increase in a spectacular way. The fact that women in Argentina



Figure 3: Article from El Orden dated January 9, 1918

did not get the vote until 1949 suggests that, in fact, feminism did not advance exponentially.

Later that same month, she obtained a license to practice dentistry from the provincial health council. The license states: "WHEREAS Doña Maria Teresa Saleme, twenty years of age, has received the title of Dentist granted by the National University of Buenos Aires on the 15th of December 1917, so this Council registers her as a professional in the Province, authorizing her to practice her profession within the valid regulatory territory. To this end, she adds her signature at the bottom of the present record of registration by the President and Secretary of this Division on the twenty-ninth day of the month of January of the year nineteen hundred and eighteen" (Fig. 4).²⁷

The text of the license answered one of the questions for which I sought at answer. Was her practice restricted to women and children by the licensing body, or for some other reason? The license states that she can practice anywhere within the specified territory, but does not mention any other restrictions. Clearly, the restrictions on her activity were self-imposed.

The other thing that is notable is the number 208. The provincial health council issued licenses, using a consecutive numbering system, to various healthcare practitioners, including doctors, dentists, pharmacists, midwives, and *idóneos* (those deemed qualified to practice based on work experience or an apprenticeship). The fact that her license number is so low underscores the small number of dentists, as well as the relative infancy of the profession.

After a stint working for another dentist, she set up her own dental office, initially in the home she shared with her family, and later in the home she shared with her husband. A 2017 blog post that appeared on the website of the Archivo histórico de Tucumán notes that she advertised her services in *El Orden*, with several ads appearing after the initial article about her.²⁸

She practiced for several years before marrying. This change in civil status explains the wording of the placard that was placed outside her dental office: "M.T. Saleme de González Fernández, Dental Surgeon." According to the logic of a

composite Spanish surname, Saleme is the surname of her father's father, while González and Fernández are the surnames, respectively, of her father- and mother-in-law. The use of initials in place of "María Teresa" may have been done for reasons of space, but may also point to a desire to de-emphasize her gender.

Her husband, Ramón González Fernández, does not seem to have had a profession of his own. Given that Maria Teresa had a good income from her practice, it seems likely that she was the main breadwinner of the family, which is extraordinary for the era, and which does not occur elsewhere in the literature on early women dentists. Ramón deserves credit for marrying a woman who, by all accounts, was more accomplished than he was, something with which many men would not have been comfortable. This suggests that the González Fernández family was, like the Saleme family, progressive in its views towards women.

Ramón and María Teresa had three children, one of whom died in infancy. By the standards of San Miguel de Tucumán, a traditional, Catholic city, this was a small brood. The small size of her family was most likely due to the fact that she had married late, in her thirties, but it may also have been due to the demands of her profession. While she was at work, the children were cared for by the household staff and by her sisters, all but one of whom were either unmarried or widowed. At any rate, since her dental office was in her home, the children were never far.

According to family lore, the second placard that was subsequently placed outside her dental office—the one that read "Women and children only"—was added at the insistence of her husband. Dentistry requires a high degree of physical proximity to the patient, and dentists are often alone with the room with their patients. Just as it was considered improper for unmarried women to live alone, so too it was considered improper for a woman to be alone in a room with a man who was not her husband. One wonders if there was a precipitating event, occurring sometime between the first and second placard, that led to this change in the types of patients seen.

Her dental office was located in the 400 block of Maipú street, in the historic centre of Tucumán,

just blocks from the *Casa de independencia* (Independence House), where Argentina had declared independence from Spain in 1816. Nowadays, Maipu Street is a vibrant neighborhood with mixed residential and commercial buildings, including some that seem to date from the 19th century.

Sadly, María Teresa Saleme died young. She was diagnosed with breast cancer at a time when it was an incurable disease, and died on September 23, 1935, when she was about 41. At the time of her death, her children were four and five years old. She was initially entombed above ground, in the Spanish style, in the Cementerio del Oeste in Tucumán. Her remains were later removed, reduced to ashes, and placed into urns, along with those of her parents and the child who had died in infancy. Ramón remarried and left the children in the care of their aunts, María Teresa's sisters.

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Figure 4: Dental license

Conclusion

María Teresa Saleme's story is both familiar and extraordinary. The tale of a second-generation

immigrant who used higher education to achieve social mobility is a familiar one. The gender of the immigrant, the choice of career, and the historical conjuncture during which the events unfolded, are extraordinary. Despite her short career, her experiences were typical of those of early woman dentists in Argentina. The limiting of her practice to women and children shows the cultural expectations to which women dentists were expected to adhere. The modern-day debate over where she lived suggests that, for many women, the ability to pursue higher education was subject to cultural restrictions. At the same time, the relatively large number of women in her class, as well as the glowing article that was written about her after she graduated, suggests that the first wave of feminism arrived early in Argentina.

Her experiences show, moreover, how the professionalization of dentistry unfolded differently in Argentina. She studied dentistry at a time when dentistry did not have its own faculty at the university, since it was considered to be a subdiscipline of medicine. She established a dental practice at a time when dental offices were subject to inspection by medical doctors, and dentistry was regulated by the medical profession. The conditions under which she studied and practiced reflect the lack of autonomy of the dental profession. It was likely this lack of autonomy that made the profession less appealing to men, setting the stage for its eventual feminization.

Several avenues of investigation remain. At the time of writing, the Museum of the Faculty of Dentistry at the University of Buenos Aires was closed, since the director had passed away and no replacement had been found. This made it difficult to obtain details about Maria Teresa's studies or those of her peers. For example, although it is known that María Teresa was one of five women, it is not known how many dental students there were in total. Similarly, although the Archives of Tucumán published a blog stating that María Teresa had advertised her services in the local paper *El Orden*, the advertisements could not be unearthed, due to the fragile condition of the archived newspapers.

Nevertheless, despite these challenges, new insights did emerge. In particular, the comparison of the existing literature on the professionalization of dentistry proved especially fruitful. The English-language literature does not consider developments outside North America or Europe; the Spanish-language literature does not consider the feminization of the profession. The present study begins the process of bridging the gap.

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