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STUDENT ENROLLMENT: A REPORT REGARDING FIVE YEAR'S EFFORT OF THE COMMITTEE ON DENTAL EDUCATION AND GUIDANCE

By EMMETT J. SCOTT, B. S., D. M. D.

During the last ten years enrollment in American dental schools has gone through a distinct period of ebb and flow. The diminution in size of freshman classes during the mid-thirties occasioned no little concern among dental educators. Editorial comment in the literature is sufficiently fresh in our minds to need no extensive review at this time.

We venture the opinion that dental education has left the nadir of one of its most alarming depressions. Nevertheless, our major problems of distribution, economic adjustment, patient-dentist relationships and scientific growth are still with us and will demand continuous and seriously thoughtful attention.

Many years ago dentistry left the period of apprentice tutelage and assumed the more dignified and responsible role of a university affiliate. During the latter period it has matured so greatly that its pioneers, were they here to evaluate its progress, would find great joy in its achievements.

Our legacy and present responsibility is no small one. Certainly in these days of international crisis it presents no easy tasks. Yet we must forge ahead, diagnosing accurately on the scene that which is merely a growing pain from that which represents a real crisis within our structure.

The remedies are not always clear. Nor are they easily applied or quickly effective.

The period of the mid-thirties and their decline in enrollment were co-incidental with our "depression years." Further evolution in pre-dental requirements occurred. Reorganization of the dental curriculum was in progress. There has never been any organized effective dissemination of information among college students in the interests of dentistry.

Enrollment declined and little wonder. But during that period



A view of the Infirmary during operation of the Children's Clinic. Students are trained here to give adequate care to children's teeth and to educate the child in home care of the mouth.

dental education took a firmer and broader foothold in the scope of its educational procedures.

Word comes that classes are getting larger in other schools. Steps are being taken toward strengthening information for vocational guidance. It seems appropriate at such a time to submit a brief report to our alumni and friends upon our activities here at Howard University.

At the height of what has been called "Dentistry's Declining Birth Rate" our classes diminished greatly in size. We accepted this as a challenge and set about to fortify our position by the adoption of remedial measures.

Honestly, we would prefer to believe that present conditions are the result of a spontaneous realization among our younger contemporaries that dentistry offers greater opportunities for public service than ever before.

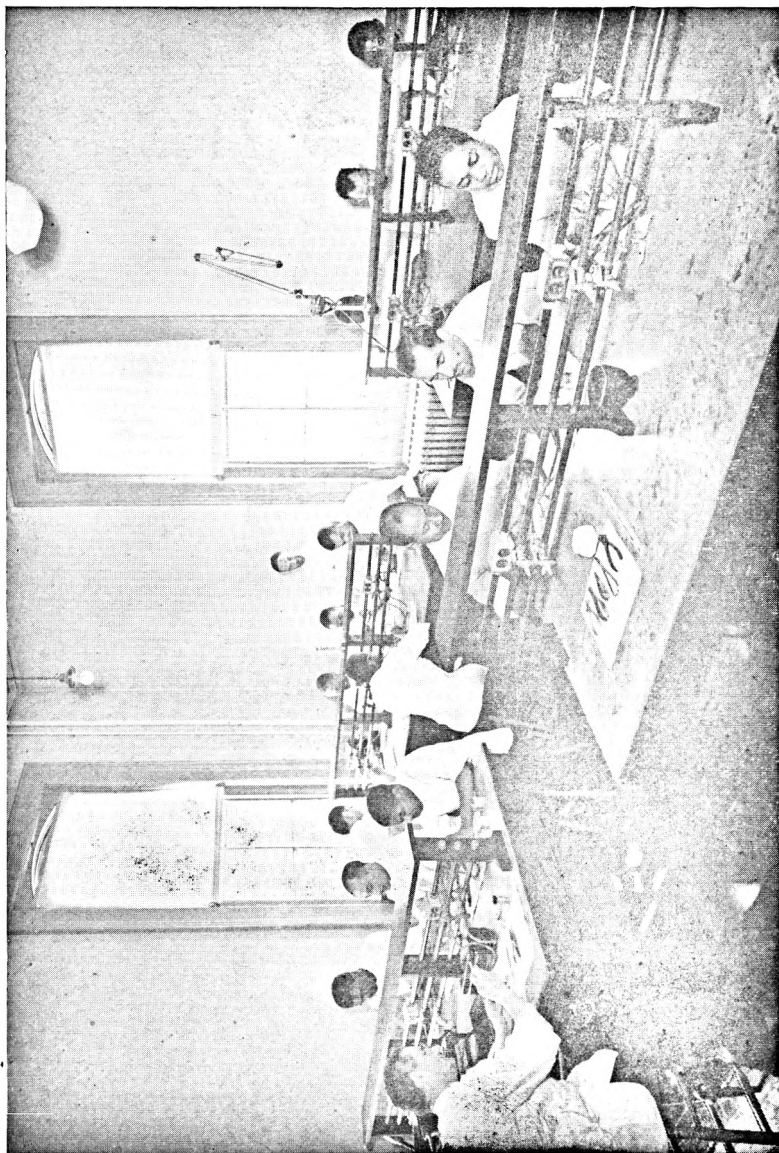
It would have been foolish to await the spontaneous solution of such a critical situation. Therefore, during the school year 1936-1937 a Committee on Dental Education and Guidance was established. With the gracious and wholesome cooperation of colleges and universities, a program was inaugurated which combined excursions into the field with a continuous personal correspondence for the purpose of aiding college students in making an intelligent choice of a career. If information concerning dentistry was lacking we supplied it. If the student showed even a casual interest we cultivated it. In no case did the service assume even a suggestion of pressure. Students were encouraged uniformly to earn a collegiate degree if it appeared at all possible.

Members of the faculty of dentistry cooperated fully in visiting a large number of schools annually for the purpose of presenting the facts concerning dentistry as a vocation.

This program has become a sustained undertaking and efforts are continually being made to make it more graphic and more convincing.

Here at Howard a pre-dental club has been organized in the College of Liberal Arts. Maintenance of scholastic requirements and a voluntary expression of interest in dentistry are the only requirements for membership. Appropriate meetings enable the members to receive by personal conference any background material that will aid them in achieving their expressed desires.

In appreciation of the very wholesome cooperation with which



The technic laboratory in Orthodontics. Here training is received in the construction and use of contrivances for correction of irregularities of the teeth and jaws.

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the program has been received, we are happy to submit the following summary of its results:

ENROLLMENT FOR THE YEARS 1930-31 TO 1940-41 INCLUSIVE

	<i>Freshmen</i>	<i>Sophomores</i>	<i>Juniors</i>	<i>Seniors</i>	<i>Total</i>
1930-31	7	19	16	13	55
1931-32	10	6	17	15	48
1932-33	8	4	7	18	37
1933-34	23	6	3	7	39
1934-35	13	13	5	3	34
1935-36	12	8	12	6	38
1936-37	11	8	6	12	37
1937-38	17	7	8	8	40
1938-39	18	12	7	8	45
1939-40	24	17	11	7	59
1940-41	24	22	15	11	72

With the exception of the entering class of 1933-34, the entrance quota was low indeed for the period reported. For that reason no effort is made to determine a degree of diminution from any established expectancy.

Using 1936-37 as a point from which estimates may be reached concerning the effectiveness of the current program, enrollment for freshmen increased 54% in 1937-38; 63% in 1938-39; and 118% in 1939-40 and 1940-41.

The rates of increase per annum over the preceding class were: 54%; 5%; 33 1-3% and 0% respectively.

During the same period the total enrollment has increased from thirty-seven to seventy-two (exclusive of dental hygiene students). This represents a gain of 94% during the period of operation of the program.

Our conclusions, in the form of deductions from the foregoing, are that:

1. Our student body is showing a healthy and steady increase.
2. There is a much greater number of holders of the baccalaureate degree in our midst.
3. These men, because of their longer training and broader educational horizon, are showing a much more effective approach to their daily problems than heretofore.
4. Because of our growing enrollment our physi-



The laboratory in Oral Histology. In order to care for the mouths and teeth of the public, each dentist must have a thorough knowledge of the normal structure of his field of operation. The normal must be thoroughly understood in order to be able to recognize the abnormal.

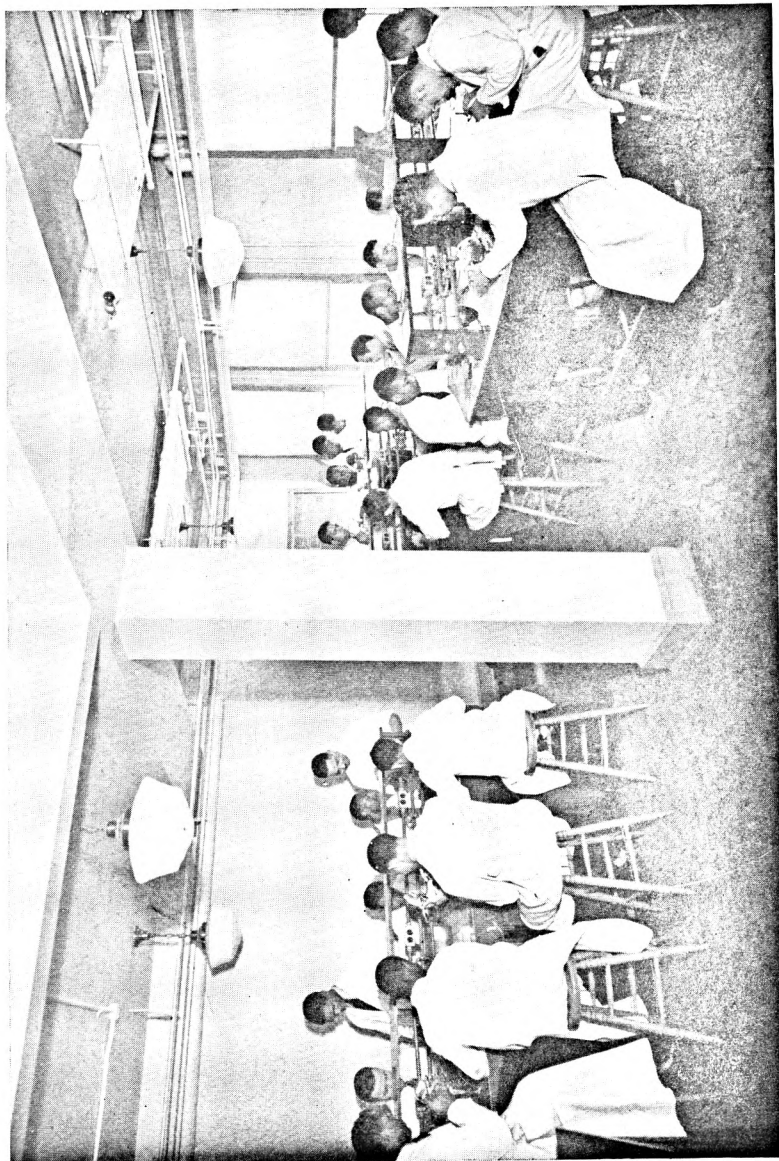
cal environment is becoming sorely taxed. Expansion of our training facilities is not only becoming more justifiable, but is a dire necessity.

Illustrations accompanying this article are indicative of the alert activity prevailing in the College of Dentistry. We hope that they may serve the purpose of making our alumni sufficiently nostalgic to produce some contact with their Alma Mater.

As indicated elsewhere in this issue, it would be a fine expression of loyalty for each man to take unto himself a protege. Cultivate him and direct his interests toward dentistry. Inspire him by your own example to look forward to a field of endeavor that was good enough for you and is even better today.



Everyone now believes that there is in a man an animating, ruling, characteristic essence, or spirit which is himself. The spirit, dull or bright, petty or grand, pure or foul, looks out of the eyes, sounds in the voice, and appears in the manners of each individual. It is what we call personality.—Charles W. Eliot



The laboratory in Prosthetic Technic. Construction of artificial dentures is taught so that missing, or lost, teeth may be restored and masticatory function preserved.