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One Woman's College and Medical School Experience in the 1920s: Hilla Sheriff's Story

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ONE WOMAN'S COLLEGE AND MEDICAL SCHOOL EXPERIENCE IN THE 1920S:
HILLA SHERIFF'S STORY

by

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DEDICATION

This educational biography is dedicated to my beloved Nana, who instilled in me a passion for learning. A story-teller, an animal-lover, a reader, thank you for being a role model and teacher. Te amo.

This biography is dedicated to all of the women who have forged the way for others, especially those whose stories have not yet been told.

Finally, I dedicate this work to my family and friends who have helped me through this journey.

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It has been a pleasure to take classes taught by the professors in the College of Education. I have gained a widened perspective on so many topics and issues.

Thank you, Dr. Susan Schramm-Pate, for your encouragement since my very first semester. I appreciate the many opportunities you gave me to present and share what I have learned with others. I am so grateful that you encouraged me to pursue my interest in the historical aspects of education.

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Dr. Craig Kridel, this dissertation would not exist if you had not shared your wisdom of archival research with me. Thank you for teaching me so much about biographies.

ABSTRACT

The purpose of this historical biography is to describe the educational experiences of Hilla Sheriff, an extraordinary woman who challenged attitudes about women's education and employment in the medical field in the United States in the 1920s. Although the majority of women who attended a college or university at that time went to co-educational institutions, they were often limited to traditional gender role coursework such as home economics, nursing, or teaching. This study of Sheriff's educational experiences particularizes attitudes about women's education and employment in the 1920s. Many people did not see value in higher education for women. The thread of the "women's sphere" is woven into the articles about Sheriff and letters she received. A historical lens shapes this study. This interpretive study is the researcher's effort to recount the meaning the subject gave to the reality around her through the systematic identification of facts surrounding historical events. Further, the study is descriptive in that it documents the academic life of the subject. The findings accumulated through the study reflect the researcher's endeavor to determine what Sheriff experienced as a student at a coeducational college and medical school. Further, this is an attempt to determine what motivated Sheriff to attend college and medical school. Sheriff's early involvement with women's organizations set her on a path to becoming an influential public health leader.

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CHAPTER 1

INTRODUCTION: WHO WAS HILLA SHERIFF?

An Introduction

The purpose of this historical biography is to describe the educational experiences of Hilla Sheriff, an extraordinary woman who challenged attitudes about women's education and employment in the medical field in the United States in the 1920s. Sheriff passionately promoted public health in South Carolina. Referred to by Patricia Evridge Hill as "South Carolina's most highly decorated public health official," Sheriff is "often associated with the eradication of endemic pellagra, pioneering contraceptive research for the Milbank Memorial Fund, and an examination of toxoplasmosis and other forms of household poisoning."¹ These accomplishments would not have been possible without her college education and medical degree.

Sheriff was born in 1903 in Easley, SC. Her parents abided by traditional gender roles: her father maintained a lumber business while her mother took care of the home. However, her mother also devoted time to educational and medical philanthropy, and two

1. "Dr. Hilla Sheriff Caught between Science and the State at the South Carolina Midwife Training Institutes," in *South Carolina Women: Their Lives and Times*, Vol 3, ed. Marjorie Julian Spruill, Valinda W. Littlefield, Joan Marie Johnson (Athens, Georgia: University of Georgia Press, 2012), 79.

of her sisters would become schoolteachers.² Obviously, the family valued education. After graduating from high school, Sheriff went to the College of Charleston to take pre-medical courses. However, she transferred to the Medical College of South Carolina (MCSC) after only two years, without receiving her bachelor degree. So, at the age of nineteen, Sheriff began medical school.

Although one suitor broke his engagement with Sheriff due to her pursuit of a medical degree, she would ultimately wed another physician. That same year, Sheriff began working for the SC Department of Health. Despite retiring in the mid-1970s, she would continue to win awards for several more years until her death in 1988. Sheriff became known for devoting herself to community health issues that, while not unique to SC, were common in poor areas of the South. Inexpensive corn-based diets led to epidemic levels of pellagra, though they did not know at the time it was caused by a chronic lack of the essential vitamin niacin. Knowing that families couldn't afford more, Sheriff had a small team conduct cooking demonstrations to teach women how to preserve fruits and vegetables, while she treated sick children.³ Sheriff also noted that

2. Patricia Evridge Hill, "Dr. Hilla Sheriff Caught between Science and the State at the South Carolina Midwife Training Institutes" in *South Carolina Women: Their Lives and Times*, Vol 3, ed Marjorie Julian Spruill, Valinda W. Littlefield, Joan Marie Johnson, (Athens, Georgia: University of Georgia Press, 2012): 81.

3. Patricia Hill, "Go Tell It on the Mountain: Sheriff and Public Health in the South Carolina Piedmont, 1929 to 1940," *American Journal of Public Health* 85, no. 4 (1995): 580.

many women who died during or after childbirth had endured close to twenty pregnancies.⁴ This led her to establish a family planning clinic. There she conducted pioneering research on diaphragms and spermicidal jellies as potential low cost contraceptives, providing data for the nationwide movement to overturn statues banning the dissemination of contraceptive information.⁵ Although not as widespread as pellagra, toxoplasmosis can have devastating effects, especially on children born to mothers who became infected while pregnant. The disease is caused by the common parasite *Toxoplasma gondii*, which is carried by household cats. Although the risk of various types of household poisoning will always be present, continual examination and investigation of them allows individuals to take efforts to minimize those risks.

Although the majority of women who attended a college or university in the 1920s went to co-educational institutions, they were often limited to traditional gender role coursework such as home economics, nursing, or teaching. Medical school was beyond the reach of many women for many reasons, and the women who did obtain admission faced many additional challenges and prejudices both in and out of the classroom. For example, Sheriff's fiancé could not accept her career choice and ended their engagement. It is clear that Sheriff's education did not occur in isolation from her social life or societal expectation; undeniably, societal expectations and norms influenced her educational experiences.

4. Ibid, 582.

5. Ibid.

This study focuses on Sheriff's experiences while attending the College of Charleston and MCSC. Chronicling Sheriff's contributions allows South Carolinians to understand her distinctive educational experiences, as well as make connections with the past that would provide relevance and perspective for today's education and public health systems. Although Hill has reported on Sheriff's career in public health,⁶ it appears that there has been no comprehensive examination of her experiences as a college and medical student in the 1920s. Given that knowledge partially depends on lived experience, such an analysis of her experiences will provide insight as to how Sheriff made meaning of her world as a student.

The present historical research study seeks to analyze Sheriff's experiences as a student by telling her individual story and delineating its value to the history of public health and the higher education of women in South Carolina. Her college and medical school experiences as a woman establish her foundation of knowledge that she used to promote public health in South Carolina.

Research Problem

Despite the fact that it is known that women who pursued careers in medicine prior to World War II faced multiple challenges, there have been few detailed reports of their experiences, particularly in the South. According to Anne Firor Scott, women's experiences often are not taken into account by historians, even when women's accounts

6. Ibid.

appear in historical sources.⁷ She avers that this occurs because historians make “two assumptions: that woman’s natural place is in the home, and that ‘history’ takes place on the battlefield or in the Congress, the statehouse, the pulpit, the marketplace, or the laboratory.”⁸ Although Sheriff broke the mold by pursuing an education and career outside the home, her story has remained untold.

In the nineteenth century, most historical studies applied to white men, and even amateur female historians who wrote about women avoided writing of the abuses and traumas that women suffered.⁹ Men who wrote histories celebrated men’s actions, rights, struggles, and thoughts, many of which demanded the economic and legal subordination of women.¹⁰ Not only were women seen as inferior, but domestic life and local events were viewed as superficial and less important.¹¹

7. “Making the Invisible Woman Visible: An Essay Review,” *The Journal of Southern History* 38 (1972): 629.

8. *Ibid.*

9. Bonnie G. Smith, *The Gender of History: Men, Women, and Historical Practice* (Cambridge, Massachusetts: Harvard University Press, 1998), 38-39. A few women did write historical accounts of Anne Boleyn and Katherine Howard, both of whom were executed by King Henry VIII. However, they had the benefit of centuries between themselves and their subjects, rather than writing of the struggles of women in a more recent past (see Smith, 61).

10. *Ibid.*, 153.

11. *Ibid.*, 156.

Finally, in the 1920s, historians began writing scholarly works about women.¹² In the early twentieth century, women – amateur and professional historians – began writing about poor and working women based on statistics and testimony from the women themselves; however, men still did not study women or the poor.¹³ Even toward the end of the twentieth century, writing about the emotional or physical victimization of a woman left an author open to accusations of politicizing or sensationalizing; for example, Louise DeSalvo received criticism for her attention to sexual matters in her 1989 biography of Virginia Woolf.¹⁴ So-called “women’s issues” such as rape and incest remained controversial despite the fact that men were not immune to victimization, and their more socially acceptable traumas, such as those from war, had been written about for years.¹⁵ Clearly histories and examples of women’s experiences are lacking. Sheriff’s story is particularly important as one of the first women to graduate from medical school in SC.

In the elucidation of women’s life stories, educational choices and experiences are especially important. Historical knowledge provides a better understanding of the

12. Anne Firor Scott, “Unfinished Business,” *Journal of Women’s History* 8 (1996): 116.

13. Smith, *Gender of History*, 175.

14. Linda C. Wagner-Martin, “The Issue of Gender: Continuing Problems in Biography,” in *Writing Educational Biography*, ed. Craig Kridel (New York: Garland Publishing, 1998), 98.

15. *Ibid.*

complex interrelationship between school and society, laying a foundation for a better understanding of modern questions.¹⁶ Chronicling Sheriff's experiences allows South Carolinians to make connections with the past that provide relevance and perspective for today's education system.

This study is influenced by historiography and biography. The interpretive study is an effort by the researcher to recount the meaning the subject gave to the reality around her through the systematic identification of facts surrounding historical events. Further, the study is descriptive in that it documents the early life of Sheriff in college and medical school in SC in the 1920s.

Purpose of the Study and Research Questions

The present study is designed to document and illuminate the educational experience of Sheriff. The purpose of the study is to record, explain, and understand how Hilla Sheriff navigated college and medical school at a time when women were frequently pigeonholed into certain fields (e.g., home economics, teaching). Further, the purpose of the study is to explore Sheriff's educational experience, her community, and her motivations. The following four research questions began this study:

1. What motivated Hilla Sheriff to pursue college and medical education in the 1920s?
2. What was Hilla Sheriff's experience in college and medical school?

16. William W. Brickman, *Research in Educational History*, (Norwood, PA: Norwood Editions, 1973), 2.

3. How did individuals such as family members, friends, and faculty impact Hilla Sheriff's educational experience?

4. How did Hilla Sheriff impact other students' college and medical school experiences?

These questions are not listed in a hierarchy of importance but in the order in which the author addresses them. In terms of flow of the study, the questions are coupled, numbers one and two and numbers three and four. These questions provide direction to develop an understanding of how Sheriff navigated college and medical school. The fourth question recognizes Sheriff as an agent capable of initiating change.

Understanding of social change shifts when women are viewed "as agents of historical change."¹⁷ The historical landscape reconfigures as male activities and concerns drop away from the forefront. Women's experiences not only become visible but take center stage as relevant and important to society as a whole.

Rationale for the Study

Journalists have reported on Sheriff's significant contributions to public health in SC. Her contributions to public health included: working to combat diseases such as diphtheria; campaigning for institutes to train midwives; promoting maternal and child health care; and publicizing the problem of child abuse and neglect. With the help of

17. Sharlene Nagy Hesse-Biber, "Feminist Research: Exploring the Interconnections of Epistemology, Methodology, and Method," in *Handbook of Feminist Research: Theory and Practice*, ed. Sharlene Nagy Hesse-Biber (Thousand Oaks, California: SAGE Publications), 7.

early public health officials such as Sheriff, South Carolina's communities became better equipped to serve the well-being and health needs of their citizens, especially women and children. However, this could not have occurred without the college and medical school education that prepared Sheriff to aid in the health education of others. The researcher seeks to explore Sheriff's educational motivators and experiences in an effort to determine how Sheriff navigated her world and influenced her community.

Historical knowledge provides a better understanding of the complex interrelationship between school and society, laying a foundation for a better understanding of modern questions.¹⁸ Chronicling Sheriff's experiences allows South Carolinians to make connections with the past that provide relevance and perspective for today's educational and public health system. Diseases such as diphtheria have largely been eradicated, but to this day, health care providers in SC must continue to fight communicable illnesses and work to protect the health of women and children.

Sheriff was obviously ahead of her time. She aspired to become a doctor since her youth, mending chicken's wings and assigning doctors' rolls to her dolls. However, her parents doubted that she would complete medical school, expecting instead that she would marry. Such societal expectations impacted women's experiences and influenced their choices. This historical research study seeks to analyze Sheriff's experiences as a student by telling her individual story and delineating its value to the history of public health and the higher education of women in SC. Her college and medical school

18. Brickman, *Research in Educational History*, 2.

experiences as a woman established her foundation of knowledge that she used to promote public health in South Carolina.

Methodology

The author engages the lenses of historiography and historical biography. Qualitative methods are an obvious choice for the study since “qualitative research is pragmatic, interpretive, and grounded in the lived experiences of people.”¹⁹ A qualitative approach is appropriate because the present study examines how Sheriff made meaning of her life while she was a college and medical school student in SC in the 1920s. This interpretive study is the researcher’s effort to recount the meaning the subject gave to the reality around her through the systematic identification of facts surrounding historical events. Further, the study is descriptive in that it documents the college and medical school experiences of the subject, Hilla Sheriff. Examination of Sheriff’s school experiences was done through document review, specifically Brickman’s historical method.²⁰ The documents are those archived in the South Caroliniana Library. Many of these primary documents were written while Sheriff was a student and fledgling doctor; they include letters written to her as well as her own letters and diary. Other primary documents include articles in which she was quoted, photographs, and speeches she wrote. According to Brickman, primary sources include records such as photographs,

19. Catherine Marshall and Gretchen B. Rossman, *Designing Qualitative Research* (San Francisco, California: SAGE Publications, 2011), 2.

20. *Research in Educational History*, 91.

diaries, letters, books, and newspapers.²¹ Secondary sources about female physicians prior to World War II are included in the analysis. The researcher criticized the source materials externally and internally, interpreted the documents, and hypothesized the relationship of the data according to Brickman's historical method.²² The result of the qualitative study is a rich description of a portion of an individual's life.²³

Limitations

Gaps in the documentation have to potential to pose a significant limitation. As Kendall wrote, the "paper trail ... is never continuous or complete. The more remote in time the subject is, the more gaps there will be."²⁴ Personal letters make up a large portion of the data set, but it is evident that not all letters were kept. Nonetheless, the gaps in correspondence cause few problems. As Sheriff gained status in the local communities, more reporters interviewed her about her work and education for newspaper and journal articles; Sheriff saved those articles about herself.

In order to safeguard the study, the researcher considered the reliability and validity of the data. Validity, or trustworthiness, cannot be proven; however, the threat of

21. Ibid., 92.

22. Brickman, *Research in Educational History*, 91.

23. Merriam, *Qualitative Research in Practice*, 5.

24. Paul Murray Kendall, "Walking the Boundaries," in *Biography as High Adventure: Life Writers Speak on Their Art*, ed. Stephen B. Oates (Amherst: University of Massachusetts Press, 1986), 41.

researcher bias to validity may be diminished by acknowledging potential biases.²⁵ As the primary instrument for data collection and analysis, the researcher has biases that may impact the study. However, rather than trying to eliminate such biases, they must first be identified and monitored to determine how (if) they may shape the collection and analysis of data.²⁶ The process of making the familiar strange, or reexamining personal and theoretical ideas, forces the researcher to think critically and view everyday experiences as more than simple acts and interpret them as parts of larger cultural and social contexts. Making the familiar strange also allows for the consideration of epistemological and ethical tensions.²⁷ This critical self-reflection of the researcher's own biases and theoretical predispositions makes the researcher's partialities evident.

Dissertation Overview

Chapter One is an introduction to the topic studied. It also offers a rationale for the study and a brief description of the methodology used to complete the study. Chapter Two is a review of literature on women's education and women in the workforce during the Progressive Era. This review focuses on women's experiences in the South. Chapter Three contains a description of the methodology used to complete the study. The research

25. Joseph A. Maxwell, *Qualitative Research Design: An Interpretive Approach* (Thousand Oaks, California: SAGE Publications, 2005), 108.

26. Sharan B. Merriam, *Qualitative Research in Practice: Examples for Discussion and Analysis* (San Francisco, California: Jossey-Bass, 2002), 5.

27. Audrey M. Kleinsasser, "Researchers, Reflexivity, and Good Data: Writing to Unlearn," *Theory into Practice* 39(2000): 158.

questions and a discussion of the researcher's positionality are also included in the chapter. Chapter Four is the presentation of the findings relating to Sheriff's motivation to become a physician as well as her experiences in college and medical school. Chapter Five describes the findings relating to Sheriff's relationships with her family, faculty members, and friends. Findings concerning Sheriff as an agent of change are in the chapter. Chapter Six summarizes my research. The researcher includes final conclusions and suggestions for future research in this final chapter.

Conclusion

Attitudes about women's education and employment are correlated to this study of one woman's educational experiences in the early twentieth century. Despite the fact that it is known that women who pursued a medical career prior to World War II faced multiple challenges, there have been few detailed reports of their experiences, particularly in the South. This study offers these details with emphasis on the subject's relationships with family, friends, and professors while attending college and medical school.

This study focuses on Sheriff's experiences at the College of Charleston and MCSC. Chronicling the contributions of Sheriff allows South Carolinians to understand her distinctive educational experiences, as well as make connections with the past that provide relevance and perspective for today's education and public health system.

The research study seeks to analyze Sheriff's experiences as a student by telling her individual story and delineating its value to the history of public health and the higher education of women in SC. Her college and medical school experiences as a woman

established a foundation of knowledge that she used to promote public health in South Carolina for over forty years.

CHAPTER 2

LITERATURE REVIEW: HISTORICAL CONTEXT

*When I was interning at the Willard Parker, I used to say I was a doctor by day and a lady in the evening, so you better put out the red carpet.*²⁸

Introduction

This study of Hilla Sheriff's educational experiences in the 1920s particularizes attitudes about women's education and employment. Many people did not see value in higher education for women. According to Ann Firor Scott, "For many women, the desire for education beyond that accorded them was a source of discontent. Rarely doubting their own mental capacities, they complained bitterly about the absence of educational opportunities."²⁹ This lack of interest in providing education for women combined with the belief that women should not pursue a profession outside the home resulted in few women pursuing an education in medicine.

Sources of Evidence

The researcher collected both primary and secondary sources for this study. Primary sources include articles, correspondence, college notes, daily calendars, and a

28. Kathleen Whitten, "The More I Did, the More I Saw the Need," *The State Magazine*, February 1986, 8.

29. Ann Firor Scott, *The Southern Lady: From Pedestal to Politics, 1830-1930* (Chicago: University of Chicago Press, 1970), 73.

diary. These documents are archived in the South Caroliniana Library at the University of South Carolina in Columbia. The Medical University of South Carolina University Archives does not hold any writings by Sheriff. Although it does possess an audio recording of Sheriff giving a speech, Sheriff's notes for it are present in the South Caroliniana Library.

The Sheriff Collection contains ten linear feet of documents, including over one hundred file folders. Fifteen of the folders contain letters written by or to Sheriff while she was a student; approximately two and a half boxes are filled with correspondence from throughout her life. Nearly thirty folders contain topical files about subjects that interested Sheriff: including American Women's Hospitals, The Asklepiads, child abuse, the Children's Hospital of the District of Columbia, the College of Charleston, communicable diseases such as diphtheria, Harvard, the Medical University of South Carolina, midwives, pediatrics, public health, sex and marriage, the SC State Board of Health, the Spartanburg County Department of Health, the Willard Parker Contagious Disease Hospital, as well as biographical data such as award and certificates. One box contains notes and papers from college and medical school. One file contains notes and sources for Sheriff's speech "Women in Medicine," as well as the speech itself. Six folders contain magazine and newspaper clippings written about Sheriff. The remainder of the collection consists of daily calendars, records of professional conferences and meetings, and photographs. Thus, the researcher has access into the life of the individual through Sheriff's own words and those who knew her, particularly her fiancé who ended their relationship, and her husband.

Secondary sources include large volumes to frame the time period and establish historical context. C. Vann Woodward's *Origins of the New South, 1877-1913* provided a larger overview, while texts such as *South Carolina: A History* by Walter Edgar and *South Carolina: A Short History* by David Wallace provided a closer look at the state.³⁰ For an overview of education in the South in the early twentieth century, *Southern Progressivism: The Reconciliation of Progress and Tradition* by Dewey W. Grantham served as a valuable source.³¹ Scott's *The Southern Lady: From Pedestal to Politics, 1830-1930* provided insight about Southern women in that time period.³²

Purpose of the Review

A review of literature provides a basis of what has and has not been studied. Additionally, relevant literature focuses a research study as well as informs research design.³³ Furthermore, the literature provides historical context. This review of literature

30. Woodward, *Origins of the New South, 1877-1913*. (Baton Rouge: Louisiana State University Press, 1951); Edgar, *South Carolina: A History*, (Columbia, S.C.: University of South Carolina Press, 1998); Wallace, *South Carolina, a Short History, 1520-1948*. (Columbia: University of South Carolina Press, 1961).

31. Dewey W. Grantham, *Southern Progressivism: The Reconciliation of Progress and Tradition* (Knoxville, University of Tennessee Press, 1983).

32. Ann Firor Scott, *The Southern Lady: From Pedestal to Politics, 1830-1930* (Chicago: University of Chicago Press, 1970).

33. Corinne Glesne, *Becoming Qualitative Researchers: An Introduction* (Boston: Pearson Education, 2006), 32.

is organized into four themes: education in the South, women in the workforce, women in medical school, and women physicians.

Education in the South

According to the twentieth century Southern scholar Dewey W. Grantham, educational gains in SC were modest in the first decade of the twentieth century due to powerful textile interests and warnings from opponents in other states.³⁴ Nonetheless, Grantham reports improvements in the following decade. Richard I. Manning, elected governor in 1914, expanded state services, including “increased appropriations for education, and passage of a compulsory school attendance law, [and] child labor legislation.”³⁵ His successor, Robert Cooper, continued to expand support for education.³⁶

Nonetheless, Grantham is aware of the imperfect gains made in higher education. He clarifies that although gains were made in higher education, women received little benefit because they were discriminated against by the state universities; consequently, women were often limited to the teacher training and domestic science programs at normal schools and women’s colleges.³⁷

34. *Southern Progressivism: The Reconciliation of Progress and Tradition* (Knoxville, University of Tennessee Press, 1983), 255. By 1914 a quarter of South Carolina’s White population lived in textile mill towns (Ibid., 55, 60).

35. Ibid., 61.

36. Ibid.

37. Ibid., 269.

Grantham describes how colleges reflected the service ideal of the progressive era, despite how many of them limited opportunities for women and minorities:

Thus the new universities busied themselves in establishing a variety of public services in such fields as teacher training, agricultural and domestic science programs, public health work, creation of libraries, and the founding of state historical societies and journals. The service ideal among college students in the South was encouraged by the Young Men's Christian Association and the Young Women's Christian Association. The campus chapters of the YMCA in particular expressed the developing service rationale and the mood of progressivism. The Y's in the South also worked to popularize the idea of higher education.³⁸

Although Grantham notes that women were often discriminated against at colleges and denied admission to professional schools, he seems to miss the irony of schools' creation of public service programs while failing to fully serve the female population. Other organizations, such as the Y, instead aided students by providing housing in addition to promoting progressivism and higher education.

Women at Work

As with their education, women faced limitations in their employment as they began entering the workforce in greater numbers. According to Grantham, "Although their vocational opportunities were still severely limited in the early 1900s, an increasing number of Southern women were moving into new or revitalized professions."³⁹ Some of

38. Ibid, 270.

39. Ibid., 206.

these women would be “drawn into various reform endeavors – ranging from narrow professional objectives to broader regulatory and ameliorative movements – as a result of their vocational roles in primary and secondary education, home economics, social work, and journalism.”⁴⁰ Grantham seems to miss the nuance that while women’s access to higher education was limited, they found employment in educating youth. Grantham does at least disclose that, “while revolting against the traditional constraints that fixed woman’s place in southern life, they were careful to preserve the image of the southern lady and to reassure their male counterparts that they were not out to undermine the fundamental verities of southern civilization (indeed, they frequently implied that they were the ultimate conservators of that unique civilization).”⁴¹ Thus, women still primarily worked in the so-called the “woman’s sphere.”

However, external pressures would eventually force Southerners to transition away from their long-held beliefs and expectations of women. Grantham explains how global problems eventually made Southerners more aware of their own, local issues: “The [first world] war’s demands on the home front threw a revealing light on many of the social evils and inadequacies of the South. It brought more social workers – especially women – into southern communities, contributed to the professionalization of social workers in the section, and made them more acceptable to other southerners.”⁴² Their efforts would be far-reaching. According to Grantham, during the Progressive Era

40. Ibid., 207.

41. Ibid.

42. Ibid., 393.

as “politicians, newspaper editors, educators, and members of emerging professions cast themselves in the role of reformers, launching scores of campaigns for public education, railroad regulation, more efficient agricultural methods, a more adequate welfare system,”⁴³ women advocated for their own causes. Women no longer had to present their reform efforts as unique ways of preserving southern civilization.

Shira Birnbaum points to Progressive Era reforms and social expectations in her analysis of the college education of women in Florida after the Civil War. This study is particularly relevant to the examination of Sheriff’s experiences because it focuses on women’s higher education in the South. According to Birnbaum, “attention to gender was a central feature of Progressive Era reforms in the US, particularly educational reforms.”⁴⁴ These reforms were a part of the transformations of social and work life in the late nineteenth century.⁴⁵ For example, after the US Civil War, many Southern women, including those from formerly wealthy families, entered the workplace, finding employment as teachers, bookkeepers, cashiers, clerks, and typists.⁴⁶

Despite many women entering the workforce, many of the social expectations of women remained the same. Birnbaum admits, “the ideological pedestal on which women

43. Ibid., xv.

44. “Making Southern Belles in Progressive Era Florida: Gender in the Formal and Hidden Curriculum of the Florida Female College,” *Frontiers: A Journal of Women Studies* 16 (1996): 219.

45. Ibid.

46. Ibid., 223.

were placed was located firmly in the well-appointed parlors and kitchens of the white Southern home.”⁴⁷ These findings are very similar to Grantham’s; however, Birnbaum has taken economic status into account. Although she found that women from all backgrounds were entering the workforce after the Civil War, when she uses the phrase “well-appointed parlors,” she implies that only wealthy women were expected to remain in the home.

Southern historian Anne Firor Scott paints a slightly more optimistic picture. She explains, “Not only had the number of respectable occupations multiplied [after the Civil War], but the idea that any women who could find a male relative to support her should do so was losing its force, as was the notion that for a woman independence was only acceptable when it was a grim necessity. The opportunity for earning money and attaining independence had as much to do with shaping the lifestyle of the ‘new woman’ as the necessity for it.”⁴⁸ Scott thus grants women ownership of their decision to enter the workforce. She reports that SC had a relatively high percentage of females aged ten and over who were gainfully employed according to the 1890 Census at 16 percent compared to 5 percent in Texas and 18 percent in Massachusetts.⁴⁹ She also notes the number of professional women included a handful of doctors and lawyers, but the majority were teachers.⁵⁰

47. Ibid., 223-224.

48. Scott, *Southern Lady*, 133.

49. Ibid., 124.

50. Ibid.

Scott also credits women for being politically active and making their voices heard. According to Scott, “In 1921 southern women, along with women from over the nation, brought pressure upon the Congress to pass the Sheppard-Towner Act for maternal and infant health. Nineteen of 26 southern senators voted for the bill. In the House, 91 of the 279 votes in support of the bill came from the South and only 9 of the 39 votes against it. This law, which pioneered federal-state cooperation in welfare, was the first concrete national achievement of newly enfranchised women.”⁵¹ Thus Scott continues to demonstrate how women enacted change in the early twentieth century.

As women became increasingly educated and had greater opportunities for employment, the previous belief that a woman must have a male provider further diminished. According to Scott, “Attitudes toward courtship and marriage began to reflect the changes in the status of women. Education and widening opportunities for work had diminished the desperate need to find a husband. A woman could wait for a man who suited her or she could choose not to marry at all, as many of the first generation of college graduates did. The relationship between men and women was subtly affected by the possibility that a woman could earn her own living.”⁵² Although some men wanted to hold to traditional roles, Scott claims, “Not all men were frightened of the new woman. The editor of the *Raleigh News and Observer* and the Chief Justice of the North Carolina Supreme Court were far from being alone when they warmly and actively supported every measure which would widen opportunities for women. Some

51. Ibid., 189.

52. Ibid., 214.

husbands took pride in the achievement of their wives and urged their daughters on to similar independence.”⁵³ Hence, Scott takes a more optimistic view of women’s slowly increasing educational and employment opportunities.

Women in Medical School

By the latter half of the nineteenth century, some women had managed to join the professional ranks of being medical doctors. The first woman to earn a medical degree in the US was Elizabeth Blackwell, and therefore she is recognized as the first woman doctor in the nation.⁵⁴ If the same standard had been applied to Blackwell’s male counterparts, their numbers would have been sharply reduced, as nearly 70 percent of male physicians in the 1840s did not have a medical degree.⁵⁵ According to feminist psychologist Mary Roth Walsh, most men instead obtained “their education through an apprenticeship and possibly a brief stay in one of the proprietary colleges or commercial diploma mills.”⁵⁶ The American College of Medicine in Philadelphia offered degrees via mail, and nineteenth century licensing laws rarely required a medical graduate be examined by any sort of regulatory board.⁵⁷ Thus, Walsh makes a strong point that many of Blackwell’s male colleagues did not have the same qualifications she had acquired.

53. Ibid., 219.

54. Mary Roth Walsh, “The Rediscovery of the Need for a Feminist Medical Education,” *Harvard Educational Review* 49 (1979): 448.

55. Ibid.

56. Ibid.

57. Ibid.

Walsh insists that the system of apprenticeships and diploma mills available to men did not offer women access to the medical profession.⁵⁸ Since physicians at the time were all men, women would have had to be apprenticed to them; however, “in the unlikely event that a male practitioner might be willing to make such an offer, the female apprentice would then court scandal by working alone with a man.”⁵⁹ Women did not receive the same benefits as men from mail order diplomas either; yet the public wanted more substantial certification of women.⁶⁰ Therefore, concluded Walsh, women tended to welcome the nineteenth century licensing laws, which allowed them to prove their competence.⁶¹ Although this is a reasonable conclusion, professionalization of the medical field still left women with many challenges to face, including the entrance to and graduation from medical schools. Walsh describes how the faculty at Geneva Medical College in upstate New York allowed the students to make the decision about Blackwell’s application, requiring a unanimous vote to accept her.⁶² This decision demonstrates how flippant the faculty were about Blackwell’s application.

Blackwell is perhaps the most well-known early female medical school graduate. She began studying “medicine with an old practitioner” in Kentucky after her father

58. Ibid.

59. Ibid.

60. Ibid., 449.

61. Ibid.

62. Ibid.

died.⁶³ Later, she moved to Charleston, SC, and continued to study medicine under Samuel H. Dickson.⁶⁴ According to feminist and obstetrician Kate Campbell Mead, although Dickson assured Blackwell that no medical school in the country would accept her, she applied to twelve medical colleges, none of which had previously admitted a woman.⁶⁵ Mead referred to Blackwell's brother account that for her graduation, "all the ladies of Geneva turned out *en masse* to see a lady receive a medical diploma."⁶⁶ Although she had already broken many social norms simply by attending medical school as a woman, Blackwell "refused to march with [the male graduates] lest it should not seem lady-like."⁶⁷ Even though Blackwell broke boundaries by attending medical school, she demonstrated concern for decorum on issues that did not impact her learning.

Stephen C. Tom, who has studied medical school experiences, provides a slightly different perspective and explains that the male students at Geneva Medical College

63. Kate Campbell Mead, "Medical Women of America: A Short History of the Pioneer Medical Women of America," *Medical Review of Reviews* 39, no. 3 (1933): 110.

64. *Ibid.* Dickson might be considered a somewhat forward thinker for his time; he discussed the idea of established a medical school in Charleston in 1821 then delivered public lectures with James Ramsey in 1823 a year before the medical college opened in South Carolina. ("The Medical College of the State of South Carolina," Catalog 1925-1926, Box 10.)

65. *Ibid.*, 110-111.

66. *Ibid.*, 111.

67. *Ibid.*

chose to accept Blackwell under the assumption that her application was a practical joke.⁶⁸ They did not expect Blackwell to actually attend the college. As a result, when she arrived at the Medical College, she was ostracized by students and faculty as well as townspeople. Additionally, during training experiences, many physicians refused to diagnose patients or suggest patient treatment options in her presence.⁶⁹ This prevented Blackwell from receiving the full educational benefits of attending medical school. Nevertheless, Blackwell graduated from Geneva Medical College at the top of her class in 1849.⁷⁰ Overall, Tom demonstrates a more pessimistic view of Blackwell's experience than does Mead, lingering more on the challenges rather than Blackwell's perseverance.

Walsh, on the other hand, details the harsher treatment Blackwell's sister Emily received. Walsh notes that although Geneva Medical College had honored Blackwell's admission and allowed her to graduate, it refused admission to Emily.⁷¹ Then, although she was admitted to Rush Medical College in Chicago, and she attended for a year, Emily was not allowed to return for a second year after the State Medical Society censured the

68. Stephen C. Tom, "Opening the Doors to Medical Education: From the Victorian Era to the Present," *Initiative* 58 (1997): 24.

69. *Ibid.*

70. *Ibid.*, 23.

71. Walsh, "Feminist Medical Education," 449.

school for admitting women.⁷² Medical schools that were forward-thinking enough to admit women acquiesced to pressure from state boards.

Walsh also details Harriet Hunt's challenging experience to become a doctor. Although many women were unable to assume apprenticeships, Hunt successfully undertook an apprenticeship in 1834 with Richard Mott in Boston.⁷³ Mott practiced with the assistance of his wife, who served as a chaperone during Hunt's apprenticeship; this was important at the time since working alone with a man may have caused a scandal, and the presence of Mott's wife helped protect Hunt's reputation.⁷⁴ Walsh clearly grasps the additional burden women faced due to social norms and mores.

As a result, Hunt had been practicing medicine for twelve years when she first applied to Harvard Medical School in 1847.⁷⁵ Although she had been refused admission in 1847, she reapplied in 1850, and at first the administration appeared more receptive of her application.⁷⁶ However, when she began attending, male medical students asserted that no delicate woman would be willing to attend medical lectures with men and started a protest, demonstrating their unwillingness to associate with a woman who had

72. Ibid. Emily Blackwell ultimately graduated from Cleveland Medical College in 1854.

73. Ibid., 448-449.

74. Ibid.

75. Ibid., 465.

76. Ibid., 449.

“unsexed” herself, sacrificing her modesty to attend medical lectures with men.⁷⁷ It is clear their concern was for themselves, not for Hunt’s modesty. The men simply did not want to go to medical school with a woman. Not permitted to continue at Harvard, Hunt ultimately received an honorary degree from Woman’s Medical College in 1853.⁷⁸

Walsh also attempts to describe the creation of women’s medical colleges in the latter half of the nineteenth century to meet women’s demands for an education in medicine.⁷⁹ She explains that by the 1890s, seventeen women’s medical colleges had been founded, and, in 1892, 63 percent of women attending medical school were at all-female institutions.⁸⁰ Walsh notes, however, many women desired to attend the more established male medical colleges.⁸¹ She reports that 40 percent of medical schools in the country had a female enrollment of at least 10 percent, and at a few schools women accounted for approximately half of the graduating classes.⁸² Her reporting is deceptive and makes it appear that more women were attending co-educational medical school than there actually were. Forty percent of medical schools accepting women may seem like a large portion, but women comprising 10 percent of the student population appears to be

77. Ibid., 465.

78. Ibid. When Hunt was permitted to buy lecture tickets at Harvard Medical School in 1850, she was warned not to expect a degree. (Tom, “Opening the Doors,” 24.)

79. Ibid., 449.

80. Ibid., 450, 451.

81. Ibid., 450.

82. Ibid.

little more than tokenism. Further, Walsh also acknowledges that coeducational medical schools established female quotas at the beginning of the twentieth century.⁸³ If women only comprised approximately 10 percent of a school's medical student population before the turn of the century, quotas would have reduced women's already limited opportunities to attend coeducational institutions to nominal levels.

Tom provides a more realistic background. According to Tom, the same year the Blackwell sisters founded their women's medical college, the University of California's medical department opened its doors to women.⁸⁴ The following year Syracuse opened to women, and in 1871 the University of Michigan opened its medical school to women.⁸⁵ By 1880, fourteen schools accepted women; however, Tom notes that those schools were primarily located in the mid-west or west.⁸⁶ This left women in the South or Northeast desiring a medical education with the options of either attending a women's medical college closer to home or travelling a greater distance to a co-educational medical college that would accept them. Tom admits that by the turn of the twentieth century most medical schools accepted women, although even then schools such as Columbia, the

83. Ibid.

84. Tom, "Opening the Doors," 25. The Blackwell sisters founded the New York Infirmary for Women and Children in 1869. (Walsh, "Feminist Medical Education," 449-450.)

85. Ibid.

86. Ibid.

University of Pennsylvania, and Yale prohibited women.⁸⁷ Consequently, women still could not obtain a medical education from some of the nation's oldest and most respected medical institutions.

Unfortunately, the gains made in the late nineteenth century were not sustained. For example, even at the University of Michigan, where women had represented a quarter of the medical school enrollees in 1890, women's enrollment dropped into the single digits in the early twentieth century; in 1910, women composed only 3 percent of the student body at the University of Michigan's medical school.⁸⁸ Tom presents a more accurate image of female enrollment at medical schools.

Historian Charlotte Borst posits that formerly all-male medical schools initially admitted one or two women a year so that there would be women physicians available to treat women.⁸⁹ Borst implicates Abraham Flexner's *Medical Education in the United States and Canada* in women's decreasing medical school attendance. In his 1910 report, Flexner argued that medicine was connected to modern science, which required learning through laboratory experimentation and treating patients. According to Borst, as a result of medical education's move toward a scientific model, college attendance became a

87. Ibid., 27.

88. Ibid.

89. "Choosing the Student Body: Masculinity, Culture, and the Crisis of Medical School Admissions, 1920-1950," *History of Education Quarterly* 42 (2002): 187.

prerequisite for admission due to the need for a grounding in the basic sciences.⁹⁰ This created an additional barrier for women wanting to attend medical school.

Furthermore, many of the elite schools, such as the University of Michigan, established even more rigorous standards for admissions, such as foreign language requirements; the conclusion was that the heightened admission standards allowed medical school deans to limit the admission of undesirable students' to medical school.⁹¹ Borst concludes that because women's enrollment decreased substantially after the *Report* was published in 1910, the *Report* must have been the cause.⁹² Although Flexner had a profound impact on medical education, Borst's conclusion with regard to women's attendance is ill-founded. However, Borst conflates correlation with causation, ignoring other facts.

Walsh shows that although Flexner's *Report* was an effort to reform and standardize medical education, it was not the primary cause of the closure of women's medical colleges.⁹³ Indeed, the rate of consolidation of medical schools was just as fast before the *Report* as after, including the absorption of the Blackwell sisters' New York Infirmary Medical College by Cornell University Medical School in 1899.⁹⁴ Walsh reports that Flexner himself had noted that the number of female medical students had

90. Borst, "Choosing the Student Body," 188.

91. *Ibid.*, 190-191.

92. *Ibid.*, 191.

93. Walsh, "Feminist Medical Education," 451.

94. *Ibid.*, 450-451.

declined 19 percent in the six years before his *Report*.⁹⁵ Thus, Walsh provides greater context for a more complete and accurate picture of what was happening with regard to women's enrollment in medical school in the early twentieth century.

Women Physicians

Unfortunately, the decline in the number of female medical colleges and the small number of female-controlled hospitals left women with little leverage in the medical field.⁹⁶ Additionally, when women's medical colleges closed or merged, women physicians lost their opportunities for faculty teaching positions.⁹⁷ As a result, women medical students at co-educational institutions did not ever see women physicians practicing. They did not get to look to women physicians as role models, as an example of what women can do.

Although approximately half of medical school graduates went on to complete additional hospital training by 1904, post-doctoral training could only be obtained at male owned-and-operated facilities.⁹⁸ By 1913 approximately three quarters of graduates completed hospital training, and Walsh reports of claims in the 1920s that a hospital internship was necessary for an individual to practice medicine successfully.⁹⁹ However,

95. *Ibid.*, 451.

96. *Ibid.*, 452.

97. *Ibid.*

98. *Ibid.*

99. *Ibid.* Internships and residency are now required for all physicians before they may practice medicine independently.

unfortunately, few hospitals were willing to provide women with that internship experience; as a result, in 1925, half of all women interns in the United States were training at only nine hospitals, most of which were run by women.¹⁰⁰ Walsh points to this difficulty in accessing internships as a reason for not admitting women to traditionally male medical schools in the first place: Why educate women to be doctors if they could not continue their training at the postgraduate level?¹⁰¹

In the early twentieth century, many women doctors continued to work in the so-called “women’s sphere” of medicine, caring for women and children.¹⁰² According to Ellen More, the women who founded the Medical Women’s National Association (MWNA) in 1915 worked to reconcile this culture by assimilating women into the prestigious ranks of male doctors.¹⁰³ While the MWNA advocated for women’s inclusion in the Army Medical Reserve Corps, from which women were previously excluded, it also claimed responsibility for civilian war victims – mostly women and children.¹⁰⁴ Despite attempting to expand women’s roles in the medical field, the MWNA kept female physicians closely linked to their traditional place in medicine, that is, in the women’s sphere caring for women and children.

100. Ibid.

101. Ibid.

102. “‘A Certain Restless Ambition’: Women Physicians and World War I,” *American Quarterly* 41 (1989): 637.

103. Ibid.

104. Ibid., 637-638.

More's analysis coincides with Scott's conclusion. Scott deduced that some "impatiently called for an end to pedestals, but even they found it effective to operate within the ladylike tradition. The other side of the coin was that women were accused of not being proper southern ladies by those who objected to the substantive goals for which they were working."¹⁰⁵ Nonetheless, by 1930 Southern culture did tolerate more diversity in female roles than had antebellum culture, and a woman's self-image was likely to contain independence and self-confidence.¹⁰⁶ This, Scott "suggests that with notable exceptions, man's image of women changed more slowly than women's views of themselves, a gap which could be a source of tension in family life."¹⁰⁷ Her argument is convincing.

Medicine in South Carolina

There was no legal control over who could practice medicine in SC until licensing boards were established in 1817; furthermore, even penalties for non-observance of licensing requirements were removed in 1838.¹⁰⁸ Although the State did not regulate who could or could not practice medicine within its borders, societal norms dictated that only men could be doctors.

105. Scott, *Southern Lady*, 210.

106. *Ibid.*, 229.

107. *Ibid.*

108. Kenneth M. Lynch, *Medical Schooling in South Carolina, 1823-1969* (Columbia, S. C.: Bryan, 1970), 9.

The SC State Legislature passed an Act on December 24, 1823, to establish a medical school in the state.¹⁰⁹ Under the control of the Medical Society of South Carolina, the Medical College of South Carolina (MCSC) opened on November 8, 1824, becoming the first medical school in the country south of Baltimore.¹¹⁰ South Carolinians would no longer have to travel at least three states north to attend medical school, and other Southerners had the option to attend a school closer to home.

MCSC coursework was very much the same year after year and was similar to other medical schools in the nation until the beginning of the Civil War when the College closed as students enlisted in the Confederate Army.¹¹¹ After the conclusion of the Civil War, the College resumed regular courses on November 1, 1865.¹¹² In the next few decades, faculty would expand the curriculum. In order to ensure ample clinical material for teaching, the College made an agreement in 1879 with the Charleston City council to provide professional services to City Hospital for free.¹¹³ Practice treating patients was essential to students' medical school education, and this agreement safeguarded that part of their education. The four-year curriculum began in SC at the end of the nineteenth

109. *Ibid.*, 18.

110. *Ibid.*, 26-27.

111. Joseph I. Waring and Kenneth M. Lynch, "The Story of the Medical University," *Auctus* 2, no. 1 (1975): 22.

112. *Ibid.*, 23.

113. *Ibid.*, 24.

century, and the school finally discontinued the apprenticeship program that required students to work with private preceptors between terms.¹¹⁴

Lynch notes that according to the Flexner's *Report*, none of the thirty-four teaching staff at the Medical College were full-time, and the dissecting room was in poor condition.¹¹⁵ Flexner's *Report* exposed many schools for lacking the proper facilities, leading the Council on Medical Education (CME) of the American Medical Association (AMA) and the AAMC to conduct a survey of schools.¹¹⁶

The College, like many others, was not in a good financial position. According to Lynch,

When the offer of the Medical College of the State of South Carolina to join the University of South Carolina was declined in 1911, the school was blocked from that route to state sponsorship. It was left in the unacceptable position of having no means of support of permanently dependable nature, being dependent upon student fees, and was relegated to 'C' class in the ratings of medical schools in the United States in the first survey ever made for accreditation. Moreover, it suffered exclusion from the elite company of those which could be called 'university medical schools,' meaning medical schools connected with universities.¹¹⁷

114. Lynch, *Medical Schooling in South Carolina*, 69.

115. *Ibid.*

116. *Ibid.*, 58.

117. *Ibid.*, 74.

Unfortunately, in such a financial state, the Medical College could not be fully accredited.¹¹⁸ Lynch explains, “survival depended upon securing . . . adequate, regular and dependable financial support that would provide the required improvements.”¹¹⁹ Lynch’s concerns are valid. The financial support would have to come from the state.

Two years later, on February 19, 1913, SC took responsibility for the Medical College, immediately raising the College’s rating to a “B.”¹²⁰ At the time, admission requirements loosely conformed to the specifications for approval by the CME of the AMA.¹²¹ Although the College maintained some level of admission standards, there seems to have been no rigorous standard for promotion. Records show that in the first full year under state control, multiple students advanced to higher level classes without having passed previous courses, most of which consisted of didactic lectures.¹²² Hence, once admitted, students seem to have been guaranteed advancement. Subsequent increased requirements for admission and promotion resulted in decreased enrollment, according to Lynch.¹²³ This is not surprising given the drop in enrollment associated with expanded curriculum in previous years. Nonetheless, three years later, the Medical College achieved “full acceptability,” and Roper Hospital replaced City Hospital as the

118. *Ibid.*, 58.

119. *Ibid.*

120. *Ibid.*, 58-59.

121. *Ibid.*, 76.

122. *Ibid.*

123. *Ibid.*

sole associated clinical teaching hospital.¹²⁴ Although it took several years after the Medical College received the “C” rating, the College was finally financially sound and following the CME’s academic requirements.

According to journalist Roy Ellis, the South Carolina College for Women opened in Columbia around 1890, offering a “Preliminary Medical Course for Women,” which was designed to prepare students to attend women’s medical colleges.¹²⁵ Two students enrolled in the pre-medical course in 1890, one of whom, Sarah Allan, would become SC’s first academically trained female doctor.¹²⁶ After completing the pre-medical course, she studied under Elizabeth Blackwell at the Woman’s Medical College of New York and received her medical degree in 1894, a full year before MCSC began admitting women.¹²⁷ Allan then went to Johns Hopkins University to complete an internship before returning to SC to be an assistant to a male doctor in Columbia.¹²⁸

124. Waring and Lynch, “Story of the Medical University,” 25.

125. “South Carolina’s First Woman Doctor,” *Columbia State*, March 9, 1957.

126. Ibid.

127. Ibid. Rosa Hirshmann Gantt was the first woman to graduate from MCSC, receiving her degree in 1901. (“Women Physicians Graduated from the Medical College of the State of South Carolina,” “Writings,” box 6, Sheriff Papers.)

128. Ibid.

MCSC did not have its first women graduates until 1901.¹²⁹ Thus, it is unsurprising that according to the 1900 US Census, only seventeen women in SC were employed as physicians.¹³⁰ Mary Sutton Macy, a neurologist in New York, examined what women faced in the medical field in the first two decades of the twentieth century:

One of the prominent South Carolina women writes me: ‘I believe that the universal women’s movement has had a great deal to do with the increase in clientele of our medical women, for I find that women are more and more employing the services of medical women in this state that [*sic*] formerly; however I should say broadly that South Carolina offers few inducements for medical women, as we have few general hospitals, few cities, and but one [medical] college.’ For about ten years this one medical college was co-educational, but in the course of that time probably not more than twelve women were members of either the medical or the pharmacy classes, and so the women were again barred from admission.¹³¹

Macy’s conclusion that low female enrollment led the medical college to refuse women admission is nonsensical. If a medical college was dissatisfied with low numbers of women enrolling, it would make more sense for them to find a way to increase those

129. “Women Physicians Graduated from the Medical College of the State of South Carolina,” “Writings,” box 6, Sheriff Papers.

130. Mary Sutton Macy, “The Field for Women of Today in Medicine: College, Hospital, Laboratory, and Practice,” *The Woman’s Medical Journal* (1916): 94.

131. *Ibid.*, 95.

numbers, not prevent women from enrolling at all. Barring women from admission is, rather, a clear indicator that the college did not want even a small number of women to attend.

Key Concepts

The present study involves two major concepts. Definitions of these concepts are outlined here to promote mutual understanding of the study.

The first concept is that of a doctor or physician. For the purposes of this study, the term doctor or physician will be used to refer to a medical doctor. Two of the types of doctors are interns and residents. Residents are doctors who are receiving additional training at a hospital under the supervision of more experienced doctors. Interns are first-year residents.

More's concept of medicine's "separate sphere" is particularly relevant to this study. This idea is based on Scott's concept of the "woman's sphere." According to Scott, children were raised within the "woman's sphere," and kindness and virtue were paramount.¹³² Women then brought these values into the public realm, and those values were institutionalized in women's organizations.¹³³ Unsurprisingly, this occurred when women entered the medical field. More refers to medicine's "separate sphere," as "the cultural matrix for Victorian professional women."¹³⁴ This includes single sex medical schools, hospitals, and medical societies for women. According to More, the women's

132. Scott, "Invisibility," 16 (see chap. 1, n. 24).

133. Ibid.

134. More, "Women Physicians and World War I," 636.

sphere was “the altruistic, heroic model of nineteenth century professionalism,” but it was on the decline by the 1910s.¹³⁵ Although the subject attended medical school shortly after this time, it is expected that the institutionalized paradigm still had an impact on her experience.

Conclusion

After the US Civil War, many women began entering the workforce, but many of the antebellum social expectations of women remained the same. Birnbaum points to Progressive Era reforms and social expectations in her analysis of the college education of women in Florida after the Civil War. Later, Southern progressives were aware of the need for social services and worked to provide education as well as health services to people in need. However, medicine’s “separate sphere” resulted in single sex medical schools, hospitals, and medical societies for women. Furthermore, their patient population was often limited to women and children. Although this altruistic “separate sphere” was on the decline by the early decades of the twentieth century,¹³⁶ women continued to face challenges in their pursuit of a medical education.

By the latter half of the nineteenth century, some women had managed to join the ranks of medical doctor. Early women physicians such as Elizabeth Blackwell and Harriet Hunt faced opposition by male classmates; Blackwell’s classmates ostracized her, and Hunt’s classmates refused to attend class with her. Although increasing numbers of

135. Ibid.

136. More, “Women Physicians and World War I,” 636.

women attended medical school as the nineteenth century progressed, the gains were not sustained, and female enrollment dropped in the early decades of the twentieth century.

Although the South experienced a wave of social reforms, there had been few improvements in education, particularly for women. The lack of interest in providing education for women combined with the belief that women should not pursue a profession outside the home resulted in few women pursuing a medical education. It was into this complicated social climate that Sheriff was born in 1903, in Pickens County, SC, just two years after the first woman graduated from MCSC. She lived in a small community near Easley before her family moved to Orangeburg, SC. Sheriff spent most of her childhood in Orangeburg, which had no women doctors at the time. Upon entering a co-educational medical school, Sheriff had no female faculty members available to mentor her and few female classmates. When she graduated, many hospitals were unwilling to accept a woman as an intern for additional training.

Like many female physicians, Sheriff completed an internship at a women's hospital. After completing two residencies for further training, she returned to SC, joining Rosa Gantt's practice in Spartanburg. Sheriff dedicated her life to improving the health of the State's citizens, first by practicing pediatrics, then by entering the field of public health. She took on leadership roles, becoming Medical Director of the local American Women's Hospital and becoming Chief Health Officer for Spartanburg County two years later. These roles empowered Sheriff to combat endemic diseases among the poor as well as set SC on the course for a healthier future.

CHAPTER 3

METHODOLOGY: INTO THE ARCHIVES

You learn your letter-writer's quirks and foibles from what he or she wrote and said; you date and interpret the documents by internal and external clues. To do these things, you go back and forth between clear and obscure, dated and undated pieces, acquiring information by which to pull yourself forward until gaps are filled and contradictions become intelligible.¹³⁷

Introduction

History is not dominated by a single methodology or defined by a specific set of theoretical assumptions.¹³⁸ Rather, historians have borrowed from fields such as anthropology, literary criticism, and philosophy to guide methodological development.¹³⁹ A historical lens shapes this study. Further, biographical research provides a way to describe behavior and to illuminate the ways in which education and educational policy

137. Barzun and Graff, *The Modern Researcher*, 115.

138. Louis O. Mink, "Philosophy and Theory of History," in *International Handbook of Historical Studies: Contemporary Research and Theory*, ed. Georg G. Iggers and Harold T. Parker. (Westport, CT: Greenwood Press, 1979), 18.

139. Smith, *Gender of History*, 10 (see chap. 1, n. 3).

play a role in peoples' lives.¹⁴⁰ Hence, the researcher uses a historical lens to peer into Sheriff's life.

Conceptual Underpinnings

Several conceptual underpinnings were researched and reviewed for their application to the present study. These underpinnings include biography and the women's sphere.

There are various types of biographies, and many biographies contain elements of these multiple biographical approaches.¹⁴¹ This study exhibits elements of both critical and pure biography. According to Oates, in critical or intellectual biography, the researcher analyzes the subject, "offering judgments about significance and consequences."¹⁴² The research for the present study aims to provide such judgments after studying Sheriff. However, in critical biography, the "focus is on the author, not the subject."¹⁴³ The present study differs from critical biography in this way, as this work focuses primarily on the subject, Sheriff, and those who influenced her. The purpose of this study is to illuminate the experiences of one woman, and the resulting work will also

140. *Writing Educational Biography: Explorations in Qualitative Research* (New York: Garland Publishing, Inc., 1998).

141. Stephen B. Oates, "Prologue," in *Biography as High Adventure: Life-Writers Speak on Their Art*, ed. Stephen B. Oates (Amherst: University of Massachusetts Press, 1986), ix.

142. *Ibid.*, x.

143. *Ibid.*

be like a pure or literary biography, which “must radiate a sense of intimacy and familiarity” with the subject.¹⁴⁴ Although literary biography usually does not contain critical commentary,¹⁴⁵ the author produces the present document by combining aspects of critical biography with literary biography.

How women viewed themselves was influenced by society. According to Anne Firor Scott, most women, regardless of class or ethnic group, “had been socialized to believe in the concept of the ‘woman’s sphere’ – that place where piety and compassion ruled and where moral upbringing of the young took place. As women formed associations, they moved those values into the public realm and tried to institutionalize them.”¹⁴⁶ This occurred when women entered the medical field. More refers to the women’s sphere, or medicine’s “separate sphere,” as “the cultural matrix for Victorian professional women.”¹⁴⁷ This includes single sex medical schools, hospitals, and medical societies for women. According to More, the women’s sphere was “the altruistic, heroic model of nineteenth century professionalism,” but it was on the decline by World War

144. Stephen B. Oates, “Biography as High Adventure,” in *Biography as High Adventure*, ed. Stephen B. Oates (Amherst, Massachusetts: University of Massachusetts Press, 1986), 129.

145. Oates, “Prologue,” x-xi.

146. Anne Firor Scott, “On Seeing and Not Seeing: A Case of Historical Invisibility,” *The Journal of American History* 71 (1984):16.

147. “Women Physicians and World War I,” 636.

I.¹⁴⁸ Nonetheless, the concept retains its relevance through Sheriff's training and early career.

Statement of the Problem

The purpose of the present study is to record, explain, and understand how Hilla Sheriff navigated college and medical school at a time when women were frequently pigeonholed into limited careers such as home economics or teaching. Further, the purpose of the study is to explore Sheriff's educational experience, her community, and her motivations. The following four research questions guide this study:

1. What motivated Hilla Sheriff to pursue college and medical education in the 1920s?
2. What was Hilla Sheriff's experience in college and medical school?
3. How did individuals such as family members, friends, and faculty impact Hilla Sheriff's educational experience?
4. How did Hilla Sheriff impact other students' college and medical school experiences?

These questions are not listed in a hierarchy of importance but in the order in which the researcher addresses them. In terms of flow of the study, the questions are coupled: numbers one and two, then numbers three and four. These questions provide direction to develop an understanding of how Sheriff navigated college and medical school. The fourth question recognizes Sheriff as an agent capable of initiating change.

148. Ibid.

Research Designs and Methods

The purpose of this section is to describe the design of the present study as well as the forms of inquiry and analysis used in the study. The section consists of four parts: an overview of the design of the study; the sources of evidence; the treatment, processing, and analysis of the evidence; and a summary of the study procedure.

Overview of the Design of the Study

This interpretive study is the researcher's effort to recount the meaning the subject gave to the reality around her through the systematic identification of facts surrounding historical events. Further, the present study is descriptive in that it documents the academic life of the subject, Hilla Sheriff.

The researcher used document reviews to examine Sheriff's life during her years in college and medical school. The documents are archived in the South Caroliniana Library. These primary documents were written while Sheriff was enrolled in school and in the years after. Many are letters, and others are the result of interviews Sheriff gave. The researcher accumulated, analyzed, and coded the data, which was then classified into theoretical categories. The careful analysis of myriad data allows the researcher to draw her own conclusions.

The researcher used Brickman's historical method to examine Sheriff's school experiences.¹⁴⁹ This method includes: the selection of a research problem; the accumulation, classification, and criticism of sources; the determination of facts; the

149. Brickman, *Research in Educational History*.

interpretation of facts; and the synthesis and presentation of findings.¹⁵⁰ First, the researcher defined the research problem.

Second, the researcher classified and criticized the sources. The Sheriff Collection includes primary sources such as letters written by and to Sheriff; her diary; and articles she saved. The study also includes secondary sources germane to women and education in the early twentieth century. Furthermore, the researcher criticized the sources externally and internally. External criticism established the genuineness of the documents; it also distinguished original publications from later printings, revisions, and interpretations.¹⁵¹ Internal criticism involved the analysis of a document's meaning in addition to the assessment of mistakes of fact, errors in judgment, and motivational distortion.¹⁵² These criticisms aid in the next step.

The third step of historical research is the determination of facts.¹⁵³ The researcher viewed similar observations as independent facts. Upon comparison, if the major details were in agreement, the researcher considered the fact credible. The fourth step is the interpretation of those facts.¹⁵⁴ The researcher evaluated the data to answer the

150. Ibid., 91.

151. Ibid., 93. E. g., Sheriff told some of the same anecdotes to multiple journalists.

152. Ibid., 94.

153. Ibid., 91.

154. Ibid.

research questions. However, facts alone “do not constitute an historical narrative.”¹⁵⁵

The researcher must determine the interconnections among the data, finding the facts’ significance to each other and to the historical context.¹⁵⁶

Sampling and Samples

The researcher collected data from primary and secondary sources. Brickman identifies records such as photographs, diaries, and letters as primary sources.¹⁵⁷

Regarding secondary sources, Barzun and Graff explain “the investigator’s original fund of knowledge must embrace even more than a well-populated chronology; it must include an understanding of how people in other eras lived and behaved, what they believed, and how they managed their institutions.”¹⁵⁸ However, not all secondary sources are equally valuable. Brickman declares, “The value of a secondary source is directly proportional to the extent to which it has made use of primary sources. Thus, a secondary source may incorporate accurate quotations from a primary source and, to that extent, it assumes primary characteristics.”¹⁵⁹ Hence, some secondary sources may be much more instructive than others. Patricia Evridge Hill’s works, “Dr. Hilla Sheriff Caught between Science and the State at the South Carolina Midwife Training Institutes” and “Go Tell It on the Mountain: Sheriff and Public Health in the South Carolina Piedmont, 1929 to

155. *Ibid.*, 161.

156. *Ibid.*

157. *Research in Educational History*, 92.

158. *The Modern Researcher*, 5th ed. (Boston: Houghton Mifflin Co., 1992), 119.

159. *Research in Educational History*, 93.

1940,” were particularly valuable secondary sources, lending additional insight into Sheriff’s career. Kenneth Lynch’s book, *Medical Schooling in South Carolina, 1823-1969*, and co-authored article with Joseph Waring, “The Story of the Medical University,” provided details about MUSC itself.¹⁶⁰

Treatment, Processing, and Analysis of the Evidence

The researcher conducted two stages of document review. First, a general reading of secondary sources provided contextual framework for the study, revealing the early history of MUSC and information about women working in SC at the turn of the century. This stage gave the researcher a chronology and a list of significant events pertaining to the history of MUSC. In addition to examining secondary documents that provided local history, the researcher read a general history of SC and medical education in the US to deepen the contextual framework within a broader historical perspective.

At the second stage of document review, the researcher studied and analyzed archival sources using Brickman’s historical method.¹⁶¹ After locating and classifying documents in the Sheriff Collection, the researcher examined the sources externally and internally.¹⁶² External criticism established the genuineness of the documents; it also distinguished original publications from later printings, revisions, and interpretations.¹⁶³

160. See bibliography for a full list of sources.

161. *Research in Educational History*, 91.

162. *Ibid.*, 93.

163. *Ibid.*, 93. E. g., Sheriff told some of the same anecdotes to multiple journalists.

Internal criticism involved analysis of a document's meaning in addition to assessment of mistakes of fact, errors in judgment, and motivational distortion.¹⁶⁴ The researcher determined the credibility of statements as the third step of the historical method.¹⁶⁵ The researcher viewed similar observations as independent facts. Upon comparison, if the major details were in agreement, the researcher considered the fact credible.

The fourth step of the historical method constitutes interpretation of the facts.¹⁶⁶ Bogdan and Biklen specify that "analysis involves working with the data, organizing them, coding them, synthesizing them, and searching for patterns."¹⁶⁷ Accordingly, after collecting the data, the researcher organized it according to themes derived from the research questions. This helped make sense of a large amount of data and aided in information retrieval.

Reliability and Validity

In order to safeguard the study, the researcher will consider the reliability and validity of the data. Reliability addresses how well a study can be replicated or justified under the parameters set forth. Validity, or trustworthiness, cannot be proven. Furthermore, researcher bias can threaten the validity of a study. The researcher attempts

164. Ibid., 94.

165. Ibid., 95.

166. Ibid., 91.

167. *Qualitative Research for Education: An Introduction to Theories and Methods* (Boston: Pearson Education, 2007), 159.

to diminish this threat by acknowledging potential biases.¹⁶⁸ Rich data, identifying and analyzing discrepant data, and triangulation will provide validity as well.¹⁶⁹ Triangulation refers to the incorporation of multiple types of data sources.¹⁷⁰ Additionally, using the steps of the historical method (e.g., criticism of sources, determination of fact)¹⁷¹ lends validity to statements made. Sources of data for this study will include many types of documents, including correspondence of numerous individuals, college notes, daily calendars, and a diary. Hence, the various sources of information will enable the researcher to triangulate data.

Problems with Qualitative Research

As the primary instrument for data collection and analysis, the researcher has preconceptions and prejudices that may impact the study. However, rather than trying to eliminate these biases, they must be identified and monitored to determine how they may shape the collection and analysis of data.¹⁷² The process of making the familiar strange, or reexamining personal and theoretical ideas, allows for the consideration

168. Joseph A. Maxwell, *Qualitative Research Design: An Interpretive Approach* (Thousand Oaks, California: SAGE Publications, 2005), 108.

169. *Ibid.*, 110-112.

170. Glesne, *Becoming Qualitative Researchers*, 47.

171. Brickman, *Research in Educational History*, 91.

172. Merriam, *Qualitative Research in Practice*, 5.

epistemological and ethical tensions.¹⁷³ Reflexivity involves critical reflection of how personal and theoretical ideas may influence that data or generate particular interpretations.¹⁷⁴ The goal of reflectivity is to help provide validity for the research. Alan Peshkin advocates for an “enhanced awareness that should result from a formal, systematic monitoring for self.”¹⁷⁵ This awareness allows the researcher to manage subjectivity and preclude it from becoming a burden during the course of the study.¹⁷⁶

Researcher Position Statement

According to Glesne, positionality is a researcher’s ideological and social placement in relation to the research project and participants.¹⁷⁷ Although the researcher has little control over positions such as educational level, approaching research with curiosity and open-mindedness likely will result in a different positionality than a closed-minded approach.¹⁷⁸ Like the research subject, I am a college-educated white woman. However, I have had the benefit of the suffragist movement and many other societal

173. Audrey M. Kleinsasser, “Researchers, Reflexivity, and Good Data: Writing to Unlearn,” *Theory into Practice* 39(2000): 158.

174. Glesne, *Becoming Qualitative Researchers*, 151.

175. Alan Peshkin, “In Search of Subjectivity. One’s Own,” *Educational Researcher* 17 (1988): 20.

176. Ibid.

177. *Becoming Qualitative Researchers*, 157.

178. Ibid.

changes, which have made my decision to attend college and my experience at college very different than that of Sheriff's.

Organization of Study

This study is organized in six chapters. The first three chapters are introductory to the study topic and methodology. The fourth chapter describes the findings of the research related to Sheriff's motivation to become a physician as well as her experiences in college and medical school. The fifth chapter is concerned with the findings of the research related to Sheriff's personal relationships and her influence on others. The final chapter contains the research conclusions and suggestions for additional studies.

Conclusion

The purpose of the present study is to record, explain, and understand how Hilla Sheriff navigated college and medical school at a time when women frequently were pigeonholed into limited fields (e.g., home economics, teaching). Further, the purpose of the study is to explore Sheriff's educational experience, her community, and her motivations. The researcher's goal is to provide a well-documented account of Sheriff's life in college and during medical school. It is long overdue that this pioneering woman's experiences are told.

CHAPTER 4

MOTIVATION AND EDUCATIONAL EXPERIENCES

Introduction

Although historian Patricia Hill has reported on Hilla Sheriff's career in public health, it appears that there has been no comprehensive examination of her experiences as a college and medical student in the 1920s. Given that knowledge depends on lived experience, such an analysis of her experiences will provide insight as to how Sheriff made meaning of her world as a student. This chapter specifically examines what motivated Sheriff to pursue the education required in order to follow her dream of becoming a doctor and also what those educational experiences were. Thus, the first two research questions (below) are answered with descriptive detail.

1. What motivated Hilla Sheriff to pursue college and medical education in the 1920s?
2. What was Hilla Sheriff's experience in college and medical school?

The gaps in the paper trail that documents Sheriff's life are wide, but it is clear from the existent paper that from any analytical perspective, her accomplishments are amazing.

The woman followed her childhood dream of serving those in need and through the practice of medicine she contributed to improving the quality of others' lives. From 1920 to 1922 Sheriff attended the College of Charleston and then from 1922 to 1926 attended MCSC.

Internal Motivation

Sheriff had aspired to be a doctor since her youth. She would later state during an interview, “I can’t remember when I didn’t want to be a doctor.”¹⁷⁹ Reflecting on her childhood, she told journalist Marshall Plyler, “When I was a little girl in Orangeburg playing with paper dolls, I always named one the doctor because that was what I wanted to be when I grew up. My first ‘patients’ were the chickens in our back yard. I had great compassion for the little biddies who hurt themselves, and I loved to mend their broken wings.”¹⁸⁰ Nonetheless many children play at being a doctor without pursuing it as a career. What set Sheriff apart was her passion for curing and caring for others. Her goal was truly to rehabilitate injured chickens, not merely play at treating imaginary illnesses.

Service to Others

As she grew older, Sheriff continued to aspire to become a doctor. By the time she completed high school, Sheriff had decided that her life would be one of service to others. She believed in Tolstoy’s words: “The vocation of every man and woman is to serve other people.”¹⁸¹ She demonstrated this sense of duty in several ways even before she began medical school. Her friend George “Wattie” Connors wrote to her, “It gives me

179. Whitten, “The More I Did,” 8.

180. Hilla Sheriff as told to Marshall Plyler, “Young Lady, You had Better Look It Up!” *Update: The Magazine of South Carolina Department of Health and Environmental Control*, 1974, 3.

181. “Orangeburg Girl Becomes Doctor: Miss Hilla Sheriff Believed to be First Woman Physician from Here,” circa 1926, box 6, Sheriff Papers.

a perfect thrill of delight to know that you can teach a young girls' S[unday] S[chool] class, make a discussion at Epworth League [a camp], etc., and that you enjoy that philanthropic work at the mill.”¹⁸² Worthy efforts in their own right, these endeavors merely foreshadowed what Sheriff would later accomplish as an adult.

Service to God

Unfortunately, Sheriff missed several months of high school one year due to illness.¹⁸³ She recorded the experience in a journal years later:

A sudden change came over me one morning. I woke up and my room seemed unusually light. A heavy burden had been lifted from my mind. God was so near me, and he seemed to say, “You shall be made well if you give your service trying to make others well. Take up medicine for there are many whom you can help.” Before that I had felt that I should never be able to do and go like other people. I was so happy that God was going to make me well once more, and give me the strength and opportunity of serving some of my fellow-men.¹⁸⁴

Undoubtedly, Sheriff’s faith played a significant role in her unwavering decision to become a doctor. She viewed her vocation through the contextual lens of a Southern Methodist tradition that emphasized service to humanity and God.¹⁸⁵ Sheriff believed not

182. Connors to Sheriff, 17 July 1922, file 4, box 1, Sheriff Papers.

183. Ray Allen Byrd to Sheriff, 9 October 1918, file 1, box 1, Sheriff Papers. It seems that the Spanish flu actually closed Sheriff’s school for some time as well.

184. Hilla Sheriff journal, 21 July – 12 August 1923, box 5, Sheriff Papers.

185. Hill, “Dr. Hilla Sheriff,” 81.

only that she should serve God but also that He would assist her. In her journal she continued, “Now I have finished my first year of Medical College. I shall admit that some of the things I had done have not been easy – I could never have done them without my Father’s aid.”¹⁸⁶ Hence Sheriff’s faith helped her get through challenging times, motivating her to persevere when medical school was difficult.

Sheriff’s aspirations were noticed by her friends. Connors noted her “vigour, energy, and ambitions and an *unwavering desire* for a B. S. or B. A. Degree.”¹⁸⁷ It thus appears that when Sheriff did desire something, she pursued it passionately and wholeheartedly, giving it all of her energy. Connors recognized that Sheriff would not “be daunted by any obstacles.”¹⁸⁸ Rather than letting challenges overwhelm her, Sheriff faced them head on.

Further Education

Sheriff wrote in a paper for one of her undergraduate classes, “I was not satisfied with the narrow education obtained in high school. Therefore I wanted to come to college to enlarge and broaden my education,”¹⁸⁹ suggesting that she wanted to pursue education for the sake of learning. She continued, “without an education one will miss a lot of good

186. Hilla Sheriff journal, 21 July – 12 August 1923, box 5, Sheriff Papers.

187. Connors to Sheriff, 14 June 1922, folder 3, box 1, Sheriff Papers. Emphasis in original.

188. Connors to Sheriff, 13 December 1922, folder 8, box 1, Sheriff Papers.

189. Hilla Sheriff, “Why I Have Come to College” c. 1920, box 5, Sheriff Papers.

that would have come in life with an education,”¹⁹⁰ indicating that she felt that education would improve her overall life experience.

In addition to a better life experience, Sheriff recognized that college attendance was necessary for her to become a doctor: “Another reason for my coming to college was that it was necessary to do so in order to prepare myself for the practice of medicine, which I hope to do someday. In that progression one needs not only to have a knowledge of drugs and diseases, but he needs to have his mind broadened along other lines so as to be able to deal satisfactorily with different types of humanity with which he comes in contact.”¹⁹¹ She knew that as a doctor, she would need knowledge not only of diseases and their treatments, but also of her patients as people.

Sheriff was eager to expand on the education and experiences she had had growing up in rural Orangeburg. She was very much aware that in the medical field she would interact with a wide range of people and seemed to look forward to the opportunity to help diverse groups. Her college studies were not limited to the sciences that would directly prepare her for medical school; they also included subjects such as English and history, presumably broadening her knowledge of the human condition, better enabling her to connect with her future patients.

Concluding her essay, Sheriff wrote, “For these three reasons then, first a desire to broaden my education, second, a sense of duty to my Creator and to my country, and

190. Ibid.

191. Ibid.

third, the necessity of learning my profession, I came to college.”¹⁹² Once again, her faith in God continued to play a role, as she saw it as her duty to both Him and her country to attend college to develop her mind. Although she had a personal desire to broaden her education, she felt a sense of responsibility not only toward her future profession and patients, but also to her country and faith.

Although her education was broad in college, eventually Sheriff would specialize in the medical field. By the time she began medical school, Sheriff had decided she wanted to practice pediatrics.¹⁹³ Although this did not affect the medical courses she took – all students took the same courses and completed the same requirements – the decision to specialize led Sheriff to complete additional training in pediatrics via supervised internships before practicing medicine as an independent physician.

Despite her early aspirations, Sheriff still had personal struggles. During her first year of medical school, she likely suffered from undiagnosed depression. However, it is impossible to know what she was feeling, especially without more of her own words. Nonetheless, letters from a friend provided a hint of what Sheriff revealed. Early in the academic year Connors wrote that he hoped Sheriff’s “blue spell is over.”¹⁹⁴ Then, a mere two days later, he wrote again: “it made me very sorry to learn that you were so blue

192. Ibid.

193. Connors to Sheriff, 29 June 1922, file 3, box 1, Sheriff Papers.

194. Connors to Sheriff, 27 September 1922, file 6, box 1, Sheriff Papers.

Sunday.”¹⁹⁵ Obviously, Sheriff endured difficult times, but she ultimately remained motivated enough to pursue her goals of becoming a doctor.

Completing medical school was not Sheriff’s only hurdle. During her internship in Philadelphia, she doubted that she wanted to be a pediatrician; however, she felt that it was time she was “sure of something” and was reluctant to seriously consider other options.¹⁹⁶ Nonetheless, the next month, she thought that instead she might be a gynecologist and perform operations.¹⁹⁷ In spite of these doubts, Sheriff became a practicing pediatrician in SC before focusing her career on public health. A motivated child and then young woman, Sheriff preserved through personal struggles, including illness, to obtain her education.

Educational Experience

Sheriff graduated from her high school in Orangeburg, SC, in 1920 before moving away from her family to attend college. In the early twentieth century, an undergraduate degree was not required for matriculation at medical colleges. Sheriff would take advantage of this and complete only two years of college before entering medical school.

College of Charleston

Sheriff began college at the age of seventeen, matriculating at the College of Charleston in September, 1920.¹⁹⁸ The College had only recently begun admitting women

195. Connors to Sheriff, 29 September 1922, file 6, box 1, Sheriff Papers.

196. Sheriff to Henry Zerbst, 21 March 1927, file 21, box 1, Sheriff Papers.

197. Sheriff to Zerbst, 16 April 1927, file 22, box 1, Sheriff Papers.

198. Sheriff as told to Plyler, “Young Lady,” 3.

during World War I, and it had yet to graduate any female students. However, the school was making an effort to increase enrollment, and the fall of 1920 was the first time total enrollment was above one-hundred students. Of the 138 total students at the College of Charleston, forty-three were women. One of those women was Sheriff.

Miles from home, Sheriff lived at the YWCA during her years at college.¹⁹⁹ As a young student, she did things that one might expect of a young woman, including attending church and going on double dates set up by her roommate, Nell Saunders.²⁰⁰ Sheriff enrolled in the pre-medical program.²⁰¹ The courses were comparable to what one might expect a premedical student to take in the twenty-first century. In her first year of college, Sheriff took biology, chemistry, English, French, and history.²⁰² In many ways these courses were similar to present-day college courses, as shown by the many notes she recorded, papers she wrote, and exams she took. For example, in her first semester of English, Sheriff wrote – and re-wrote – a paper arguing in favor of the college honor system.²⁰³ Clearly Sheriff put significant effort into her education.

Sheriff's chemistry laboratory experiments bore a resemblance to current teaching laboratories. They included the determination of a melting point, a fractional distillation,

199. Connors to Sheriff, 29 March 1922, file 3, box 1, Sheriff Papers.

200. Connors to Saunders, 29 March 1922, file 3, box 1, Sheriff Papers.

201. Whitten, "The More I Did," 8.

202. Susan N. Fishburne to Sheriff, 24 September 1921, file 2, box 1, Sheriff Papers.

203. Writings, Notes, c. 1918-1920, box 5, Sheriff Papers.

and the preparation of several hydrocarbons.²⁰⁴ Much like present-day students' laboratory notes, Sheriff's included an explanation of errors: "Tho [*sic*] the thermometer was read as carefully as possible, an error may have been made in the reading."²⁰⁵ Sheriff's fractional distillation, now often completed as an upper-level, inorganic laboratory experiment rather than introductory laboratory technique, involved the separation of ethanol from water. Sheriff's description of the alcohol included a "disagreeable taste and burns with a blue flame,"²⁰⁶ indicating that she had tasted the liquid, a laboratory practice that is now prohibited.

Sheriff was very successful in her science courses and learned many of the same concepts and skills as modern-day science students. During her first semester of biology, Sheriff used a microscope, learned about cell reproduction, and dissected a frog; in her second semester, Sheriff studied increasingly complex animals, drawing and writing extensively in her notebook about each.²⁰⁷ In the spring of 1922, she was recognized in the local newspaper as being distinguished in biology.²⁰⁸ This would be her last semester

204. Writings, Notes, 1921, Science, box 5, Sheriff Papers.

205. Writings, Notes, October 17, 1921, box 5, Sheriff Papers.

206. Writings, Notes, October 25, 1921, box 5, Sheriff Papers.

207. Department of Biology Course II, Writings, Notes, 1921, Biology, box 5, Sheriff Papers.

208. Connors to Sheriff, 16 June 1922, file 3, box 1, Sheriff Papers.

of undergraduate education; she transferred to MCSC without receiving an undergraduate degree. At the time, students did not have to complete college to attend medical school.²⁰⁹

Medical College

Two years after enrolling at the College of Charleston, Sheriff “transferred to the Medical College only a couple blocks away.”²¹⁰ She was in familiar territory. At the time, “the medical college consisted of one large building, on Barre Street.”²¹¹ Although the building was relatively new – MCSC had only been in it eight years – it was merely a larger version of the original Queen Street building; thus, it “exhibited no evidence of forethought that went beyond the conditions of the 19th century.”²¹² Even so, Sheriff did not have any complaints about the facilities, and MCSC proudly published the attributes of its sole structure.

The 1925-1926 MCSC Catalog touted the proximity of its single building with Roper Hospital, the teaching hospital, “making possible a close correlation of the laboratory and clinical branches, which promotes the efficiency of the work in all departments.”²¹³ Consequently, the location was convenient. The building housed separate laboratories for anatomy, bacteriology, pathology, clinical pathology, chemistry,

209. Incidentally, although Sheriff did not receive a bachelor degree, the College of Charleston did have its first woman graduate that spring.

210. Sheriff as told to Plyler, “Young Lady,” 3.

211. Ibid.

212. Lynch, *Medical Schooling in South Carolina*, 77.

213. Medical College Catalog, 29, box 10, Sheriff Papers.

pharmacology, and physiology.²¹⁴ The medical library, consisting of approximately 5,800 volumes, was on the first floor of the same building.²¹⁵ Thus, although the design of the building was outdated, it seems to have had the necessary space for teaching and learning to occur.

First Year

In her first year at MCSC, Sheriff took courses in anatomy, chemistry, and histology.²¹⁶ She studied rigorously, late into the evening, and she remained busy throughout the school year.²¹⁷ In addition to regular coursework and labs, she took the time to hear physicians from other hospitals speak, including a surgeon from the well-known Mayo Clinic.²¹⁸ Clearly Sheriff was a diligent student, dedicated to the study of medicine. Nonetheless, she still found time to write letters to friends and to socialize with other medical students. Sheriff went to matinees at the Victory Theatre, enjoyed nearby Folly Beach, and entertained dates in the Hickmans' parlor.²¹⁹ Although she had found time to enjoy herself during medical school, as an intern at the Hospital of the Woman's

214. *Ibid.*, 30-31, box 10, Sheriff Papers.

215. *Ibid.*, 29, box 10, Sheriff Papers.

216. Sheriff as told to Plyler, "Young Lady," 4.

217. Connors to Sheriff, 25 October 1922, file 7, box 1; Connors to Sheriff, 5 November 1922, file 8, box 1, Sheriff Papers.

218. Connors to Sheriff, 10 November 1922, file 8, box 1, Sheriff Papers.

219. Sheriff to Zerbst, 14 October 1926, file 19, box 1, Sheriff Papers; and Zerbst to Sheriff, 27 May 1927, file 22, box 1, Sheriff Papers.

Medical College of Pennsylvania, Sheriff found “the idea of medical students having time to do fancy work, painting, etc. for a bazarr [*sic*]”²²⁰ strange. Perhaps she viewed such feminine crafts as less worthy of a future physician’s time, particularly when compared with social activities. Of course, school was the first priority in her life.

Chemistry

Sheriff generally did well in chemistry, and even the quizzes did not bother her.²²¹ She had taken chemistry at the College of Charleston, and that seemed to have prepared her for chemistry in medical school.²²² Nonetheless, she did have one ill-fated accident when carbolic acid burned her hand in the laboratory.²²³ Although the chemistry laboratory purportedly had hoods with “gas, water, air pressure, and suction,”²²⁴ there was no indication that students had any personal protective equipment to protect their hands from this type of injury.

220. Sheriff to Zerbst, 6 December 1926, file 20, box 1, Sheriff Papers.

221. Connors to Sheriff, 28 April 1923, file 11, box 1, Sheriff Papers.

222. Susan N. Fishburne to Sheriff, 24 September 1921, file 2, box 1.

223. Connors to Sheriff, 26 November 1922, file 8, box 1, Sheriff Papers.

224. Medical College Catalog, 30-31, box 10, Sheriff Papers. Given that students did not have gloves in the anatomy laboratory, the author believes it is unlikely students had gloves in the chemistry laboratory. The lack of protection for students would be prohibited today.

Anatomy

Sheriff faced an entirely different set of challenges in anatomy. At least she was not shocked when she was assigned a cadaver, as she had visited the class before.²²⁵ The problem was that her male cadaver had a long beard. Years later she described her embarrassing laboratory experience in detail:

He'd probably been floating in the vat for months. Shaving him was terrifying – all the hairs just flopped about. Within minutes the sophomores crowded around to see the show. By the time I was halfway finished one cheek, my clumsy attempts had the spectators howling. . . . Fortunately I had an ally, Smiley (Dr. Alfred) Burnside of Columbia who was a resident. In those days residents were little kings and lost no time letting us know they were the high and mighty. After allowing the sophomores to howl a while, Smiley came to my aid with a pair of scissors and cut the beard short.²²⁶

The incident is a prime example of how Sheriff's reality as a medical student was different from that of her peers simply because she was a woman. Her male classmates would have been proficient at shaving facial hair, but as a woman, Sheriff was inexperienced. Her lack of know-how, through no fault of her own, made her not only different but also a target for her classmates' jeers. The fact that a medical resident came to her aid suggests one of two things. One possibility is that the resident was genuinely kind and had compassion for Sheriff. Conversely, he may have felt that she was helpless

225. Sheriff as told to Plyler, "Young Lady," 3.

226. *Ibid.*, 3-4.

and would not be able to do the job herself. Sheriff's tone in her recollection of the incident suggests that she believed Burnside helped her out of kindness.

Despite some harsh treatment from her male peers, Sheriff believed that a coeducational program offered more advantages than a woman's medical college, and she preferred to graduate from co-educational MCSC rather than a single-sex institution.²²⁷ This was in line with many women's goals in the early twentieth century.²²⁸ The inconsiderate treatment from her peers was not uncommon for female medical students at the time, particularly in the South. Furthermore, Sheriff knew that she was not alone in suffering embarrassment from male medical students.

Connors described to her what a male medical student from the University of Georgia medical school had told him, "He said that there was only one co-ed med student in his classes at Augusta and that the poor girl suffered untold misery and embarrassment on account of the thoughtlessness of the men students who persisted in being obnoxious in order to drive her out of the med school. She is still sticking, however, and is leading her classes by conscientious endeavor."²²⁹ This woman was placed on an ideological pedestal, expected to be above the behavior of the men in her classes.

Although she was in the minority as a woman, unlike the woman in Augusta, Sheriff at least had the benefit of having two other female classmates. In fact, one of

227. Sheriff to Zerst, 28 November 1926, file 20, box 1, Sheriff Papers.

228. According to Walsh (1979) many women preferred nonsectarian male medical colleges to female medical colleges around the turn of the century.

229. Connors to Sheriff, 15 September 1922, file 6, box 1, Sheriff Papers.

them, Eleanor Townsend, was Sheriff's anatomy laboratory partner. Fortunately, Townsend, who also had training as a nurse, and Sheriff worked well together.²³⁰

Actual dissection of the cadaver did not begin the same day as the shaving incident.²³¹ Sheriff described her cadaver as a white male with sores on its arm.²³² Although the details seem gruesome, a photograph taken in the anatomy laboratory depicted students wearing overcoats or lab aprons but no gloves or face protection.²³³ There was no indication that students were bothered by close contact with the cadavers, nor was there evidence Sheriff was discomfited by this aspect of anatomy. By the beginning of December, the head and face of her cadaver had rotted.²³⁴ Although the anatomy laboratory was supposedly "well ventilated, heated, and lighted,"²³⁵ due to the lack of air conditioning at the time, the cadavers likely decomposed quite rapidly and probably would have released a very unpleasant odor.

230. Connors to Sheriff, 25 October 1922, file 7, box 1, Sheriff Papers.

231. Connors to Sheriff, 3 October 1922, file 7, box 1, Sheriff Papers.

232. Connors to Sheriff, 10 November 1922, file 8, box 1, Sheriff Papers.

233. "Eleanor Townsend and Hilla Sheriff Dissecting Cadaver," 1922, box 7, Sheriff Papers.

234. Connors to Sheriff, December 10, 1922, file 8, box 1, Sheriff Papers.

235. Medical College Catalog, 30, box 10, Sheriff Papers.

The heavy workload continued through the winter holidays.²³⁶ Sheriff had to stand for a chemistry exam just after Christmas.²³⁷ Her coursework was rigorous in the spring as well, with long laboratory hours, although at least Sheriff was able to return home for Easter.²³⁸ Her friend Connors summed up her first year: “You have had a very difficult schedule to contend with, and, moreover, you have had many prejudices to conquer.”²³⁹ Every medical student faced the same challenging schedule. Notwithstanding, Sheriff received unjust treatment because of her gender. Unfortunately, such discriminatory treatment continued in subsequent years.

Second Year

Although the cadaver her first year of medical school did not seem to bother Sheriff, she feared the frogs she dissected in van de Erve’s physiology class in her second year.²⁴⁰ She explained, “Strange to say, the cadavers gave me less fear than the frogs we dissected in his class. I had the horror of one of the cold things jumping on me. A male student and I worked together, and I always managed to avoid going to the front of the room to pick up our frog. Working with the electrical equipment or straightening up the desk, I would nonchalantly say, ‘Bill [Ballard], will you get the frog?’”²⁴¹ Given her

236. Connors to Sheriff, 13 December 1922, file 8, box 1, Sheriff Papers.

237. Connors to Sheriff, 16 April 1923, file 11, box 1, Sheriff Papers.

238. Connors to Sheriff, 8 April 1923, file 11, box 1, Sheriff Papers.

239. Connors to Sheriff, 7 June 1923, file 12, box 1, Sheriff Papers.

240. Sheriff as told to Plyler, “Young Lady,” 4.

241. Ibid.

awkward attempt to shave her cadaver, it is logical that Sheriff would hide her fear of the live frogs in an attempt to avoid another embarrassing situation. Fortunately, most of the time this tactic worked for Sheriff, and her laboratory partner obtained their frog.

Sheriff later reflected that the second year was the hardest of them all, including courses in bacteriology, clinical pathology, pharmacology, and physiology.²⁴² In particular she recalled, “every morning the pathology professor gave us a five-minute quiz and a stomachache from worrying.”²⁴³ This was a stark contrast from her nonchalant attitude toward her chemistry quizzes in her first year. Nonetheless, she passed all of her courses, earning Bs in most of them, with the exception of an A in materia medica and Cs in minor surgery and chemical pathology.²⁴⁴

Pharmacology

Sheriff’s status as a woman differentiated her experience in pharmacology from that of her male colleagues, albeit in an unexpected way: the ability to sneak out of class.

Sheriff recalled:

In pharmacology Dr. Grange Simmons, a very elderly man, tried to teach us how to write prescriptions. Unfortunately we had his class just before lunch when everybody began feeling hungry. As he lectured, he walked up and down the

242. Ibid.

243. Ibid.

244. Report of the work of Miss Hilla Sheriff for the SOPHOMORE Year Session 1923-24, 10 June 1924, file 13, box 1, Sheriff Papers. Materia medica is now known as pharmacology.

stage in the middle of the room. The moment he turned his back to half of the class, some of the boys slipped out. When he turned the other way, much of the opposite side vanished, but I wore a skirt and knew he would notice my absence. I had to stay through the whole thing.²⁴⁵

As just one of many, a male student could slip out of class without being noticed. In contrast, as one of only three women, Sheriff's absence would have been more conspicuous, particularly given the stark difference in attire between men and women in the 1920s.²⁴⁶

Patient examinations

Patient examinations that started near the end of Sheriff's second year presented additional challenges to her as a woman. Medical students worked under practicing physicians in both the outpatient clinic and hospital settings.²⁴⁷ One day a young surgeon assigned Sheriff and fellow medical student Bill Ballard to a syphilitic man with an open lesion.²⁴⁸ The following day Ballard was absent, so Sheriff was expected to make rounds and examine patients alone.²⁴⁹ Neither MCSC nor Roper Hospital provided personnel so Sheriff would not have to make rounds by herself. She remained in the man's doorway to

245. Sheriff as told to Plyler, "Young Lady," 4.

246. Even at the hospital and in the laboratory Sheriff and other women still wore long skirts.

247. Sheriff as told to Plyler, "Young Lady," 4-5.

248. *Ibid.*, 5.

249. *Ibid.*

take a patient history but did not enter the room for a physical examination.²⁵⁰ Sheriff was clearly concerned for her own health and safety. The next day the surgeon asked her to give a case report on the syphilitic man and inquired about the physical, so Sheriff had to explain why she had not examined the patient.²⁵¹ Having not completed the assignment, Sheriff feared that she would not pass the course.²⁵² Fortunately, she did pass, and the following year her medical experiences were more pleasant.

Third Year

Future husband Henry Zerbst told Sheriff that “junior year is the easiest and best in school” and “one that you will enjoy, more than any others.”²⁵³ Sheriff’s writings reflect how her days were spent:

The freshmen got their cadavers today. I went in for a few minutes this morning to see them scrub up. The cadavers are usually good looking as a whole. There is only one really objectionable one – and he is too fat. . . . We met Dr. Beech in Pediatrics this afternoon. He kept us until ten minutes after six – but I learned lots of things about babies. I made a physical on a rachaitic [*sic*] and syphilitic baby. Dr. Beech showed us several new cases this afternoon. I like him right well, but he is a great tease. . . . I have several things to study tonight – obstetrics, Lobar

250. Ibid.

251. Ibid.

252. Ibid.

253. Zerbst to Sheriff, 27 August 1924, file 13, box 1, Sheriff Papers; and Zerbst to Sheriff, 18 September 1924, file 14, box 1, Sheriff Papers.

Pneumonia, Typhoid Fever, and some Pediatrics. I am not going to study very late tonight for I'm sleepy. I have until eleven thirty in the morning to study. Tuesday is my easiest day.²⁵⁴

Although she had many things to do, Sheriff felt that she had enough time to accomplish everything, even non-essential tasks such as seeing what new medical students were doing. She did not seem to mind long classes because she was learning. Likewise, the prospect of studying several topics left her unfazed. Toward the end of the school year Zerbst reaffirmed that he felt junior year was the best of the most pleasant of medical school.²⁵⁵ As in previous years Sheriff passed all of her classes, earning at least a C (75).²⁵⁶

Although she did not have formal coursework during the summer, Sheriff's summers also involved medicine. After her junior year she did laboratory work for the clinical offices of doctors Shecut, Brabham, and Moore in her hometown of Orangeburg, SC.²⁵⁷ Her employment in a medical office was significant enough at the time that it made the local newspaper. The work included doing blood counts, conducting urinalysis,

254. Sheriff to Zerbst, 20 October 1924, file 14, box 1, Sheriff Papers.

255. Zerbst to Sheriff, 22 April 1925, file 15, box 1, Sheriff Papers.

256. Report of the work of Hilla Sheriff for the JUNIOR Year Session 1924-25, 8 June 1925, file 16, box 1, Sheriff Papers.

257. "Orangeburg's First Woman Doctor Makes Debut in Medical Circles," *Times and News* (Orangeburg, SC), June 20, 1925.

and making bacteriological and chemical tests.²⁵⁸ Sheriff was starting to put to practical use the skills she had learned in medical school.

Fourth Year

House calls

During her senior year, Sheriff had to make house calls to deliver babies.²⁵⁹ Medical students went to patients' homes in pairs, taking turns actually delivering the baby, that is if the baby had not already been born by the time they arrived.²⁶⁰ It was a real possibility that the baby could be born before the medical students arrived. Sheriff and the other students relied on street cars to get to patients' homes during the day, but the street cars stopped running at midnight.²⁶¹ The medical students had to walk if a call came in the early morning hours.²⁶² Regardless of urgency, they did not have the ability to get to a house call in an expeditious manner. It simply depended upon how far away a particular medical student lived from a patient's home.

Fortunately, Sheriff was able to exercise a bit of discretion when making house calls. Years later Sheriff recalled,

One Saturday night at a home on Porgy's Alley, Rae Welch was in charge of the delivery, and I took care of the baby. . . . After finishing our work, we returned

258. Ibid.

259. Sheriff as told to Plyler, "Young Lady," 5-6.

260. Ibid., 5.

261. Ibid.

262. Ibid.

home, but at 3 a.m. my telephone rang. Thinking the mother was ready to have another baby, the family had run into the street asking a policeman to get the doctor to come back. When I received the call, I asked the officer to telephone Rae [Welch], since he lived much closer to Porgy's Alley. Then I went back to sleep.²⁶³

The situation reveals the logistical difficulties Sheriff and her peers navigated to deliver babies at home. This scenario also indicates the relative living conditions of the medical students compared to that of some of their patients. While medical students lived in residences with telephones, at least some of their patients relied on others to contact medical providers for them.

Sheriff also detailed her classmates' reactions to the incident: "Monday morning when I arrived at school, all the guys started picking at me saying, 'Hey, Hilla, you don't even know when there are two babies!' I replied that Rae [Welch] acted as the obstetrician that night, but they wouldn't listen."²⁶⁴ The encounter demonstrated how the male medical students saw Sheriff as the less capable medical practitioner; they had assumed that she had been the one who had made a mistake, and they even refused to accept her clarification that Welsh had been the one responsible for the delivery. They later learned that in reality, neither she nor Welch had been in error – the mother had had

263. Sheriff as told to Plyler, "Young Lady," 6.

264. Ibid.

afterpains, not twins.²⁶⁵ In her retelling of the incident, Sheriff did not mention any of her peers apologizing for their incorrect assumption.

Thesis

Despite the considerable amount of the time spent delivering babies and studying, Sheriff spent a substantial amount of time doing research and writing. During her fourth year at MCSC, Sheriff took copious notes to complete her senior thesis. Unfortunately, she was not able to select the topic, as the dean of the medical school chose the subject each year.²⁶⁶ Sheriff's thesis, "Treatment of Diebetus [*sic*] Mellitus," was ultimately twenty-six typed pages long.²⁶⁷

Final exams

At the end of her fourth year of medical school, Sheriff took final exams, which were administered in the auditorium.²⁶⁸ None of the students were confident about them since several seniors had failed the previous year.²⁶⁹ Sheriff later recalled, "Our final exams were tougher than all previous quizzes. They tested our endurance instead of knowledge and kept some students working into the night."²⁷⁰ For example, the surgery

265. *Ibid.*, 5.

266. Zerst to Sheriff, 22 April 1924, file 15, box 1, Sheriff Papers.

267. Hilla Sheriff, "Treatment of Diebetus Mellitus" (MD thesis, Medical College of South Carolina, 1926), box 5, Sheriff Papers.

268. Sheriff as told to Plyler, "Young Lady," 6.

269. *Ibid.*

270. *Ibid.*

professor, Robert Cathcart, administered just three questions, but they kept students working an entire day.²⁷¹

Nonetheless, taking the exams was not the worst part for Sheriff, as revealed by her description of the wait for their grades: “Then the real pressure came – waiting for the exams to be graded. We house-partied at the beach for a couple of days and returned on Saturday. Late that afternoon the names of all who passed were to be posted on a bulletin board in the school lobby. We waited outside the library while the faculty decided our fate behind a closed door. To disguise our fears, we joked with each other.”²⁷² This suggests that at least some of the previous ridicule the men had aimed at Sheriff may have been their way of coping with the pressure and stress. Of course, that does not excuse the men’s actions. However, by the end of the four years these classmates had accepted Sheriff as a peer. Sheriff’s classmates also shared their joy with Sheriff once one of the professors posted the list of those who had passed on the board. Sheriff recalled, “They whooped, they hollered, and several danced with me. Our celebration continued for hours.”²⁷³ One classmate, Holmes, even kissed her.²⁷⁴ They were going to graduate.

271. Ibid.

272. Ibid. Students often had house parties at Folly Beach. (Zerbst to Sheriff, 16 January 1928, file 26, box 1, Sheriff Papers.)

273. Ibid.

274. Zerbst to Sheriff, 1 November 1927, file 25, box 1, Sheriff Papers.

CHAPTER 5

PERSONAL RELATIONSHIPS

Introduction

Given that knowledge depends on lived experience, such an analysis of her experiences will provide insight as to how Sheriff made meaning of her world as a student. This chapter specifically examines how others influenced Sheriff's experiences and how Sheriff influenced others. Thus, the last two research questions (below) are answered with descriptive detail.

1. How did individuals such as family members, friends, and faculty impact Hilla Sheriff's educational experience?
2. How did Hilla Sheriff impact other students' college and medical school experiences?

Individual Influences on Sheriff

The vast number of letters Sheriff exchanged with her friends and family members not only provides a unique view into Sheriff's life but demonstrates the importance Sheriff placed on these relationships. Despite her busy school schedule, Sheriff regularly wrote letters to significant people in her life. In return, she received countless missives. The exchange of correspondence shows how several people influenced Sheriff's choices and school experience.

Family

Sheriff's parents and extended family provided her with varying degrees of encouragement throughout her undergraduate career and time in medical school. Upon Sheriff's graduation from high school, Alma Smith, a maternal aunt, wrote, "Hilla, I don't know where you have decided to enter school this fall. But success to you where ever [*sic*] you go."²⁷⁵ Although apparently uninformed since she did not know where Sheriff would be attending college, Smith was interested enough in Sheriff's pursuits to write and wish her well. The gesture indicates Smith held a positive view of Sheriff's decision to attend college.

Most familial influence came from her parents. One summer as a medical student, Sheriff reflected in a journal about telling her parents she had decided to study medicine: "They were very much surprised at such a statement from me, and gave it little thot [*sic*] as they deemed it only a fancy that would pass away the next day."²⁷⁶ Even when they realized that Sheriff truly did want to become a doctor, her parents "said that I should never be physically strong enuf [*sic*] to undertake such a course."²⁷⁷ Sheriff's parents thought that, because of her gender, she was too weak to become a doctor.

Nonetheless, Sheriff's parents ultimately supported her desire for higher education, going as far as financing both college and medical school, despite their

275. Alma Smith to Sheriff, 21 June 1920, file 2, box 1, Sheriff Papers.

276. Hilla Sheriff journal, 21 July – 12 August, 1923, box 5, Sheriff Papers.

277. *Ibid.*

thought that her ambition to become a doctor “was a childish fantasy.”²⁷⁸ Sheriff recalled them saying, “She’ll be married before finishing her first year.”²⁷⁹ This strongly indicated that their doubts about her becoming a doctor were because of her gender. Despite this, Sheriff stated, “they never discouraged me or tried to convince me to become a nurse instead.”²⁸⁰ Although her parents’ support was ambiguous, Sheriff remained close with her family, including returning home to visit them during her first semester of medical school.²⁸¹

The lack of full emotional support from her parents did impact the timing of Sheriff’s education. Her fear that her “parents would change their minds” about financing her education led to her decision to transfer to MCSC after only two years at the College of Charleston.²⁸² By her final year of medical school, tuition was \$150 for the entire year, plus a \$5 student activities fee.²⁸³ Additionally, there was a \$20 fee to rent a “microscope,

278. Sheriff as told to Plyler, “Young Lady,” 3.

279. Ibid.

280. Whitten, “The More I Did,” 8.

281. Connors to Sheriff, 26 November 1922, file 8, box 1, Sheriff Papers.

282. Sheriff as told to Plyler, “Young Lady,” 3.

283. “The Medical College of the State of South Carolina,” Catalog 1925-1926, 27, box 10, Sheriff Papers. These amounts are equivalent to approximately \$2,057 and \$68, respectively, in 2017 dollars.

haemocytometer, and blood pressure instrument,” with the option of purchasing the equipment at the end of the year.²⁸⁴

Today these costs may seem low, even when accounting for inflation, but Sheriff had no income of her own to pay for college or medical school in an era before student loans. Hence, financial support from her parents was integral in Sheriff’s pursuit of higher education. Presumably, they paid not only tuition and fees, but also for her living expenses. Board in Charleston cost approximately \$30 per month.²⁸⁵ Thus, merely living in Charleston for five months out of the year cost as much as medical school tuition!

Although Sheriff’s parents had been skeptical about her ability to complete medical school, they attended her graduation. Sheriff received many congratulations from various family members as well. Era and Andrew Doyle, her sister and brother-in-law, sent her a telegram: “Happy to congratulate you upon receiving degree in medicine.”²⁸⁶ She received another telegram from her sister Ralda the following day.²⁸⁷ She later recalled, “If my family hadn’t attended the [graduation] exercises, I don’t think I would

284. Ibid. This amount is equivalent to approximately \$274 in 2017 dollars. A haemocytometer is a grid used for counting cells under a microscope.

285. “The Medical College of the State of South Carolina,” Catalog 1925-1926, 29, box 10, Sheriff Papers.

286. Andrew and Era Doyle, telegram to Hilla Sheriff, 2 June 1926, file 17, box 1, Sheriff Papers.

287. Ralda Sheriff, telegram to Hilla Sheriff, 3 June 1926, file 17, box 1, Sheriff Papers.

have graduated.”²⁸⁸ Despite knowing they had had doubts, Sheriff relied on her family’s support.

Faculty

At the time, Sheriff attended medical school, all of the faculty members at MCSC were male. Sheriff had no female doctors as role models or mentors during her time in medical school. While some of the male faculty treated her kindly and with respect, others singled her out as a woman.²⁸⁹

W. F. R. Phillips

One professor in particular had a positive influence on Sheriff. Beginning early in her medical school career, Sheriff wrote about her anatomy professor, W. F. R. Phillips.²⁹⁰ In response to what Sheriff had told Connors, her friend concluded, “I think the words of Dr. Philips are truly encouraging, and he surely must be a most loveable and considerate old man.”²⁹¹ Similarly, Nell Sanders affirmed Sheriff by assuring her that Phillips would be good to her.²⁹² Phillips left a lasting impression on his students. A few years after Sheriff’s graduation, Sanders wrote Sheriff: “Don’t ever get discouraged –

288. Sheriff as told to Plyler, “Young Lady” 6.

289. MCSC would not have a full-time female professor until the 1940s. Around the turn of the century, female medical professors taught at women’s medical schools. (Walsh, “Feminist Medical Education,” 452.)

290. Connors, letters to Sheriff, 3 October 1922, file 7, box 1, Sheriff Papers.

291. Connors, letters to Sheriff, 21 February 1923, file 9, box 1, Sheriff Papers.

292. Sanders to Sheriff, 16 October 1922, file 7, box 1, Sheriff Papers.

remember ‘Dad’ Phillips said that he knew that you’d succeed, and I know you will too.”²⁹³ The reference to him as “Dad” Phillips in several letters strongly suggested that students respected him as a kindly father-like figure.

Phillips and Sheriff remained in contact even after she graduated, further supporting evidence of their congenial relationship. In one of his letters, written to his “prey of anatomy in med. college,”²⁹⁴ he recalled how he tried to convince Sanders to complete medical school before marrying: “From what she had told me and what she wrote me prior to her marriage, I had conceived an unfavorable opinion of [her future husband] as a man. I endeavored to persuade her to get through her medical course first. But fate of infatuation decreed otherwise.”²⁹⁵ Phillips truly seemed to want what was best for each student. He stood out as an individual going against societal norms, urging a woman to postpone marriage to do what is best for her education and career. In concert, the correspondence demonstrated how Phillips was well-liked and trusted by his students, even if they did not always take his advice. That he and Sheriff continued to correspond after her graduation validated the mutual respect between the two individuals.

Bowers

Unfortunately, Sheriff’s good-natured relationship with Phillips was not representative of her interactions with other doctors. Sheriff reflected on an unpleasant patient assignment from a doctor at Roper Hospital:

293. Sanders to Sheriff, 3 July 1929, file 30, box 1, Sheriff Papers.

294. Phillips to Sheriff, 1 January 1934, file 41, box 1, Sheriff Papers.

295. Ibid.

There was one assignment I didn't do. It involved a patient with syphilis who was kept on a closed-in veranda at the hospital. Dr. Bowers, a young surgeon, assigned Bill Ballard and me to this man who had a big, drooling lesion on his mouth. When we first visited him, I could almost see the spirochetes (syphilis germs). The next day, Bill was away so I had to make rounds alone. Because I did not want to go near the man, I stood in the doorway of the porch and took the history. The following day Dr. Bowers called on me to give a case report. When he asked about the physical, I had to tell him that I didn't examine the patient and why. Knowing that the professor probably assigned this man to me on purpose, I thought I might fail the course, but luckily I passed.²⁹⁶

Sheriff believed that Bowers had assigned the contagious syphilis patient to her purposefully, implying that he had done so maliciously. If Sheriff was correct, and his intent was unkind, it was likely because of Sheriff's status as a woman. Sheriff's willingness to stand up for herself by refusing to complete an assignment demonstrates her refusal to be bullied by others. That she was willing to take the risk of failing the course by putting her safety first reveals the value Sheriff saw in herself.

John van de Erve

Sheriff's interactions with John van de Erve, who taught physiology,²⁹⁷ were also confrontational. Sheriff described him as a French Huguenot minister with broken

296. Sheriff as told to Plyler, "Young Lady," 5.

297. "The Medical College of the State of South Carolina," Catalog 1925-1926, 14, Box 10, Sheriff Papers.

English, whom everyone feared due to his austerity.²⁹⁸ She vividly recalled an encounter that happened in his class during her second year of medical school:

A male student and I worked together, and I always managed to avoid going to the front of the room to pick up our frog. . . .

One day Dr. van de Erve said, ‘Miss Sheriff, you get the frog!’ I thought I would die. After praying a moment, I walked to the cage. I was wearing a short sleeve dress, and the moment I reached in, they jumped on my arm. Somehow I managed not to faint as Dr. van de Erve stood right there to watch me get that frog out. He probably realized I was frightened and wanted to break me.²⁹⁹

There was no reason for van de Erve to dictate which student obtained the frog for each pair. The fact that he watched Sheriff obtain the frog suggests that he was particularly interested in how she would handle the situation. Thus, Sheriff was probably correct in thinking that van de Erve had noted her fear and wanted to “break” her.

Although Sheriff faced the male professors and ultimately passed her classes, one of her female classmates was not so fortunate. At the end of her final academic year, Sheriff wrote to recent graduate Zerbst,

I was very much surprised Monday morning when I had a letter from Clara [Stewart] saying she “flunked” in three subjects, Minor Surgery, Physiology, and Pharmacology. She made B’s on the other subjects. She thinks Van de Erve did it on account of his son, Jack, and influenced the others. Do you think he would do

298. Sheriff as told to Plyler, “Young Lady,” 4.

299. *Ibid.*

such? She heard that “Vandy” got up at the Sophomore faculty meeting and said “Miss Stewart is just a play thing – she never has a serious thought.” [George] Mood and Martin said they graded a student according to the work done and not from personal opinion.³⁰⁰

The language attributed to van de Erve was demeaning toward Stewart as a woman, reducing her to a mere amusement for others. Although the other two professors insisted that they assigned grades based on student work, the grades became suspect with the accusation that van de Erve had spoken ill of Stewart at a faculty meeting.

Sheriff did not find it unthinkable that a professor would fail Stewart for a personal reason. Nonetheless, Sheriff did not take Stewart’s side blindly, despite her sympathy: “I surely am sorry for Clara [Stewart], I know how much she studied, but I do not know how much she accomplished. She said she was going back and finish, but I don’t want her to have to be in the class with one of those coeds, especially after having failed, for life will be unpleasant.”³⁰¹ Sheriff seemed to know Stewart’s habits to know that she studied, but yet she doubted how much Stewart had learned. However, more than sympathizing with Stewart’s failure, Sheriff seemed especially concerned about Stewart returning and having to face her male classmates. As a woman, she was keenly aware of how a female medical student was treated, and presumably, Sheriff imagined that it would only become worse for Stewart after failing three courses.

300. Sheriff to Zerbst, 16 June 1926, file 17, box 1, Sheriff Papers. Jack van de Erve was in the MCSC class below Sheriff and Stewart.

301. Ibid.

Zerbst expressed similar shock at Stewart's failure: "I am certainly surprised at Clara's failing. I can hardly believe that van de Erve would be guilty of such a contemptible thing as that. Do you know where Clara [Stewart] got her information from? They have most certainly passed men who knew a darned sight less than she – there's something queer about it no matter how you view it. I am sorry for her."³⁰² Although he found it difficult to believe that a van de Erve would fail a student as part of a personal vendetta, Zerbst admitted that male students of less academic caliber than Stewart had been passed. He also questioned the source of Stewart's information, but he acknowledged that regardless of exactly how or why it happened, it was peculiar that Clara failed three classes.

Even other faculty recognized the ill-treatment Stewart received from van de Erve. Stewart explained, "I am not going back to Charleston Medical next year for Dr. Phillips told me that Van de Erve would do all in his power to keep me from graduating there. He and Dr. O'Driscoll and Dr. Lynch wrote me very good recommendations which I shall use in gaining entrance somewhere else."³⁰³ If van de Erve did speak at a faculty meeting and managed to persuade Mood and Martin to fail Stewart, there were several faculty members willing to provide her with the, albeit minimal, support of a recommendation letter. However, there was no evidence that Phillips or any of the other professors made any attempt to ensure that Stewart received fair and equal treatment from van de Erve.

302. Zerbst to Sheriff, 19 June 1926, file 17, box 1, Sheriff Papers.

303. Stewart to Sheriff, 15 July 1927, file 23, box 1, Sheriff Papers.

Despite these negative encounters, Sheriff's experience with the doctors in Charleston must have been positive overall. Upon taking her State Board Examination, she encountered doctors who were more skeptical of a woman studying medicine and becoming a doctor. She described them to Zerbst: "Some of these old doctors up here [at Columbia College] could not understand why I studied medicine – they kept concerning themselves with the matter, and several of them quizzically asked me. They seem so different from our doctors."³⁰⁴ At the very least the MCSC faculty must not have questioned the students' motives for attending the medical school.

Friends

Sheriff had a large support network of friends with whom she regularly corresponded during college and medical school. Years later, Sheriff reminisced about her medical school classmates:

There were 35 in our class including two other girls – Eleanor Townsend of Charleston and Leora Perry of Ridgeland. . . . Because many of my classmates had attended the College of Charleston, there really was no big adjustment to make. Several of the boys were like brothers to me. I suppose that the intimate things discussed in medical classrooms would have been embarrassing without these close friendships.³⁰⁵

304. Sheriff to Zerbst, 25 June 1926, file 17, box 1, Sheriff Papers.

305. Sheriff as told to Plyler, "Young Lady," 3.

Similarly, Sheriff already knew Baker and Townsend when they started medical school.³⁰⁶ Madge Baker also graduated with Sheriff and her class.³⁰⁷ Unfortunately, Townsend would not be able to graduate until 1929.³⁰⁸ Upon her own graduation, Sheriff would later reflect that, while she was anxious to care for her own patients, she was sad to leave all the friends she had made during the six years she had spent in Charleston.³⁰⁹

Ray Allan Byrd

Childhood friend Ray Allan Byrd alternated between supporting Sheriff's pursuit of becoming a doctor and discouraging her from following her dream. Before either of them had graduated from high school, he wrote, "I like the spirit with which you are entering your work of medical training. If you keep that spirit you are bound to be successful."³¹⁰ Despite what seemed to be encouragement here, Byrd continued, "I am glad women have the opportunity of taking medical training on an equal basis with men. In a time of pain I know nothing is more soothing than the touch of a woman's hand."³¹¹ In one paragraph, Byrd went from approval of women's equal opportunity for an education to placing women in the stereotypically feminine caregiver role.

306. Connors to Sheriff, 23 September 1922, file 6, box 1, Sheriff Papers.

307. "Women Physicians Graduated from the Medical College of the State of South Carolina," Writings, box 6, Sheriff Papers.

308. Ibid.

309. Sheriff as told to Plyler, "Young Lady," 6.

310. Byrd to Sheriff, 4 June 1918, file 1, box 1, Sheriff Papers.

311. Ibid.

Byrd provided a positive influence on Sheriff in that he assumed that she would go to medical school. Even after she had missed a considerable amount of high school due to illness, Byrd asked, “What do you intend specializing in?”³¹² This early support was likely significant for Sheriff since her parents expressed doubt that she would become a physician.

George “Wattie” Connors

Many of those letters Sheriff received were from George “Wattie” Connors. He wrote frequently encouraging her while she was at the College of Charleston: “You are so well-prepared that exams will be easy, and they will be a pleasure – after they’re over. Please do not take them too seriously, for it is not necessary to chew and digest them; they are only to be tasted and swallowed whole like medicine. One thing good about exams – they never have to leave an unpleasant aftermath – that is, unless one flunks them. In your case, this, like me, is impossible.”³¹³ Although the letter appeared to be reassuring, the writing was, in some ways, also demeaning. Suggesting that Sheriff not take exams very seriously devalued them, and, in turn, the hard work Sheriff had done thus far.

When Sheriff was still considering a third year at the College of Charleston, Connors objected to her taking both biology and chemistry.³¹⁴ Nonetheless, he did encourage her to begin her medical education at once, provided she was certain of her

312. Byrd to Sheriff, 9 October 1918, file 1, box 1, Sheriff Papers.

313. Connors to Sheriff, 30 May 1922, file 3, box 1, Sheriff Papers.

314. Connors to Sheriff, 18 June 1922, file 3, box 1, Sheriff Papers.

decision to pursue the medical course; he even made suggestions as to where Sheriff should apply for medical school.³¹⁵ Subsequently Connors congratulated Sheriff on her decision to pursue her medical education:

Your ambitions are my ambitions for you, and your successes are my successes too. . . . How unselfish and beautiful is your thought of others, Hilla, dear, in deciding upon Pediatrics as a career. There is no one more interested in your course of study, and no one who will watch your efforts and congratulate you upon your successes, and no one who will offer you more encouragement at all times than I. . . . I cannot help but to admire and love you the more, Hilla, when I think how useful and how beautiful will be your career in such a noble profession.³¹⁶

Connors wrote of sharing ambitions, but in doing so, he claimed a share of Sheriff's accomplishments, referring to her successes as his own successes as well. Although he commended her decision to pursue pediatrics as unselfish, Connors continued to write about how he will be observing her efforts and congratulating her in her noble career. He seemed to have been thinking more about the role he would play in Sheriff's life than about what she would be doing.

Doubts and lies

Connors also passed along the reservations of others. A short time before Sheriff began her coursework at MCSC, Connors wrote, "Marie said that she would not think of

315. Connors to Sheriff, 25 June 1922, file 3, box 1, Sheriff Papers.

316. Connors to Sheriff, 29 June 1922, file 3, box 1, Sheriff Papers.

your going to the Medical College next year and that you just had to go back to Charleston College with her. What about it?”³¹⁷ He showed no indication of disagreeing with Marie’s sentiments. This provided a glimpse at his real feelings about Sheriff’s educational pursuits. He even asked, “Have you already enrolled for the Medical College, Hilla?”³¹⁸ The tone was as if he were hopeful she had not enrolled yet.

Eventually, on July 22 Connors began his missive by writing, “I am delighted to hear you say ‘It is real thrilling to learn to cook.’”³¹⁹ He was focused on the person he wanted Sheriff to be and admitted that he did not want her to begin medical school: “Hilla, my darling girl, I have to take back everything I said about your going to the Medical College. It has grieved me ever since you announced that you were going there next year. I never wanted you to go there and I do not want you to go there now. Can you change your mind and return to College of Chas.? This week I am going to prepare a long thesis on ‘Why you should not go to the Medical College next year’.”³²⁰ Connors was determined that Sheriff would not attend medical school simply because he did not wish for her do so, illustrating his belief that women should not pursue goals without approval from their male counterparts.

Furthermore, this letter demonstrated that Connors had not merely changed his mind but had been lying to Sheriff about his support of her decision to attend medical

317. Connors to Sheriff, 14 July 1922, file 4, box 1, Sheriff Papers.

318. Connors to Sheriff, 17 July 1922, file 4, box 1, Sheriff Papers.

319. Connors to Sheriff, 22 July 1922, file 4, box 1, Sheriff Papers.

320. Ibid.

school. Not only did he confess that he did not want her to go to medical college, but he also began attempting to change her mind about her decision. This suggested that he believed that his own opinions about Sheriff's medical school attendance were more important than Sheriff's thoughts about her own life goals.

Connors did not limit his efforts to a single letter and continued to ask Sheriff to reconsider her plans. He wrote on July 25: "Hilla, could you return to the College of Charleston? Of course, my dear, sweet love, I do not want to frustrate your plans for the Medical College, and I *would* never think the less of you if you did attend the M[edical] C[ollege] next year, for I have such a supreme confidence in your judgement. But, if it is not contrary and detrimental to all your fondest ambitions, I should like for you to continue your academic studies."³²¹ Although Connors claimed he did not want to interfere with her plans, that was exactly what he was doing by asking Sheriff to remain at the College of Charleston. While insisting that he trusted her judgement, Connors asked her to postpone her medical education under the guise of continuing her college studies.

A change of heart

Notwithstanding these pleas, Connors wrote two letters on July 28, conceding to Sheriff that she was right in her decision to begin medical school in the fall.³²² This change of heart did not last long, and he pled a month later, "Darling, please love me more than the medical course and, if you can, give up the idea of studying medicine. At

321. Connors to Sheriff, 25 July 1922, file 4, box 1, Sheriff Papers.

322. Connors to Sheriff, 28 July 1922, file 4, box 1, Sheriff Papers.

least, try one more year of academic work and please do not burden yourself with so much dry and tiresome laboratory work next year.”³²³ He wrote as if he was competing with medical school for Sheriff’s attention.

Despite all of this, once Sheriff began medical school, Connors wrote that he wanted her to enjoy her coursework and advised her not to “get discouraged if success does not come at first.”³²⁴ He attempted to provide emotional support to Sheriff as she suffered from her “blue spells.”³²⁵ Connors seemed to have been keenly aware that Sheriff would face challenges as a woman in medical school, writing,

Darling, you don’t know how very glad I am that you have Miss Townsend for a dissecting partner. I am only too aware of the fact that wherever there is a crowd of young men gathered together there is bound to be someone in the party who is not capable of being a gentleman. I know that boys are likely to play a practical joke at the expense of the girls, and I should certainly hate to see you imposed upon. I, too, feel sorry for the other co-ed without a partner.³²⁶

In particular, Connors was concerned about how the men would behave around Sheriff and other female students. His concern here appears to be genuine, although paternalistic.

323. Connors to Sheriff, 17 August 1922, file 5, box 1, Sheriff Papers.

324. Connors to Sheriff, 23 September 1922, file 6, box 1, Sheriff Papers.

325. Connors to Sheriff, September 1922, file 6, box 1, Sheriff Papers.

326. Connors to Sheriff, 1 October 1922, file 7, box 1, Sheriff Papers.

Occasionally Connors did encourage Sheriff's efforts: "Study hard and . . . the moments that seem most trying will very soon pass."³²⁷ Connors reassured Sheriff that he loved her for her determination, writing, "Please don't get discouraged."³²⁸ Connors seemed to have cared very much for Sheriff, and it appeared that he may have begun to accept her medical training, at least for a time.

Due to gaps in the archival materials, it was impossible to determine when their relationship proceeded to an engagement, but in December 1922, Connors wrote that his mother had become reconciled to the fact that he and Sheriff were engaged.³²⁹ This would suggest that the misgivings Connors had had about Sheriff's pursuit of a career in medicine had been ameliorated.

Connors supported Sheriff when things were going well for her: "Darling, the account you gave of the dissection was a splendid one. I caught a bit of the enthusiasm with which you have so successfully worked, and I am happy for you that you have completed one part of your course with such wonderful results. You have my warmest sympathy and heartiest congratulations."³³⁰ Perhaps after the first few months of medical school, Connors simply became accustomed to Sheriff's activities and life goals. He seemed to be happy because she was happy. Even when not referencing specific news, Connors praised Sheriff, "Darling, I must congratulate you on your grit and

327. Connors to Sheriff, 25 October 1922, file 7, box 1, Sheriff Papers.

328. Connors to Sheriff, 13 December 1922, file 8, box 1, Sheriff Papers.

329. Connors to Sheriff, 30 December 1922, file 8, box 1, Sheriff Papers.

330. Connors to Sheriff, 27 January 1923, file 9, box 1, Sheriff Papers.

determination! I think it is ever so commendable of you to be able to stick to your purpose so well! You haven't made a single complaint!"³³¹ However, he may have unreasonably expected Sheriff to always maintain a rosy outlook, without any serious concerns.

Connors became worried if he did not hear from Sheriff. He once implored her: "It seems ages since I have heard from you. I do sincerely hope you haven't had a nervous breakdown again. Please, oh, please my Darling Sweetheart, do not take your work too seriously or strenuously. Don't you realize, Dearest, that you are doing yourself an injustice? And it is breaking my heart to have you under such a severe strain."³³² Although it may seem that Connors wrote out of concern for Sheriff, given his other letters to her and the context of this one, it was likely that his primary concern was that she was focusing on medical school rather than writing to him.

Nonetheless, Connors sympathized with Sheriff when they learned that Townsend had left MCSC and would not be returning: "I really know how sensitive it makes one feel to have a partner or friend forsake him. Of course this is no fault of Eleanor's yet it makes you suffer for her companionship and her enthusiasm. . . . I was interested to know that you are studying hard and did not give way to your feelings."³³³ This sympathy,

331. Connors to Sheriff, 2 February 1923, file 9, box 1, Sheriff Papers.

332. Connors to Sheriff, 13 March 1923, file 10, box 1, Sheriff Papers.

333. Connors to Sheriff, 16 April 1923, file 11, box 1, Sheriff Papers. Townsend would eventually return to medical school and graduate in 1929. ("Women Physicians

perhaps, was again enhanced by his feeling that Sheriff was forsaking him for medical school, something in his mind a proper fiancé would not have done.

Connors seemed to express genuine interest in whether or not Sheriff's peers were returning to medical school, later writing, "Darling, does Nell [Sanders] expect to return to The Medical College next session? How about Eleanor [Townsend]?"³³⁴ He was also concerned about how their decisions would impact Sheriff: "I am sorry, tho [*sic*], that Eleanor [Townsend] should disappoint you. It is such a pity that she should drop out after making such a splendid record."³³⁵ It is somewhat surprising that Connors would express regret that a woman would drop out of medical school when he had so staunchly opposed Sheriff's attendance. Perhaps he viewed Townsend as a form of support and protection for Sheriff. Alternatively, Townsend's enrollment at medical school may not have perturbed him because he was not romantically involved with her.

Throughout the spring, Connors continued to encourage Sheriff, writing, "Please don't give up and get disappointed, Dearest."³³⁶ He also asked questions about her work: "Darling I think you are to be congratulated on your splendid results achieved in dissecting. Next to the heart, the operation upon the brain is the most important, isn't

Graduated from the Medical College of the State of South Carolina," Writings, box 6, Sheriff Papers.)

334. Connors to Sheriff, 20 April 1923, file 11, box 1, Sheriff Papers.

335. Ibid.

336. Connors to Sheriff, 28 April 1923, file 11, box 1, Sheriff Papers.

it?”³³⁷ His interest in what Sheriff was doing suggested Connors was beginning to accept her career goals. Furthermore, he seemed to recognize the struggle Sheriff was enduring: “Darling, you have had a difficult time this year, haven’t you? I greatly admire your spirit and your forbearance. I think you have stood up to your convictions wonderfully, Hilla, dearest. It has required a long and difficult time to go thru [*sic*] those trying introductory months.”³³⁸ After a year, Connors genuinely acknowledged the trials that Sheriff had faced and the determination she had exhibited.

After the school year had concluded, Connors wrote, “You deserve one [vacation], for you have been very attentive to your duties and have achieved a splendid record. I know that you passed everything successfully and that you are relieved that the preliminaries are all over. . . . I realize that your year has been set with many misgivings, and when I think of these things I am impressed all the more with your splendid record, Dearest.”³³⁹ He was confident that Sheriff had passed her courses and again acknowledged the difficult times she had experienced. Unfortunately, this apparent esteem of Sheriff’s education and career goals was short-lived.

Broken engagement

Midway through Sheriff’s second year at MCSC, Connors sent her a lengthy letter reiterating his thoughts about women and medicine:

337. Connors to Sheriff, 12 May 1923, file 11, box 1, Sheriff Papers. Emphasis in the original.

338. Connors to Sheriff, 31 May 1923, file 11, box 1, Sheriff Papers.

339. Connors to Sheriff, 7 June 1923, file 12, box 1, Sheriff Papers.

As I have often frankly told you, your Medical Course does not harmonize with my ideals of a woman. I admire your spirit greatly, Hilla, and I am ever so Happy [*sic*] that you were not influenced by me to forsake the goal that you have set for yourself. I am infinitely glad that I do not have any feelings of remorse for having influenced you one way or the other. You were deliberate in all your decisions, and I was the lesser appeal when it came to making a choice between me and a professional career. . . .

I can readily see your view-point, Hilla, and, I want to tell you with perfect frankness, I think you have made a wise decision. . . .

I did love you once, devotedly, and I shall always have a warm spot in my heart for you, Hilla, but I can never reconcile myself to the Medical Course for a wife or women in general. I can truthfully say that I have never known a girl with a sweeter disposition, a more radiant and lovable charm, and a more beautiful character than you possess, Hilla. I shall envy your husband for the royal wife that he shall get in you.³⁴⁰

Hence, Sheriff's engagement and relationship with Connors ended because he was unable to accept her as the professional she wished to be. He could not reconcile her career choice with his view of an ideal woman.

340. Connors to Sheriff, 19 January 1924, file 13, box 1, Sheriff Papers.

Nell Sanders

Nell Sanders was a close friend of Sheriff's. It had been Sanders who had set Sheriff up with Connors for a double date.³⁴¹ Still, she would later tell Sheriff, "Don't waste your time with him, honey, have a good time with the Medical Students. Wattie [Connors] is a rolling stone."³⁴² The women shared a room together at the YWCA during Sheriff's second year of college.³⁴³ Sanders was a first year medical student that year.³⁴⁴ Unfortunately, Sheriff and Sanders were unable to obtain a room at the YWCA again for the 1922-1923 school year.³⁴⁵ Although they had help in getting a room at the organization's annex, Sanders had to undergo an operation for appendicitis, leaving Sheriff alone for several weeks.³⁴⁶ Sheriff lived by herself for the remainder of the term before moving in with classmates Madge Baker and Leora Perry, with whom she would remain for the duration of their time in Charleston.

Connors told Sheriff about Sanders at the end of the school year: "I spied Nell [Sanders] and Miss Robertson. They are both in the picture of health and made appealing inquiries about you, Dearest. Nell [Sanders] wants to return to school next year, but from

341. Connors to Sanders, 29 May 1922, file 3, box 1, Sheriff Papers.

342. Sanders to Sheriff, 16 October 1922, file 7, box 1, Sheriff Papers.

343. Connors to Sheriff, 12 September 1922, file 6, box 1, Sheriff Papers.

344. Sanders to Sheriff, 5 June 1922, file 3, box 1, Sheriff Papers. At the time Sanders was taking anatomy, histology, and chemistry.

345. Connors to Sheriff, 12 September 1922, file 6, box 1, Sheriff Papers.

346. Connors to Sanders, 22 September 1922, file 7, box 1, Sheriff Papers.

a chance remark from Miss R. I gathered that the Medical Course was too strenuous for her. Nell [Sanders] said that she does not want to return to Chas., but had rather go elsewhere.”³⁴⁷ Connors possibly spun the story a bit for his own purposes. Sanders did return and continue at MCSC, even earning eight As, two Cs, and the rest Bs in 1926 at the MCSC,³⁴⁸ indicating that she was quite successful. Since Sanders both returned to MCSC and did well in her coursework, it was highly unlikely that it had been too strenuous for her. Rather, Sanders’s physical health was more problematic. Zerbst told Sheriff in 1927, “Nellie Sanders got sick just after Christmas and had to give her medical work up until next year. So no co-ed graduated this year – she being the only one in the class.”³⁴⁹ Not only had her appendicitis postponed her second year of medical school, but illness kept her from graduating.

Leora Perry

In addition to being a classmate, Leora Perry was one of Sheriff’s roommates. They and classmate Baker lived at 53 Montague Street with Dr. and Mrs. Hickman for most of their time in medical school.³⁵⁰ Perry and Sheriff looked after each other when they were ill, as Perry explained to Connors, “Hilla wants to get up and go to school this p. m. for our first chemistry class but I’m not going to let her. She can afford to miss it, I

347. Connors to Sheriff, 31 May 1923, file 11, box 1, Sheriff Papers.

348. Sheriff to Zerbst, 11 June 1926, file 17, box 1, Sheriff Papers.

349. Zerbst to Sheriff, 14 June 1927, file 23, box 1, Sheriff Papers.

350. Sheriff as told to Plyler, “Young Lady,” 5.

believe.”³⁵¹ Perry had faith and confidence in Sheriff. They also socialized together, spending time with friends in the Hickman’s parlor.³⁵² Nonetheless, by their last year of medical school, they “were not particularly friendly.”³⁵³ However, the women did remain in touch years after graduation.³⁵⁴

Henry Zerbst

Henry Zerbst also provided Sheriff with considerable emotional support. In an undated letter he wrote to Sheriff, “But there is one thing I do want you to know, and that is that I am standing back of you as I have always done since you were a freshman medical student. And why shouldn’t I? You have given me more happiness than any woman I have ever known.”³⁵⁵ Zerbst made it clear that his support was unconditional and long-lasting. He was not exaggerating when he wrote that his support went back to Sheriff’s first year in medical school. Then, he had written how happy he was that Sheriff had done so well, noting that Phillips had given them both the same grade as first year medical students.³⁵⁶ Of course Zerbst had graduated from MCSC before Sheriff had even matriculated.

351. Perry to Connors, 5 February 1923, file 9, box 1, Sheriff Papers.

352. Stewart to Sheriff, 15 July 1927, file 23, box 1, Sheriff Papers.

353. Zerbst to Sheriff, autumn 1927, file 25, box 1, Sheriff Papers.

354. Perry to Sheriff, December 1931, file 34, box 1, Sheriff Papers.

355. Zerbst to Sheriff, undated, file 100, box 3, Sheriff Papers.

356. Zerbst to Sheriff, 28 June 1923, file 12, box 1, Sheriff Papers.

Views on women physicians

Zerbst recognized the challenges that women faced as doctors. Working as an Eyes, Ears, Nose, and Throat (EENT) specialist in Washington, D. C., he wrote, “We are going to have a woman intern at this floor, a Dr. Berger – a big mannish woman from Emergency Hosp. I guess she’ll have a hard time with these nurses – they are talking already about how they dislike her – the interns here don’t want her either, but she’ll get along all right – if she does her work, and doesn’t try to beat out on account of sex.”³⁵⁷ Although Zerbst exhibited sexism by suggesting that a woman doctor might try to use her sex as an excuse to avoid working, exhibiting his male-centric bias, he at least was receptive to the idea of working with a woman. Nonetheless, this was one of many examples of Zerbst’s censure of a woman who was not feminine. In this way he was like Connors expecting a woman to exhibit certain feminine traits.

Zerbst had at times reacted negatively toward Sheriff. At the end of her second year of medical school, Sheriff started examining patients under the supervision of practicing physicians.³⁵⁸ Sheriff recollected during an interview: “One of my assignments was to work in the eye clinic with Dr. Henry Zerbst, my future husband, who was a practicing ophthalmologist. We had dated several times, and I innocently asked him how to spell homatropine – h-o-m-a or h-o-m-o. He looked down at me as though he had never seen me before as said, ‘Young lady, if you want to know, look it up.’”³⁵⁹ Sheriff

357. Zerbst to Sheriff, 18 September 1924, file 14, box 1, Sheriff Papers.

358. Sheriff as told to Plyler, “Young Lady,” 4.

359. Ibid.

recalled her anger at his response and her inclination to cancel their next date; however, her landlady had advised her against cancelling.³⁶⁰ Sheriff expected respect and did not have patience for curt responses.

Despite his shortcomings, Zerbst tried to help Sheriff, even if he was not always successful. In her third year at MCSC, Sheriff began investigating internship options. After inquiring about a position for her at one hospital Zerbst broke bad the news, “By the way – I talked to McLeod about you interning there [at Children’s Hospital], and he is not in favor of it. They have never had a woman doctor – and don’t want one. So that’s that.”³⁶¹ The subject of Sheriff’s possible internship was written about as a side note, appearing to be of little importance to Zerbst. He was straightforward and did not try to lessen the impact of what he had been told. The message that Sheriff was not wanted because she was a woman was a harsh one, and Zerbst conveyed it bluntly.

Zerbst wrote that he was glad that Sheriff was “getting along O.K.” and frequently asked about her exams, as well as how other students were doing.³⁶² When Sheriff received her grades, all As, Bs, and Cs, Zerbst wrote, “I’m so glad you don’t have to worry about any ‘make ups’ in Sept. You know Dad Phillips says you are a bright girl. Just what did you do to him – he sho’ didn’t think so about me gave me a C and d__d

360. Ibid.

361. Zerbst to Sheriff, 3 November 1924, file 14, box 1, Sheriff Papers.

362. Zerbst to Sheriff, 5 February 1925; 9 February 1925; and 10 April 1925, file 15, box 1, Sheriff Papers.

glad I was to get it too.”³⁶³ Though he reacted humorously, Zerbst seemed to have been genuinely glad that Sheriff had done well in all of her courses, reinforcing his own congratulations with a reminder that Phillips also thought highly of Sheriff.

Zerbst recognized the powerful role that their professors played in the lives of medical students. Regarding Clara Stewart he wrote, “They just had it in for her and don’t want her at M. C. S. C. We were lucky, weren’t we? Just suppose one of the high and mighty got it in for us – we’d still be freshman. I hope Clara [Stewart] buckles down to work – she ought to make a wonderful doctor with so many years of ground work.”³⁶⁴ Thus, while recognizing that the professors had absolute control over which students passed and graduated, Zerbst also placed responsibility on the student to be serious about academic work.

A source of advice

A pragmatist, Zerbst also provided Sheriff with practical advice about how to spend her time in the summer. He suggested that she work at a summer camp before her last year of medical school, because it would be her last opportunity for extended rest. Zerbst explained, “Next summer you’ll either be practicing or interning somewhere.”³⁶⁵ More than others, when he looked toward the future, Zerbst saw Sheriff going into

363. Report of the work of Hilla Sheriff for the JUNIOR Year Session 1924-25, 8 June 1925, file 16, box 1, Sheriff Papers; Zerbst to Sheriff, 25 June 1925, file 16, box 1, Sheriff Papers. Censorship in original; I believe Zerbst meant “damned.”

364. Zerbst to Sheriff, 10 October 1927, file 25, box 1, Sheriff Papers.

365. Zerbst to Sheriff, 26 March 1925, file 15, box 1, Sheriff Papers.

medical practice or an internship and using her medical degree, illustrating his more progressive view of women for the time period.

Sheriff would later turn to Zerbst for career advice when making her decision as to what to do after completing medical school:

Well, about the hospitals, neither the one in Spartanburg [SC] or in Greenville [SC] is recognized by the A.M.A. – that is their interns are not approved. Both are recognized by the American College of Surgeons. I don't want to get in a hospital for a whole year that is not accredited. I am going to write to Philadelphia again and try to get some definite statement as to my getting there in December. If I can go there I shall be willing to go to Greenville or almost anywhere until then, if not I'm going to run an ad in the Journal. The family wants me to stay at home and read up for a month or two, but I feel as my time is too valuable to waste resting.³⁶⁶

Sheriff was eager to continue her training and had not found the encouragement she needed from her family. Zerbst provided her with the emotional support she needed.

Zerbst was supportive of Sheriff's idea of seeking an internship via advertisement in a medical journal, predicting a positive response. Similarly, he suggested she answer some ads as well. He also reaffirmed her belief about the importance of completing an internship at a hospital recognized by the AMA:

I think you are wise to leave those hospitals alone if they are not recognized, as a year in a recognized hospital is essential in securing a good many positions. Why

366. Sheriff to Zerbst, 11 June 1926, file 17, box 1, Sheriff Papers.

not try answering some of the Journal 'ads.' Your idea of an 'ad' in the Journal is a good one and will probably bring you a large number of answers.

As for the State Board, I'd look over my anatomy in Goepp and the chemistry, maybe. As for the rest, I know you can pass all right.³⁶⁷

Furthermore, Zerst demonstrated confidence in Sheriff by assuring her that he knew she will be able to pass the State Board Examination.

While she was away in Philadelphia, Sheriff wrote to Zerst, "I miss having you to talk things over with and getting your advise [*sic*], which I do value a lot."³⁶⁸ Clearly she respected his opinion. However, despite all of the help he provided Sheriff, this is not to imply that Zerst gave complete support to women physicians. He wrote Sheriff about a Dr. Floody:

She is everything a woman should not be. I think she is the original model from whom the conception of a woman doctor was drawn. I really didn't know whether to say 'Yes mam [*sic*]!' or 'Yes sir.' She had on a man's felt hat, starched collar mannish cut coat, and she was ugly as the devil's self. No wonder people are afraid of women doctors if many are like her. Lord deliver me from such as she. I'd stay single till I was ninety before I'd take such a caricature to my bosom. It seems to me a woman can be a physician and still remain feminine.³⁶⁹

367. Zerst to Sheriff, 14 June 1926, file 17, box 1, Sheriff Papers.

368. Sheriff to Zerst, 21 March 1927, file 21, box 1, Sheriff Papers.

369. Zerst to Sheriff, 28 October 1926, file 19, box 1, Sheriff Papers.

Undoubtedly, Zerbst maintained an expectation of femininity in women, despite his forward-thinking view of women as physicians.

Relationship

Thus, Sheriff's career path fit Zerbst's ideal of women working with children. Despite this, Zerbst wrote that he loved Sheriff not for her body or for her mind, but simply for being her. He wrote, "I don't give a damn about your degrees or your position but the fact that you are Hilla, and when I'm with you I experience a sense of happiness and contentment . . . due to the fact that you have a mind and will of your own."³⁷⁰ He, unlike Connors, appreciated her independence and individuality. Although Connors had tried to love Sheriff despite her position, Zerbst loved her regardless of it.

Zerbst was not immune to the frustrations that came with being in a relationship with a doctor. However, unlike Connors he was able to love Sheriff as a whole person, including her profession, although it brought additional challenges. Zerbst even wrote letters similar to the ones Connors sent Sheriff, explaining, "I wish you had never studied medicine, precious. I wish you were a school teacher like Ralda [Sheriff]. I sometimes wonder if medicine will bring you the greatest happiness in life – whether you would rather be admired by a crowd or loved by me. You are a woman, Hilla precious – very much so – and I hope that you will realize, in the near future, that real happiness does not lie in the admiration of friends who use you for their own purposes, but rather in the

370. Zerbst to Sheriff, 24 November 1937, file 49, box 2, Sheriff Papers.

steadfast love of one man.”³⁷¹ Zerst occasionally returned to the idea of Sheriff pursuing a more traditionally feminine career that would allow her to focus more attention on him.

Also like Connors, Zerst later sent letters about how much he loved Sheriff: “I only know that Lieb fills my heart, that her touch thrills me, that I love her and want her – not because she is a physician or a woman but because she is Hilla. I’ve met other women physicians (some of them very good looking) and there wasn’t the slightest spark (or the desire to have one) between us.”³⁷² These love letters differed from Connors’s in that Zerst demonstrated how he loved Sheriff as a person despite knowing other attractive women physicians, while Connors had written how he loved Sheriff despite her medical course. However, Zerst clearly still considered appearance an important factor.

Zerst reiterated how proud he was of Sheriff for earning her MD degree, including how joyful he was at the time.³⁷³ While Zerst embraced the fact that Sheriff was a doctor, he also struggled with what role he played in her life. Sheriff insisted that she wanted both a career and a personal life:

I do not believe that a profession can fill any person’s life – there is a craving for true companionship and love. I should hate to think that my life would ever be like that of some of these women doctors I’ve seen here. I can’t see what joy they have when their working hours are over – they apparently have nothing in their

371. Zerst to Sheriff, 3 July 1938, file 57, box 2, Sheriff Papers.

372. Zerst to Sheriff, 31 December 1938, file 62, box 2, Sheriff Papers. Lieb was Zerst’s pet name for Sheriff.

373. Zerst to Sheriff, 10 April 1939, file 66, box 2, Sheriff Papers.

middle and old age to live for. . . . Others fooled themselves into the belief that their career was the only thing in life worth while. Anyway, whatever the reasons may be, I do not think them happy, and they are not my ideals. I love my profession and I want it. I have ambitions in it that I hope some day to attain – but I also want a real home with love and happiness. I do think that both can be successful combined.³⁷⁴

Sheriff had clear goals as to how she wished to balance her work and personal lives. She was not going to allow either one to supersede the other.

Despite Sheriff's strive for balance in her life, Zerbst believed that she prioritized her career. He wrote to a friend: "As you know, I have been in love with Hilla since she was a medical student, - still love her – always will – but Hilla thinks her profession, her work, the most important thing on earth. I have tried, but can't make her realize that a job, while important, can not take the place of a man's love in a real womans [*sic*] heart, and that success in medicine may not bring real true happiness."³⁷⁵ Zerbst truly wanted Sheriff to have a career but worried that she was keeping herself from having a fulfilling personal life as well.

In his pleadings, Zerbst also emphasized how he did not want Sheriff to be like some other female physicians they knew. He wrote to her, "I don't want you to be another Dr. Eliot – [illegible] and withered – for all her job and money. I don't want you to be like other women M.D.'s we know, thinking of a job, - with no man's arms around

374. Sheriff to Zerbst, 8 February 1927, file 21, box 1, Sheriff Papers.

375. Zerbst to Loree Florence, 28 August 1939, file 70, box 2, Sheriff Papers.

them – perhaps Lieb, they don't want them – they are not women – they are just individuals – sexless.”³⁷⁶ To Zerbst, a woman was not truly a woman without a complementary man or at least the desire for one. Zerbst insisted that as a man, he knew better than Sheriff did: “Our minds don't work alike. I know, - a man's mind is more logical than a woman's even though she has an M. S. from Harvard.”³⁷⁷ Despite Zerbst's progressive attitudes toward women, he was still influenced by the ideas of male superiority that permeated Southern culture at the time.

Influence on Others

Despite or perhaps because of the fact that she was one of only three women to graduate from her medical school class, Sheriff was an agent capable of initiating change. In the 1920s, much change was needed. There were still no female professors at the medical school, and there was very little in way of a support system for female students.

A Student

Sheriff was a member of the Asklepiads, an organization designed to bring together female medical students at MCSC.³⁷⁸ A discussion forum open only to women, the Asklepiads members encouraged each other in their medical studies.³⁷⁹ MCSC

376. Zerbst to Sheriff, 17 January 1940, file 75, box 2, Sheriff Papers.

377. Zerbst to Sheriff, 3 January 1940, file 75, box 2, Sheriff Papers.

378. Constitution of Asklepiads, Article I, Section I, file 104, box 3, Sheriff Papers.

379. Constitution of Asklepiads, Article I, Section I and Article II, Section I, file 104, box 3, Sheriff Papers.

recognized the organization and listed it as a society in the MCSC catalog, describing the meetings, “at which review of journal articles, papers on medical and surgical subjects and discussions are presented by the students.”³⁸⁰ The organization thus held with the tradition of student groups forming for the academic purposes of reading and debate. Additionally, Sheriff became involved with the American Women’s Association (AWA) during her medical training.³⁸¹ She would later work with the AWA battling public health problems in Spartanburg county.³⁸² Thus, her early involvement with women’s organizations set her on a path to becoming an influential public health leader.

A Recent Graduate

As one of very few women doctors in SC, Sheriff became quite popular upon graduation. She explained to Zerst, “I just came from down town and am ‘worn out’ from speaking to people telling them where I’m going. Folks that I don’t even know come up in stores or to the car and ask if I am the Dr.. [sic] Ralda [Sheriff] is mistaken for me half the time and gets dosed up with questions. I shall be glad when I get where I am not known or where I am better known.”³⁸³ She was a novelty to people. Sheriff did not seek attention as a female physician, she merely wanted to put her skills to use.

380. Medical College Catalog, 36, box 10, Sheriff Papers.

381. Michael Leonard, “Dr. Sheriff Triumphed Over the Problems of the Poor,” *Spartanburg Herald-Journal* (Spartanburg, SC), April 24, 1983, C3.

382. Ibid.

383. Sheriff to Zerst, 29 July 1926, file 18, box 1, Sheriff Papers.

Sheriff's internship at the Hospital of the Woman's Medical College of Pennsylvania would not begin until the December after she graduated from MCSC.³⁸⁴ Although her family wanted her to stay at home during the interim months, Sheriff instead opted to intern at the small hospital in Alta Pass, North Carolina.³⁸⁵ She thought the town was very quiet and was lonely, having only mail to cheer her.³⁸⁶ However, the prospect of special clinics made her optimistic.³⁸⁷ Her own alma mater's first woman graduate, Rosa Gantt, an E. E. N. T. specialist, came to Alta Pass to hold a clinic.³⁸⁸ Nonetheless, the lack of a steady flow of patients frustrated Sheriff:

If something interesting doesn't happen soon I think I am going to leave. Probably the rest has helped me, but when I get too much of this sort of stuff it is as bad as not enough.

I hate to be a quitter, so I think I shall try to stay a while longer. In September there will be a children's clinic to hold and I may find my interest there to entertain me.³⁸⁹

384. Anne H. Thomas to Sheriff, 7 July 1926, file 18, box 1, Sheriff Papers.

385. Sheriff to Zerbst, 11 June 1926, file 17, box 1, Sheriff Papers; "Woman Doctor is Visitor in City: Dr. Hilla Sheriff, Medical Graduate, to Do Intern Work in North," *Greenville News* (Greenville, SC), November 12, 1926.

386. Sheriff to Zerbst, 5 August 1926, file 18, box 1, Sheriff Papers.

387. Sheriff to Zerbst, 25 August 1926, file 18, box 1, Sheriff Papers.

388. Sheriff to Zerbst, 9 August 1926, file 18, box 1, Sheriff Papers.

389. Sheriff to Zerbst, 25 August 1926, file 18, box 1, Sheriff Papers.

Clearly Sheriff wanted to keep herself busy and wanted to play an active role in providing health care to the local community.

After completing this first internship, a small newspaper wrote about Sheriff when she visited her sister Ralda: “Of course she realizes the medical field is yet more or less of a venture for women, but she expressed the belief that more of her sex will turn to the profession during the coming years.”³⁹⁰ The article reflected both the novelty of women physicians, particularly in the South, as well as Sheriff’s optimism that more women would join the field. Sheriff’s experience in Alta Pass would prove to be valuable, as she would later be given greater freedom during her internship at the Hospital of the Woman’s Medical College of Pennsylvania. Although most interns were supervised for their first six cases, Sheriff’s were unsupervised due to her “*vast obs[ervation]* experience” in the summer.³⁹¹ She did not shy from working independently.

Approximately eight months before she completed her training in Philadelphia, she began contemplating where she would practice: “There are some good openings here for women Drs. – and the way is already paved for them for there are so many around here. I don’t, so far, care enuf [*sic*] for Penn. to want to stay in this state – and I think it might be interesting to pave the way for women Drs. elsewhere.”³⁹² Sheriff would not

390. “Woman Doctor is Visitor in City: Dr. Hilla Sheriff, Medical Graduate, to Do Intern Work in North,” *Greenville News* (Greenville, SC), November 12, 1926.

391. Sheriff to Zerbst, 26 November 1926, file 20, box 1, Sheriff Papers.
(Emphasis in original.)

392. Sheriff to Zerbst, 21 March 1927, file 21, box 1, Sheriff Papers.

take the relatively easy route of staying to practice in an area where women doctors were not uncommon. However, Sheriff was naïve in thinking that women physicians in PA had the way paved for them simply because there were several female doctors in the state already. Women physicians still faced discrimination in the hospitals and clinics. Nonetheless, Sheriff should be lauded for carving out a new road for women as she continued her training at another hospital before returning to SC.

A Resident

Although Sheriff had initially been told that Children's Hospital in Washington, D. C., would not accept women interns, she was able to obtain a position there as a chief resident physician after completing her internship in Philadelphia.³⁹³ Thus, not long out of medical school and while still in residency, Sheriff was breaking through gender barriers. Afterwards, she spent the first few months of 1929 training at the Willard Parker Contagious Disease Hospital in New York City.³⁹⁴ Finally, after completing this additional training, Sheriff moved to Spartanburg, SC, to begin private practice as a pediatrician in an office with Rosa Gantt.³⁹⁵ As Sheriff had told Zerbst, she would pave the way for women doctors, and she would do so in her home state of SC.

393. Zerbst to Sheriff, 16 April 1927, file 22, box 1, Sheriff Papers; "Eminent Doctor Is Visiting in the City" *Journal*, August 15, 1928, Clippings, box 6, Sheriff Papers.

394. William R. May to Sheriff, 5 October 1928, file 28, box 1 Sheriff Papers.

395. Mary F. Burts, "Spartanburg Women Achieve Success in Business Field: Manage Several Business Places: So Far None Have Entered Politics or Appeared Before

In Public Health

As president-elect of the MWNNA (Medical Women's National Association), Gantt asked the American Women's Hospitals (AWH) to address the poor health of the impoverished in the South, and, as a result, the organization hired Sheriff as the first director of the AWH's first American units in January of 1931.³⁹⁶ As director, Sheriff did work in SC's Spartanburg, Greenville, and Polk counties.³⁹⁷ She concentrated resources and staff on the eradication of pellagra, the promotion of family planning services, and the provision of health care for women and babies.³⁹⁸ According to Hill, "a gospel of nutritional health spread by Southern women proved to be remarkably successful among a population that regarded both domesticity and piety as essential female traits and suspected 'outside' experts. Observers noted the mountain people's curiosity on seeing 'that lady doctor.'"³⁹⁹ Sheriff's status as a woman was invaluable as she fulfilled the

the Bar. But Suffrage is Young," *The Spartanburg Herald* (Spartanburg, SC), 12 January 1930; "Dr. Sheriff Resigns County Health Department Post Join State Health Department," *Spartanburg Journal* (Spartanburg, SC), December 29, 1939.

396. Hill, "Dr. Hilla Sheriff," 82.

397. "Dr. Sheriff Resigns County Health Department Post Join State Health Department," *Spartanburg Journal* (Spartanburg, SC), December 29, 1939.

398. Hill, "Dr. Hilla Sheriff," 82. Pellagra, a chronic lack of the essential vitamin niacin in the diet, was reduced by half between 1931 and 1933.

399. *Ibid.*

expectation of a lady upon a pedestal, and yet her status as a doctor was an oddity to people.

Sheriff institutionalized these programs the AWH programs after becoming Spartanburg County Health Department's assistant director in 1933.⁴⁰⁰ Assuming the directorship four years later, Sheriff became SC's first female public health officer.⁴⁰¹ In this role, she secured funding from the Milbank Memorial Fund for contraceptive research and established the first family planning clinic associated with a county health department in the nation.⁴⁰² Sheriff remained focused on women's and children's health throughout her career, as evidenced by her employment as well as her publications. She was particularly concerned with healthcare in her home state, and in 1933, she published "America's Women's Hospitals in South Carolina."⁴⁰³ The health of her fellow South Carolinians would remain her focus for the rest of her life.

Despite these successes, Sheriff recognized that she would not be able to duplicate the steps of the women doctors in the northeastern cities in which she had trained. A career in a women's medical school or a women's hospital was not possible without a concentration of women trained in medicine. The dispersed population of SC created additional challenges. Strict adherence to the tenets of scientific medicine was

400. Ibid.

401. Ibid., 83.

402. Ibid.

403. *Medical Review of Reviews* 39, no. 5 (1933): 209-212.

often impossible in a Southern rural context.⁴⁰⁴ Nonetheless, friends in the medical profession assured her that her clinics were successful and that “the people of the county think a lot of ‘Miss Sheriff’ alias ‘that woman doctor.’”⁴⁰⁵ Her particular distinction as a woman doctor as opposed to simply “doctor” is a reminder that she was leading the way in practicing medicine as a woman. Although people recognized her profession as a physician, they were unwilling to grant her the title of doctor, referring to her instead as Miss Sheriff. The title “Miss” brought with it the cultural expectations of a Southern lady; Sheriff could not just be a doctor, she was a woman doctor, and her sex could not be extricated from her profession.

Working among black farmers, isolated mountain families, and white mill workers during the Depression, Sheriff developed respect for some of the South’s most marginalized people.⁴⁰⁶ Sheriff was moved by the concern Black women had for their communities and recognized that many Black midwives wanted to become nurses but lacked the financial resources to attend nursing school in another state.⁴⁰⁷ In 1940 when Sheriff was hired as the assistant director of the State Board of Health’s Division of Maternal and Child Health, SC politicians were still unwilling to allocate state funds to health services for Blacks, but Social Security monies were available to fund more

404. Hill, “Dr. Hilla Sheriff,” 83.

405. John Fabian Busch to Sheriff, 24 April 1934, file 41, box 1, Sheriff Papers.

406. Hill, “Dr. Hilla Sheriff,” 83.

407. *Ibid.* South Carolina’s nursing schools would not accept Black students until the 1960s.

systematic midwife training.⁴⁰⁸ Thus, from 1940 to 1965, Sheriff institutionalized and modernized medical training for SC's midwives.⁴⁰⁹ According to Hill, "Sheriff and the medical women she supervised both improved maternal and child health and nurtured expectations of social change."⁴¹⁰ Furthermore, Sheriff was able to persuade White nurses to challenge social mores and serve Black patients.⁴¹¹ The status quo would not keep Sheriff from helping all of SC's citizens, and she expected the same of those with whom she worked.

Sheriff spent a considerable amount of time in schools seeing that schoolchildren were vaccinated and tested for infectious diseases. For example, she and Fraser James, Secretary of the Spartanburg County Tuberculosis Association, ran a series of tuberculosis health clinics to test students in that county.⁴¹² On a larger scale, Sheriff

408. *Ibid.*, 87.

409. *Ibid.*, 79.

410. *Ibid.*

411. *Ibid.*, 88.

412. "Plan Tuberculin Tests in Schools: Schedule for Annual Spring Clinics is Announced Here," *Spartanburg Herald* (Spartanburg, SC), February 15, 1934. At the time, tuberculosis was the leading cause of death in children under the age of ten.

influenced her community by writing articles about children's health for the local newspaper.⁴¹³

Sheriff valued the community as a whole, especially other professional women. She was a charter member of the Spartanburg Business and Professional Women's Club, organized March 2, 1934.⁴¹⁴ As one of very few women in her medical school class, she would have understood the need women had for such groups for support and networking opportunities.

Sheriff influenced medical students on an individual level. As one of the few female doctors in SC, she was a valuable source of information for them. A friend wrote to her: "One of the women interns wants to find out something about the A. W. H. Send me the address of A. W. H. in N.Y. so she can write to them."⁴¹⁵ She provided other women with a connection to hospitals in other states at a time when women had few networking opportunities.

413. E. g., "Importance of Child's Health Stressed Today: Child's Welfare Importance Recalled on Day Set Aside by Group," *Spartanburg Herald* (Spartanburg, SC), May 1, 1935.

414. "Local Club was Organized in 1934: Mrs. Richardson Came Here to Launch Group that Grew Steadily," *Spartanburg Herald-Journal*, (Spartanburg, SC), March 15, 1936.

415. John Fabian Busch to Sheriff, 28 July 1934, file 42, box 1, Sheriff Papers.

Additionally, Sheriff spoke to groups of college students. She addressed a large group on “Women in Medicine” at a special series of lectures at Converse College.⁴¹⁶ A year later she spoke about science at Congaree College. The College President hoped that Sheriff would inspire the young women to think about their futures.⁴¹⁷ Sheriff not only broke barriers herself, but was also a valuable resource to help younger women continue to advance women’s roles in society.

A Student Again

Sheriff obtained her Master’s in Public Health (MPH) from Harvard in 1937. Zerbst had provided her with ample encouragement, and he reminded Sheriff that SC needed individuals with an education in public health.⁴¹⁸ Her achievement was groundbreaking in many ways. Upon her arrival in Boston, Sheriff wrote to her parents: “As I may have written you – we have only four women in the class – that is the limit. One of the four is a Chinese girl from Peking. I *did* get a *Rockefeller Scholarship* of which I am very glad.”⁴¹⁹ Quotas for female students were not uncommon in the early twentieth century. Furthermore, race was often used as a reason to refuse to admit a student, so it is noteworthy that Sheriff had a classmate, a young woman named Yun Yu,

416. “Speakers Heard Here at College: Mrs. Phifer and Mrs. Kerr in Converse Vocational Talks Today,” *Spartanburg Herald* (Spartanburg, SC), May 2, 1935.

417. E. M. Gwathmey to Sheriff, 23 April 1936, file 45, box 1, Sheriff Papers.

418. Zerbst to Sheriff, 1 January 1937, file 47, box 2, Sheriff Papers.

419. Hilla Sheriff to Mary and John Sheriff, Wednesday October 1936, file 46, box 1, Sheriff Papers. (Emphasis in original.)

from China. This was progressive compared to institutions in SC that would resist integration for decades. However, the sexism was demonstrable.

Yun Yu provided a unique perspective on the treatment of women in the US. After completing her coursework, she wrote to Sheriff, “I am going to the commencement next Thursday since I am staying in Boston, but I shall be the only one who shall sit outside the graduation ground. I don’t see why they look down upon women in this so called democratic country!”⁴²⁰ Such unequal treatment of women did not fit with Yun Yu’s vision of a nation with democratic values.

After attending the commencement, she provided additional details: “No women students are allowed to join the procession so I have to go directly to my seat in Section Z, Row B with six other women graduates of Educational or business lines. After a few students from the School of Art gave their addresses either in Latin or English, degrees were granted to students of different schools. Nine of us from Public Health School Bautou, Cunningham, Frachre, Pulmeri, Perry, Douglas, Weissross, Long, and I. Of course they sat together while I sat in the corner for women students.”⁴²¹ To make matters worse, not only had she been segregated from the men during the ceremony, Yun Yu had to wait to receive her diploma because her name had been written as a man’s rather than as a woman’s.⁴²²

420. Yun Yu to Sheriff, 19 June 1937, file 48, box 2, Sheriff Papers.

421. Yun Yu to Sheriff, 24 June 1937, file 48, box 2, Sheriff Papers.

422. Ibid.

Subsequently, in order for Sheriff to become a member of the Harvard Club of Western SC, the organization first had to change its constitution and by-laws to include “persons” rather than “men.”⁴²³ Fortunately, she “was well greeted” at her first meeting.⁴²⁴ Before Sheriff wished to join, the Harvard Club had not had a pressing reason to use gender-inclusive language in its constitution and by-laws. Thus, Sheriff paved the way for other eligible women who wished to join in the future.

Sheriff was extremely involved in her work and community. She would become “the first female president of the South Carolina Public Health Association.”⁴²⁵ Although she had a deep passion for public health in her home state, Sheriff expressed concern about healthcare, and especially women doctors, all over the world. She traveled with *La Alianza Panamericana De Medicas*, or The Pan American Women’s Alliance.⁴²⁶ On one trip to Chile, women doctors from the Americas and the Caribbean presented on the problems women physicians faced.⁴²⁷

423. Sheriff to Zerbst, 18 April 1939, file 66, box 2, Sheriff Papers.

424. Ibid.

425. Whitten, “The More I Did,” 8.

426. Leonard, “Dr. Sheriff Triumphed”; and “Newsletter June 1955,” The Pan American Women’s Alliance, Travel, 1956, box 7, Sheriff Papers.

427. “Newsletter June 1955,” The Pan American Women’s Alliance, Travel, 1956, box 7, Sheriff Papers.

Sheriff would later explain how she did not think being a woman in a male-dominated discipline was difficult.⁴²⁸ Upon looking back, Sheriff believed that if it had been trying, she had not noticed.⁴²⁹ To describe her experience, Sheriff repeated what her friends had told her, that she had the best of both worlds: “I had their respect because I worked hard, but they didn’t forget I was a lady and expected everything Southern ladies expected then.”⁴³⁰ Sheriff not only broke barriers herself, but was an invaluable resource to help women of the younger generation continue to advance women’s roles in society.

428. Whitten, “The More I Did,” 8.

429. *Ibid.*

430. *Ibid.*

CHAPTER 6

SUMMARY AND DISCUSSION: A DEDICATED YOUNG WOMAN

Introduction

Focus of the Study

The purpose of the study is to record, explain, and understand how Hilla Sheriff navigated college and medical school at a time when women were frequently pigeonholed into certain fields (e.g., home economics, teaching). Further, the purpose of the study is to explore Sheriff's educational experience, her community, and her motivations. The following four research questions began this study:

1. What motivated Hilla Sheriff to pursue college and medical education in the 1920s?
2. What was Hilla Sheriff's experience in college and medical school?
3. How did individuals such as family members, friends, and faculty impact Hilla Sheriff's educational experience?
4. How did Hilla Sheriff impact other students' college and medical school experiences?

These questions are not listed in a hierarchy of importance but in the order in which the author addresses them. These questions provide direction to develop an understanding of how Sheriff navigated college and medical school. The fourth question recognizes Sheriff as an agent capable of initiating change.

Methodology

This qualitative study consists of a single biographical study. The author engages the lenses of historiography and historical biography. The researcher uses elements of both historiography and biography methodology. Qualitative methods are an obvious choice for the study since “qualitative research is pragmatic, interpretive, and grounded in the lived experiences of people.”⁴³¹ A qualitative approach is appropriate because the present study examines how Sheriff made meaning of her life while she was a college and medical school student in SC in the 1920s. The researcher chose to take a critical qualitative approach due to the likelihood that political and social contextual factors impacted the subject’s experiences.

Research Philosophy

The data for the present study are examined using elements of historiography and biography. This interpretive study is the researcher’s effort to recount the meaning the subject gave to the reality around her through the systematic identification of facts surrounding historical events. Further, the study is descriptive in that it documents the college and medical school experiences of the subject, Hilla Sheriff.

Sources of Data Collection

Examination of Sheriff’s school experiences was done through document review, specifically Brickman’s historical method.⁴³² The documents are those archived in the South Caroliniana Library. These primary documents were written while Sheriff was a

431. Marshall and Rossman, *Designing Qualitative Research*, 2.

432. *Research in Educational History*, 91.

student and fledgling doctor; they include letters written to her as well as her own letters and diary. Secondary sources about female physicians prior to World War II are included in the analysis.

Research Findings

The researcher criticized the source materials externally and internally, interpreted the documents, and hypothesized the relationship of the data according to Brickman's historical method.⁴³³ The result of the qualitative study is a rich description of a portion of an individual's life.⁴³⁴

Interpretations

The following paragraphs summarize the findings of the present study as related to the four major research questions and detail the accomplishments of the woman on which the study focuses.

The Motivation of Hilla Sheriff

To answer Research Question One: *What motivated Hilla Sheriff to pursue college and medical education in the 1920s?* a comprehensive look at Sheriff's history and background is necessary. Sheriff had aspired to be a doctor since she was a young girl, and she never faltered in that goal. Undoubtedly many children play at being a doctor without pursuing it as a career. What set Sheriff apart was her passion for curing and caring for others. Her goal was truly to rehabilitate injured chickens, not merely play at treating imaginary illnesses. Worthy efforts in their own right, activities such as

433. Brickman, *Research in Educational History*, 91.

434. Merriam, *Qualitative Research in Practice*, 5.

teaching Sunday School and doing philanthropic work at the mill merely foreshadowed what Sheriff would later accomplish as an adult.

Her faith played a significant role in her unwavering decision to become a doctor. Sheriff wrote in a journal about a time in high school when she was ill:

A sudden change came over me one morning. I woke up and my room seemed unusually light. A heavy burden had been lifted from my mind. God was so near me, and he seemed to say, “You shall be made well if you give your service trying to make others well. Take up medicine for there are many whom you can help.” Before that I had felt that I should never be able to do and go like other people. I was so happy that God was going to make me well once more, and give me the strength and opportunity of serving some of my fellow-men.⁴³⁵

Sheriff’s faith helped her get through challenging times, motivating her to persevere when medical school was difficult. She continued in her journal, “Now I have finished my first year of Medical College. I shall admit that some of the things I had done have not been easy – I could never have done them without my Father’s aid.”⁴³⁶ When Sheriff desired something, she pursued it passionately and whole-heartedly, giving it all of her energy, as demonstrated by her hard work throughout her life. Rather than letting challenges overwhelm her, she faced them directly.

Sheriff demonstrated a genuine passion for learning. She wrote in a paper for one of her undergraduate classes, “I was not satisfied with the narrow education obtained in

435. Hilla Sheriff journal, 21 July – 12 August 1923, box 5, Sheriff Papers.

436. Ibid.

high school. Therefore I wanted to come to college to enlarge and broaden my education,”⁴³⁷ indicating that she wanted to pursue education for the sake of learning. She felt that education would improve her overall life experience.

In addition to a better life experience, Sheriff recognized that college attendance was necessary for her to become a doctor: “Another reason for my coming to college was that it was necessary to do so in order to prepare myself for the practice of medicine, which I hope to do someday. In that progression one needs not only to have a knowledge of drugs and diseases, but he needs to have his mind broadened along other lines so as to be able to deal satisfactorily with different types of humanity with which he comes in contact.”⁴³⁸ Sheriff knew that as a doctor, she would need knowledge not only of diseases and their treatments, but also of her patients as individual people. She was very much aware that in the medical field she would interact with a wide range of people, and she looked forward to helping diverse groups. Sheriff’s college studies were not limited to the sciences that would directly prepare her for medical school; they also included subjects such as English and history, which would broaden her knowledge of the human condition, better enabling her to connect with her future patients.

Concluding her essay, Sheriff wrote, “For these three reasons then, first a desire to broaden my education, second, a sense of duty to my Creator and to my country, and third, the necessity of learning my profession, I came to college.”⁴³⁹ Once again, her faith

437. Sheriff, “Why I Have Come to College” c. 1920, box 5, Sheriff Papers.

438. Ibid.

439. Ibid.

in God continued to play a role, as she saw it as her duty to both Him and her country to attend college to develop her mind. Although she had a personal desire to broaden her education, she felt a sense of responsibility not only toward her future profession and patients, but also to her country and faith.

Of course, Sheriff endured some challenging times, but she ultimately remained motivated enough to pursue her goals of becoming a doctor. A driven child and then young woman, Sheriff preserved through personal struggles, including illness and self-doubt, to obtain her education. Afterwards, she continued to serve others in her local community, throughout the state, and on a larger global scale.

The Educational Experiences of Hilla Sheriff

In order to answer Research Question Two: *What was Hilla Sheriff's experience in college and medical school?* a close look at her letters and writings for school is necessary.

As a young student, Sheriff did things that one might expect of a young college student, including attending church and going on double dates set up by her roommate, Nell Saunders.⁴⁴⁰ Sheriff also put significant effort into her education, for example, writing, and rewriting papers for her English class. In chemistry, her laboratory notes included an explanation of errors, just as modern-day notes should: “Tho [*sic*] the thermometer was read as carefully as possible, an error may have been made in the reading.”⁴⁴¹ The background would serve her well in medical school.

440. Connors to Saunders, 29 March 1922, file 3, box 1, Sheriff Papers.

441. Writings, Notes, October 17, 1921, box 5, Sheriff Papers.

Sheriff left the College of Charleston after only two years to attend MCSC. She was a diligent student, dedicated to the study of medicine. Nonetheless, she still found time to write letters to friends and to socialize with other medical students. Sheriff went to matinees at the Victory Theatre, enjoyed nearby Folly Beach, and entertained dates in the Hickmans' parlor.⁴⁴² Although she had found time to enjoy herself during medical school, as an intern at the Hospital of the Woman's Medical College of Pennsylvania, Sheriff found "the idea of medical students having time to do fancy work, painting, etc. for a bazzar [*sic*]"⁴⁴³ strange. Perhaps she viewed such feminine crafts as less worthy of a future physician's time, particularly when compared with social activities. Of course, school was the first priority in her life.

Although the design of the academic building was outdated, it had the necessary space for teaching and learning to occur. For example, the chemistry laboratory purportedly had hoods with "gas, water, air pressure, and suction,"⁴⁴⁴ but there was no indication that students had any personal protective equipment to protect them from injury. Similarly, although the anatomy laboratory was supposedly "well ventilated, heated, and lighted,"⁴⁴⁵ due to the lack of air conditioning at the time, the cadavers probably decomposed quite rapidly and would have released a very unpleasant odor.

442. Sheriff to Zerbst, 14 October 1926, file 19, box 1, Sheriff Papers; and Zerbst to Sheriff, 27 May 1927, file 22, box 1, Sheriff Papers.

443. Sheriff to Zerbst, 6 December 1926, file 20, box 1, Sheriff Papers.

444. Medical College Catalog, 30-31, box 10, Sheriff Papers.

445. Medical College Catalog, 30, box 10, Sheriff Papers.

The struggle Sheriff had shaving her cadaver and subsequent ridicule she faced is a prime example of how her experience as a medical student was different from that of her peers simply because she was a woman. Her male classmates would have been proficient at shaving facial hair, but as a woman, Sheriff was inexperienced. Her lack of know-how, through no fault of her own, made her not only different but also a target for her classmates' jeers. The fact that a medical resident came to her aid suggests one of two things. One possibility is that the resident was genuinely kind and had compassion for Sheriff. Conversely, he may have felt that she was a helpless woman and would not be able to do the job herself. Sheriff's tone in her recollection of the incident suggests that she believes Burnside helped her out of kindness.

Despite some harsh treatment from her male peers, Sheriff believed that a coeducational program offered more advantages than a woman's medical college, and she preferred to graduate from co-educational MCSC rather than a single-sex institution.⁴⁴⁶ The inconsiderate treatment from her peers was not uncommon for female medical students at the time, particularly in the South. Sheriff knew that she was not alone in suffering embarrassment from male medical students. Connors told her of a University of Georgia co-ed who was mistreated but led "her classes by conscientious endeavor."⁴⁴⁷ This woman was placed on an ideological pedestal, expected to be above the behavior of the men in her classes. Sheriff was fortunate to have the benefit of two other female classmates and was even partners with a woman in anatomy lab. Nonetheless, it is clear

446. Sheriff to Zerbst, 28 November 1926, file 20, box 1, Sheriff Papers.

447. Connors to Sheriff, 15 September 1922, file 6, box 1, Sheriff Papers.

that because of her gender, Sheriff received unjust treatment. Unfortunately, such discriminatory treatment continued in subsequent years.

Given her awkward attempt to shave her cadaver, it was logical that Sheriff would hide her fear of the live frogs in physiology in an attempt to avoid another embarrassing episode. Most of the time this tactic worked for her, and her laboratory partner obtained their frog. Unfortunately, one day the professor singled Sheriff out to obtain the frog.⁴⁴⁸

More humorously, in her second year, Sheriff's experience differed from that of a man's because she could not slip out of class early, unnoticed. As just one of many, a male student could slip out of class without being noticed. In contrast, as one of only three women, Sheriff's absence would have been more conspicuous, particularly given the stark difference in attire between men and women at the time.

The dynamic between men and women becomes particularly pronounced when the medical students began examining patients under the supervision of practicing physicians. At the end of her second year, Sheriff was assigned to work in an eye clinic with Zerbst, whom she was dating. The incident sheds light on the lack of boundaries between student and supervising physician in the 1920s. Although Sheriff and Zerbst had begun dating before she began working in his office, nothing seems to have been done to prevent the couple from working together. Thus, Zerbst held incredible power over Sheriff in this relationship, whether he exercised it or not.⁴⁴⁹

448. See Research Question #3.

449. This type of relationship is strictly forbidden in medical schools today.

Overall, Sheriff seemed to enjoy her third year at MCSC. At the beginning of the academic year she wrote to Zerbst:

We met Dr. Beech in Pediatrics this afternoon. He kept us until ten minutes after six – but I learned lots of things about babies. I made a physical on a rachaeitic [*sic*] and syphilitic baby. Dr. Beech showed us several new cases this afternoon. I like him right well, but he is a great tease. . . . I have several things to study tonight – obstetrics, Lobar Pneumonia, Typhoid Fever, and some Pediatrics. I am not going to study very late tonight for I'm sleepy. I have until eleven thirty in the morning to study. Tuesday is my easiest day.⁴⁵⁰

Although she had many things to do, Sheriff felt that she had enough time to accomplish everything, even non-essential tasks such as seeing what new medical students were doing. She did not seem to mind long classes because she was learning. Likewise, the prospect of studying several topics left her unfazed.

Sheriff's recollection of a house call to deliver a baby illustrates how the medical students' living conditions compared to those of some of their patients. While medical students lived in residences with telephones, at least some of their patients relied on others to contact medical providers for them. However, Sheriff and other students were not living in luxury. During the day they could take a streetcar to patients' homes, but at night after the streetcars stopped running, the students had to walk. Thus, regardless of urgency, medical students did not have the ability to get to a house call in an expeditious

450. Sheriff to Zerbst, 20 October 1924, file 14, box 1, Sheriff Papers.

manner – it simply depended upon how far away a particular medical student lived from a patient’s home.

Once Sheriff was called to return to a delivery when a mother thought she was giving birth to a second baby, but Sheriff told the caller to send for the other medical student, who lived closer to the patient.⁴⁵¹ When her classmates found out, they teased Sheriff for not knowing there was a second baby, even though she had not been the one in charge of the delivery. The male medical students saw Sheriff as the less capable medical practitioner. They had assumed that she had been the one who had made a mistake, and they even refused to accept her clarification that the man with whom she had been working was responsible for the delivery. They later learned that there had been no second baby, but in her retelling of the incident, Sheriff did not mention any of her peers apologizing for their incorrect assumption.

At the end of their fourth year of medical school, students took exams. Sheriff recalled everyone joking with each other to hide their fears as they waited for their grades to be posted.⁴⁵² Perhaps some of the ridicule the men had aimed at Sheriff previously had been their way of coping with the pressure and stress. Of course, that does not excuse the men’s actions. Nonetheless, by the end of the four years these classmates had accepted Sheriff as a peer. Sheriff’s classmates shared their joy with Sheriff once one of the professors posted the list of those who had passed on the board. Sheriff later recalled, “They whooped, they hollered, and several danced with me. Our celebration continued

451. Sheriff as told to Plyler, “Young Lady,” 6.

452. Ibid.

for hours.”⁴⁵³ The joy of passing their final exams seems to have been more important than any negative feelings a male student may have had toward Sheriff due to her gender.

Individual Relationships

Research Question Three: *How did individuals such as family members, friends, and faculty impact Sheriff’s educational experience?* is addressed in the section below.

The thread of the “women’s sphere” and traditional roles for women is woven into the personal letters Sheriff received throughout the years. Sheriff’s parents thought she would get married before she finished a year of medical school. Her parents, as well as her fiancé, George “Wattie” Connors, who praised her cooking skills, seemed to put Sheriff on this ideological pedestal. Even her future husband, Henry Zerst, confessed that sometimes he wished Sheriff were a schoolteacher instead of a doctor. Zerst’s occasional desire for Sheriff to have a less demanding profession was reflective of the fact that as women began working as professionals, many did so in the education field, while few went into medicine.⁴⁵⁴ Together, this is an exemplar of how “man’s image of women changed more slowly than women’s views of themselves.”⁴⁵⁵

Family

The vast number of letters Sheriff exchanged with her friends and family members not only provided a unique view into Sheriff’s life but demonstrated the importance Sheriff placed on these relationships. Despite her busy school schedule,

453. Ibid.

454. Scott, “Southern Lady,” 124.

455. Ibid., 210.

Sheriff regularly wrote letters to significant people in her life. In return, she received countless missives.

Most familial influence came from her parents. One summer as a medical student, Sheriff reflected in a journal about telling her parents she had decided to study medicine: “They were very much surprised at such a statement from me, and gave it little thot [*sic*] as they deemed it only a fancy that would pass away the next day.”⁴⁵⁶ Even when they realized that Sheriff truly did want to become a doctor, her parents “said that I should never be physically strong enuf [*sic*] to undertake such a course.”⁴⁵⁷ This statement suggested that Sheriff’s parents thought that, because of her gender, she was too weak to become a doctor.

Sheriff’s parents clearly held to the belief in the concept of the woman’s sphere, where a woman is compassionate and is responsible for tasks such as the moral upbringing of children. Sheriff’s parents wanted to place her on the ideological pedestal of the inside of the Southern home, viewing her potential as a housewife rather than a professional doctor. They may have thought that perhaps she was more suited to a more traditionally feminine job such as school teacher, like Sheriff’s sister Ralda. What is notable is that in spite of their doubts about the likelihood of her becoming a doctor, they did not attempt to dissuade Sheriff from becoming a physician.

Even so, the lack of full emotional support from her parents did impact the duration and timing of Sheriff’s education. Sheriff had no income of her own with which

456. Hilla Sheriff journal, 21 July – 12 August, 1923, box 5, Sheriff Papers.

457. *Ibid.*

to pay for either college or medical school. She relied on her parents to pay for her education. Although her parents' emotional support was ambiguous, Sheriff remained close with her family. Thus, even knowing that they had had doubts, Sheriff felt a need for some connection with her family.

Faculty

At the time, Sheriff attended medical school, all of the faculty members at MCSC were male. Sheriff had no female doctors as role models or mentors during her time in medical school. While some of the male faculty treated Sheriff kindly and with respect, others singled her out as a woman.

The reference to W. F. R. Phillips as “Dad” Phillips in several letters strongly suggested that students respected him as a kindly father-like figure. Phillips truly seemed to want what was best for each student. In one of his letters to Sheriff, he recalled how he tried to convince Sanders to complete medical school before marrying: “From what she had told me and what she wrote me prior to her marriage, I had conceived an unfavorable opinion of [her future husband] as a man. I endeavored to persuade her to get through her medical course first. But fate of infatuation decreed otherwise.”⁴⁵⁸ He stood out as an individual going against societal norms, urging a woman to postpone marriage to do what is best for her education and career. In concert, the correspondence demonstrated how Phillips was well-liked and trusted by his students, even if they did not always take his advice. That he and Sheriff continued to correspond after her graduation validated a mutual respect between the two individuals.

458. Phillips to Sheriff, 1 January 1934, file 41, box 1, Sheriff Papers.

Unfortunately, Sheriff's friendly relationship with Phillips was exceptional for its congeniality. Sheriff believed that Bowers had assigned a contagious syphilis patient to her purposefully, implying that he had done so maliciously. If Sheriff was correct, and his intent was unkind, it was likely because of Sheriff's status as a woman. Sheriff's willingness to stand up for herself by refusing to complete an assignment demonstrated her refusal to be bullied by others. That she was willing to take the risk of failing the course by putting her safety first reveals the value Sheriff saw in herself.

Like Bowers, van de Erve singled out Sheriff for a task. There seems to be no reason for van de Erve to dictate which student obtained the frog for each pair. The fact that he watched Sheriff obtain the frog suggests that he was particularly interested in how she would handle the situation. Thus, Sheriff was probably correct in thinking that van de Erve had noted her fear and wanted to "break" her.

Although Sheriff faced the male professors and ultimately passed her classes, one of her female classmates was not so fortunate. At the end of her final academic year, Sheriff wrote to Zerbst,

I was very much surprised Monday morning when I had a letter from Clara [Stewart] saying she "flunked" in three subjects, Minor Surgery, Physiology, and Pharmacology. She made B's on the other subjects. She thinks Van de Erve did it on account of his son, Jack, and influenced the others. Do you think he would do such? She heard that "Vandy" got up at the Sophomore faculty meeting and said "Miss Stewart is just a play thing – she never has a serious thought." [George]

Mood and Martin said they graded a student according to the work done and not from personal opinion.⁴⁵⁹

Language attributed to van de Erve is demeaning toward Stewart as a woman, reducing her to a mere amusement for others. Although the other two professors insisted that they assigned grades based on student work, the grades became suspect with the accusation that van de Erve had spoken ill of Stewart at a faculty meeting.

Sheriff did not find it unthinkable that a professor would fail Stewart for a personal reason. Nonetheless, Sheriff did not take Stewart's side blindly, despite her sympathy: "I surely am sorry for Clara [Stewart], I know how much she studied, but I do not know how much she accomplished. She said she was going back and finish, but I don't want her to have to be in the class with one of those coeds, especially after having failed, for life will be unpleasant."⁴⁶⁰ Sheriff seemed to know Stewart's habits to know that she studied, but yet she doubted how much Stewart had learned. However, more than sympathizing with Stewart's failure, Sheriff seemed especially concerned about Stewart returning and having to face her male classmates. As a woman, she was keenly aware of how a female medical student was treated, and presumably, Sheriff imagined that it would only become worse for Stewart after failing three courses.

Although he found it difficult to believe that a van de Erve would fail a student as part of a personal vendetta, Zerbst provided the additional insight that male students of

459. Sheriff to Zerbst, 16 June 1926, file 17, box 1, Sheriff Papers. Jack van de Erve was in the MCSC class below Sheriff and Stewart.

460. Ibid.

less academic caliber than Stewart had been passed. He also questioned the source of Stewart's information, but he acknowledged that regardless of exactly how or why it happened, it was peculiar that Clara failed three classes. If van de Erve did speak at a faculty meeting and managed to persuade Mood and Martin to fail Stewart, there were several faculty members willing to provide her with the, albeit minimal, support of a recommendation letter. However, there was no evidence that Phillips or any of the other professors made any attempt to ensure that Stewart received fair and equal treatment from van de Erve. Thus, although Stewart had the support of other faculty members, at least one of whom knew that van de Erve was being vindictive toward Stewart, she had no recourse from the MCSC administration.

Even if some of the faculty at MCSC treated female medical students unkindly, they must not have questioned their motives for attending the medical school. This is not to excuse some of the things they did to Sheriff and the other women, but it shows that they, with perhaps the exception of van de Erve, viewed women as independent agents capable of making their own decisions. The doctors at the State Board Examination repeatedly asked Sheriff why she had become a doctor, suggesting that those doctors held more tightly to the conceptual framework of the woman's sphere where the proper place for a woman was in the home, and a woman would not desire to work.

Friends

Sheriff had a large support network of friends with whom she regularly corresponded during college and medical school. She maintained an active social life through college and medical school, as demonstrated by the letters she received. Upon her own graduation, Sheriff would later reflect that, while she was anxious to care for her

own patients, she was sad to leave all the friends she had made during the six years she had spent in Charleston.⁴⁶¹

Childhood friend Ray Allan Byrd alternated between supporting Sheriff's pursuit of becoming a doctor and discouraging her from following her dream. Just months before Sheriff began her first semester at the College of Charleston, Byrd wrote, "I am glad women have the opportunity of taking medical training on an equal basis with men. In a time of pain I know nothing is more soothing than the touch of a woman's hand."⁴⁶² In one paragraph, Byrd went from approval of women's equal opportunity for an education to placing women in the stereotypically feminine caregiver role. This early support was likely significant for Sheriff since her parents expressed doubt that she would become a physician. Despite his placement of women on a pedestal, Byrd provided a positive influence on Sheriff in that he assumed that she would go to medical school.

Many of the letters Sheriff received were from George "Wattie" Connors. Although his letters appeared to be reassuring, the writing was, in some ways, also demeaning. Suggesting that Sheriff not take exams very seriously devalued them, and, in turn, the hard work Sheriff had done thus far. Connors wrote of sharing ambitions, but in doing so, he claimed a share of Sheriff's accomplishments, referring to her successes as his own successes as well. Although he commended her decision to pursue pediatrics as unselfish, Connors continued to write about how he will be observing her efforts and

461. Sheriff as told to Plyler, "Young Lady," 6.

462. Byrd to Sheriff, 4 June 1918, file 1, box 1, Sheriff Papers.

congratulating her in her noble career. He seemed to have been thinking more about the role he would play in Sheriff's life than about what she would be doing.

Throughout his letters Connors made references to Sheriff's housekeeping abilities. These references to her housekeeping strongly indicated that Connors believed in the concept of the woman's sphere; he would have preferred a woman who intended to stay in the home rather than pursue a career as a doctor. Connors was determined that Sheriff would not attend medical school simply because he did not wish for her do so, illustrating his belief that women should not pursue goals without approval from their male counterparts. Not only did he confess that he did not want her to go to medical college, but he also began attempting to change her mind about her decision. This suggested that he believed that his own opinions about Sheriff's education were more important than Sheriff's thoughts about her own life goals.

Although Connors claimed he did not want to interfere with her plans, that was exactly what he was doing by asking Sheriff to remain at the College of Charleston. "Hilla, could you return to the College of Charleston? Of course, my dear, sweet love, I do not want to frustrate your plans for the Medical College, and I *would* never think the less of you if you did attend the M[edical] C[ollege] next year, for I have such a supreme confidence in your judgement. But, if it is not contrary and detrimental to all your fondest ambitions, I should like for you to continue your academic studies."⁴⁶³ While insisting that he trusted her judgement, he asked her to postpone her medical education under the guise of continuing her college studies. Clearly Connors did not have faith in Sheriff's

463. Connors to Sheriff, 25 July 1922, file 4, box 1, Sheriff Papers.

judgment, or, if he did, simply disregarded what Sheriff thought was best for herself, implying that, as a man, he knew better. He wrote as if he was competing with medical school for Sheriff's attention.

Once Sheriff began medical school, Connors shifted his concern to how the men would behave around Sheriff and other female students:

Darling, you don't know how very glad I am that you have Miss Townsend for a dissecting partner. I am only too aware of the fact that wherever there is a crowd of young men gathered together there is bound to be someone in the party who is not capable of being a gentleman. I know that boys are likely to play a practical joke at the expense of the girls, and I should certainly hate to see you imposed upon. I, too, feel sorry for the other co-ed without a partner.⁴⁶⁴

His concern here appeared to be genuine, although paternalistic. Connors began to reassure Sheriff that he loved her for her determination, writing, "Please don't get discouraged."⁴⁶⁵ He seemed to have cared very much for Sheriff, and he may have begun to accept her medical training, at least for a time.

Their engagement would suggest that the misgivings Connors had had about Sheriff's pursuit of a career in medicine had been ameliorated. However, he may have unreasonably expected Sheriff to always maintain a rosy outlook on life, without any serious concerns. Although it may seem that Connors wrote out of concern for Sheriff, it was likely that his primary concern was that she was focusing on medical school rather

464. Connors to Sheriff, 1 October 1922, file 7, box 1, Sheriff Papers.

465. Connors to Sheriff, 13 December 1922, file 8, box 1, Sheriff Papers.

than writing to him. His urging her not to work too strenuously indicates that he did not fully understand or embrace the dedication Sheriff had for completing her medical education, perhaps indicating that, as his fiancé, she should give him the attention he felt he deserved.

His sympathy when Townsend left MCSC was perhaps enhanced by his feeling that Sheriff was forsaking him for medical school, something in his mind a proper fiancé would not have done. It is somewhat surprising that Connors would express regret that a woman would drop out of medical school when he had so staunchly opposed Sheriff's attendance. Perhaps he viewed Townsend as a form of support and protection for Sheriff. Alternatively, Townsend's enrollment at medical school may not have perturbed him because he was not romantically involved with her.

After a year, Connors genuinely acknowledged the trials that Sheriff faced and the determination she exhibited. He was confident that Sheriff had passed her courses and acknowledged the difficult times she had experienced. Unfortunately, this apparent esteem of Sheriff's education and career goals was short-lived. Sheriff's engagement and relationship with Connors ended because he was unable to accept her as the professional she wished to be. He wrote to her, "As I have often frankly told you, your Medical Course does not harmonize with my ideals of a woman."⁴⁶⁶ Connors could not reconcile Sheriff's career choice with his view of a wife or woman.

Zerbst had graduated from MCSC before Sheriff had even matriculated. Zerbst recognized the challenges that women faced as doctors. Working as an Eyes, Ears, Nose,

466. Connors to Sheriff, 19 January 1924, file 13, box 1, Sheriff Papers.

and Throat (EENT) specialist in Washington, D. C., he wrote, “We are going to have a woman intern at this floor, a Dr. Berger – a big mannish woman from Emergency Hosp. I guess she’ll have a hard time with these nurses – they are talking already about how they dislike her – the interns here don’t want her either, but she’ll get along all right – if she does her work, and doesn’t try to beat out on account of sex.”⁴⁶⁷ Although Zerbst exhibited sexism by suggesting that a woman doctor might try to use her sex as an excuse to avoid working, exhibiting his male-centric bias, he at least was receptive to the idea of working with a woman. Nonetheless, this was just one of many examples of Zerbst’s censure of a woman who was not feminine. In this way, he was like Connors expecting a woman to exhibit feminine traits.

Even within the medical field, Zerbst identified particular areas that would be ideal for women. When he learned that Children’s Hospital would no longer accept women interns, he wrote to Sheriff, “Personally, I think a hospital of that type should have a majority of women interns.”⁴⁶⁸ His views are in line with the commonly held belief that women should remain within the woman’s sphere of influence, that is, working with women and children, even in the medical field. Additionally, Zerbst thought that fields that did not require “running around” or work at night were good for women.⁴⁶⁹

467. Zerbst to Sheriff, 18 September 1924, file 14, box 1, Sheriff Papers.

468. Zerbst to Sheriff, 16 April 1927, file 22, box 1, Sheriff Papers.

469. Zerbst to Sheriff, 30 September 1927, file 24 box 1, Sheriff Papers.

Nonetheless, Zerbst seemed to have been genuinely glad that Sheriff had done well in all of her MCSC courses, reinforcing his own congratulations with a reminder that Phillips also thought highly of Sheriff. While recognizing that the professors had absolute control over which students passed and graduated, Zerbst also placed responsibility on the student to be serious about academic work. When he looked toward the future, Zerbst saw Sheriff going into medical practice or an internship and using her medical degree, illustrating his more progressive view of women for the time period. Sheriff was eager to continue her training and had not found the encouragement she needed from her family, but Zerbst provided her with the emotional support she needed. Furthermore, he demonstrated confidence in Sheriff by assuring her that he knew she would be able to pass the State Board Examination.

Zerbst wrote that he loved Sheriff not for her body or for her mind, but simply for being her. He wrote, "I don't give a damn about your degrees or your position but the fact that you are Hilla, and when I'm with you I experience a sense of happiness and contentment . . . due to the fact that you have a mind and will of your own."⁴⁷⁰ He, unlike Connors, appreciated her independence and individuality. Although Connors had tried to love Sheriff despite her position, Zerbst loved her regardless of it.

Undoubtedly, Zerbst maintained an expectation of femininity of women, despite his forward-thinking view of women as physicians. He clearly considered a woman's appearance to be important. More than once Zerbst returned to the idea of Sheriff pursuing a more traditionally feminine career that would allow her to focus more

470. Zerbst to Sheriff, 24 November 1937, file 49, box 2, Sheriff Papers.

attention on him. He was not immune to the frustrations that came with being in a relationship with a doctor. However, unlike Connors, Zerbst was able to love Sheriff as a whole person, including her profession, although it brought additional challenges.

Zerbst truly wanted Sheriff to have a career but worried that she was keeping herself from having a fulfilling personal life as well. Despite Zerbst's progressive attitudes toward women, he was still influenced by the ideas of male superiority that permeated Southern culture at the time.

Hilla Sheriff's Impact on Others

Research Question Four: *How did Sheriff impact other students' college and medical school experiences?* can be answered by considering that Sheriff's college and medical education were a substantial personal step for her as well as influential on others.

Despite or perhaps because of the fact that she was one of only three women to graduate from her medical school class, Sheriff was an agent capable of initiating change. In the 1920s, much change was needed. There were still no female professors at the medical school, and there was very little in way of a support system for female students. Sheriff was a member of the Asklepiads, an organization designed to bring together female medical students at MCSC.⁴⁷¹ A discussion forum open only to women, the Asklepiads members encouraged each other in their medical studies.⁴⁷² Sheriff's early

471. Constitution of Asklepiads, Article I, Section I, file 104, box 3, Sheriff Papers.

472. Constitution of Asklepiads, Article I, Section I and Article II, Section I, file 104, box 3, Sheriff Papers.

involvement with women's organizations set her on a path to becoming an influential public health leader.

As a newly minted doctor, Sheriff was a novelty to locals. She did not seek attention as a female physician, she merely wanted to put her skills to use. Sheriff wanted to keep herself busy and wanted to play an active role in providing health care to the local community. She did not shy from working independently.

Approximately eight months before she completed her training in Philadelphia, she began contemplating where she would practice: "There are some good openings here for women Drs. – and the way is already paved for them for there are so many around here. I don't, so far, care enuf [*sic*] for Penn. to want to stay in this state – and I think it might be interesting to pave the way for women Drs. elsewhere."⁴⁷³ However, Sheriff was naïve in thinking that women physicians in PA had the way paved for them simply because there were several female doctors in the state already. Women physicians still faced discrimination in the hospitals and clinics. Nonetheless, Sheriff should be lauded for carving out a new road for women as she continued her training at another hospital before returning to SC. She would pave the way for women doctors, and she would do so in her home state of SC. The health of her fellow South Carolinians would remain her focus for the rest of her life.

According to Hill, "a gospel of nutritional health spread by Southern women proved to be remarkably successful among a population that regarded both domesticity and piety as essential female traits and suspected 'outside' experts. Observers noted the

473. Sheriff to Zerbst, 21 March 1927, file 21, box 1, Sheriff Papers.

mountain people's curiosity on seeing 'that lady doctor.'"⁴⁷⁴ Sheriff's status as a woman was invaluable as she fulfilled the expectation of a lady upon a pedestal, and yet her status as a doctor was an oddity to people. Friends in the medical profession assured her that her clinics were successful and that "the people of the county think a lot of 'Miss Sheriff' alias 'that woman doctor.'"⁴⁷⁵ Her particular distinction as a woman doctor as opposed to simply "doctor" was a reminder that she was leading the way in practicing medicine as a woman. Although people recognized her profession as a physician, it seemed that they were unwilling to grant her the title of doctor, referring to her instead as Miss Sheriff. The title "Miss" brought with it the cultural expectations of a Southern lady; Sheriff could not just be a doctor, she was a woman doctor, and her sex could not be extricated from her profession.

As a medical student, Sheriff and her peers had to find their way to patients' homes to deliver babies. Access to medical care was limited for many of the State's most marginalized people. Although SC politicians were unwilling to allocate funds for health services for Blacks, as the Assistant Director of the State Board of Health's Division of Maternal and Child Health, Sheriff used Social Security money to systematize midwife training.⁴⁷⁶ Sheriff was able to persuade White nurses to challenge social mores and serve Black patients. The status quo would not keep Sheriff from helping all of SC's citizens, and she expected the same of those with whom she worked.

474. Hill, "Dr. Hilla Sheriff," 82.

475. John Fabian Busch to Sheriff, 24 April 1934, file 41, box 1, Sheriff Papers.

476. Hill, "Dr. Hilla Sheriff," 87.

Although she was trained as a pediatrician, Sheriff did not limit herself to working for the youth. As one of very few women in her medical school class, she understood the need women had for professional women's groups for support and networking opportunities. She provided young women doctors with a connection to hospitals in other states at a time when women had few networking opportunities. It is clear that Sheriff not only broke barriers herself, but was also a valuable resource to help younger women continue to advance women's roles in society.

Sheriff received one of the four spots allotted to women in Harvard's public health program. Such quotas for female students were not uncommon in the early twentieth century. Furthermore, race was often used as a reason to refuse to admit a student, so it was noteworthy that Sheriff had a classmate from China. This unequal treatment of women did not fit with Yun Yu's vision of a democratic nation. Subsequently, in order for Sheriff to become a member of the Harvard Club of Western SC, the organization first had to change its constitution and by-laws to include "persons" rather than "men."⁴⁷⁷ Before Sheriff wished to join, the Harvard Club had not had a pressing reason to use gender-inclusive language in its constitution and by-laws. Thus, Sheriff paved the way for other eligible women who wished to join in the future.

Sheriff would later explain how she did not think being a woman in a male-dominated discipline was difficult.⁴⁷⁸ Upon looking back, Sheriff believed that if it had

477. Sheriff to Zerbst, 18 April 1939, file 66, box 2, Sheriff Papers.

478. Whitten, "The More I Did," 8.

been trying, she had not noticed.⁴⁷⁹ To describe her experience, Sheriff repeated what her friends had told her, that she had the best of both worlds: “I had their respect because I worked hard, but they didn’t forget I was a lady and expected everything Southern ladies expected then.”⁴⁸⁰ Sheriff not only broke barriers herself, but was an invaluable resource to help women of the younger generation continue to advance women’s roles in society.

Limitations of the Study

As Kendall wrote, the “paper trail ... is never continuous or complete. The more remote in time the subject is, the more gaps there will be.”⁴⁸¹ Personal letters make up a large portion of the data set, but it is evident that not all letters were kept. Nonetheless, the gaps in correspondence caused few problems. As Sheriff gained status in the local communities, more reporters interviewed her about her work and education for newspaper and journal articles; Sheriff saved those articles about herself.

Implications

Sheriff’s parents clearly held to the belief in the concept of the woman’s sphere, where a woman is compassionate and is responsible for tasks such as the moral upbringing of children. What is notable is that in spite of their doubts about the likelihood of her becoming a doctor, they did not attempt to dissuade Sheriff from becoming a physician. By allowing her to pursue her own interests as a child and into adulthood, Sheriff’s parents raised their daughter to become an independent and educated woman.

479. Ibid.

480. Ibid.

481. Kendall, “Walking the Boundaries,” 41.

Although her family had doubts, Sheriff had the benefit of being a privileged white woman in SC.

What set Sheriff apart was her passion for curing and caring for others. While many children may play at being a doctor, Sheriff's goal as a child was to truly heal injured chickens. Worthy efforts in their own right, activities such as teaching Sunday School and doing philanthropic work at the mill merely foreshadowed what she would later accomplish as an adult. Sheriff demonstrated a genuine passion for learning. A driven child and then young woman, Sheriff preserved through personal struggles, including illness and self-doubt, to obtain her education. Later, as an adult, she would serve as a role model for other young women, speaking to groups of students and putting aspiring women doctors in contact with the AWH. She taught community members about nutrition. The knowledge she had gained was not for herself, it was to pass on to others. This broad work with the community begs the question: Was Sheriff aware of settlement houses? If so, was she influenced by the settlement house movement?

Sheriff had no female mentors during medical school, and as a woman, she had limited options for internships, as many hospitals either did not accept women interns or limited their numbers. Although Zerbst provided her with some assistance, Sheriff found a woman who could help her much more. She wrote Zerbst, "I met Dr. Rosa Gantt in Spartanburg. She is an Eye, Ear, Nose, and Throat specialist and does a good practice. She was the first woman graduate M.C.S.C. She was real nice to me – called me up this morning to come by to see her. She is going to write a little to Philadelphia for me, for

she knows the Dean and several other Drs. there personally.”⁴⁸² Hence, Sheriff did not find someone who could help her make connections in the medical field until after she had graduated. Gantt had the personal connections at the women-run hospitals, unlike Zerbst, whose connections were at hospitals that sometimes refused to hire women as interns. Gantt would continue to help Sheriff by inviting her to events.⁴⁸³ Sheriff’s connection to Gantt would prove to be a valuable one.

Sheriff’s early involvement with women’s organizations such as the Asklepiads set her on a path to becoming an influential public health leader. She would pave the way for women doctors, and she would do so in her home state of SC. The health of her fellow South Carolinians would remain her focus for the rest of her life. Although she was trained as a pediatrician, Sheriff did not limit herself to working for the youth.

When she was the Assistant Director of the State Board of Health’s Division of Maternal and Child Health, Sheriff was able to persuade White nurses to challenge social mores and serve Black patients. The status quo would not keep Sheriff from helping all of SC’s citizens, and she expected the same of those with whom she worked. It is clear that Sheriff not only broke barriers herself, but was an invaluable resource to help women of the younger generation continue to advance women’s roles in society.

Suggestions for Future Research

It is difficult to make generalizations based on the study of one woman. However, evidence of what helped Sheriff navigate college and medical school could be used to

482. Sheriff to Zerbst, 11 June 1926, file 17, box 1, Sheriff Papers.

483. Sheriff to Zerbst, 1 November 1926, file 20, box 1, Sheriff Papers.

guide future research. Those factors – emotional and financial support, a network of friends and peers, mentors – could be further studied in contemporary college and medical students. Alternatively, Sheriff’s life could be further analyzed through a feminist lens.

There are other women who went to medical school in the early 20th century. There are women who became physicians in SC, other Southern states, and across the nation at a time when few women worked outside the home unless it was absolutely necessary. They have stories that should also be told.

Times have changed. Today, colleges and medical schools are open to men and women, Black and White. Nonetheless, students still need advocates and support systems as they proceed through the education system. But financial barriers persist. While Sheriff’s parents paid for her education, many would-be students were and are not so fortunate. Even Sheriff left college after only two years to begin medical school out of fear that her parents would stop paying for her education. Therefore, it is imperative that fellowships, grants, and scholarships are available to ensure dedicated students have access to higher education.

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