

Memorias

2

MUJERES EN LA CIENCIA  
Y LA TECNOLOGÍA:  
HISPANOAMÉRICA Y EUROPA

María Luisa Rodríguez-Sala  
Judith Zubieta García  
*Coordinadoras*

INSTITUTO DE INVESTIGACIONES SOCIALES  
UNIVERSIDAD NACIONAL AUTÓNOMA DE MÉXICO



UNIVERSIDAD NACIONAL AUTÓNOMA DE MÉXICO  
México, 2005

CP-6-24

Este libro fue sometido a un proceso de dictaminación de acuerdo con las normas establecidas por el Consejo Editorial de las Colecciones del Instituto de Investigaciones Sociales de la Universidad Nacional Autónoma de México.

Primera edición: 2005

MUJERES EN LA CIENCIA Y LA TECNOLOGÍA: HISPANOAMÉRICA Y EUROPA  
D. R. © 2005. Universidad Nacional Autónoma de México  
Ciudad Universitaria, 04510. México, D. F.

INSTITUTO DE INVESTIGACIONES SOCIALES

Derechos exclusivos de edición reservados para todos los países de habla hispana.  
Prohibida la reproducción parcial o total por cualquier medio sin la autorización escrita de los editores.

Cuidado de la edición: HORTENSIA MORENO y LILI BUJ

IMPRESO Y HECHO EN MÉXICO

ISBN 970 32 2343-5

## INDICE

Presentación .....	9-21
MARÍA LUISA RODRÍGUEZ-SALA y JUDITH ZUBIETA GARCÍA	

## AMÉRICA LATINA

Gender in Venezuelan Science (1990-1999) .....	25-42
HEBE VESSURI y MARÍA VICTORIA CANINO	
Abriendo brecha: la educación científica de la mujer en México .....	43-63
JUDITH ZUBIETA GARCÍA y PATRICIA MARRERO NARVÁEZ	
Científicas pioneras en la investigación mexicana en salud .....	65-74
JUDITH LICEA DE ARENAS, JAVIER VALLES y JUDIT ARENAS-LICEA	
La primera etapa en la profesionalización de la mujer en la antropología y la arqueología en México .....	75-81
CECILIA HAUPT	
El discurso de la ciencia: líneas de investigación de las físicas mexicanas .....	83-93
VIRGENIA LÓPEZ VILLEGAS	
Disappearing Women Scientists in Latin America .....	95-103
MARGARET W. ROSSITER	
Margrete Heiberg-Bose: a Danish chemist pioneer of physics in Argentina .....	105-116
CECILIA VON REICHENBACH	

## EUROPA

- Female professional identities and Spanish women  
doctors in late Francoism (1965-1978) . . . . . 119-128  
TERESA ORTIZ-GÓMEZ, ANA DELGADO,  
DOLORES SÁNCHEZ y ANA TÁVORA
- To be a female student of science at a Calvinistic  
University 1930-1960. Some remarks and results . . . . 129-145  
IDA H. STAMHUIS y BRIGITTE HERTZ

## Presentación

MARÍA LUISA RODRÍGUEZ-SALA  
JUDITH ZUBIETA GARCÍA

Hoy en día, se ha vuelto un lugar común hacer referencia a los estudios de género, aunque poco se diga de su naturaleza y se profundice todavía menos en los factores que hacen de la inequidad una característica lacerante en todas las sociedades modernas. Infortunadamente, la falta de equidad viene acompañada de otra carencia: la de estudios rigurosos que la aborden a profundidad en los muy diversos terrenos donde se manifiesta. El ámbito de la ciencia y la tecnología (C+T) no es la excepción.

En efecto, a pesar de que lentamente se ha ido reconociendo la importancia de investigar las relaciones entre hombres y mujeres y el papel de unos y otras en la educación, la ciencia y la tecnología, los resultados son todavía incipientes. Más aún, a la luz de los hallazgos obtenidos en diferentes latitudes del globo, es evidente la urgencia de fomentar la reflexión académica sobre el papel que tradicionalmente han desempeñado las mujeres en el progreso de la ciencia y la tecnología. En el mediano y el largo plazos, ellas representan un gran potencial de crecimiento y consolidación de las comunidades científicas nacionales y, con ello, de sus efectos en el desarrollo y autonomía de sus respectivos países.

Para abordar esta problemática, por demás compleja, cuyos resultados afectan a la humanidad entera, se aprovechó un evento académico que, con una larga tradición y gran reconocimiento, convocó a expertos de muy diversas disciplinas.

Así, en el marco del XXI Congreso Internacional de Historia de la Ciencia que tuvo lugar en los esplendorosos escenarios arquitectónicos del Palacio de Minería y del Palacio de Medicina, recintos de la Universidad Nacional Autónoma de México en la ciudad capital del país, se reunieron numerosos grupos integrados por los estudiosos más competentes de la historia de la ciencia y la tecnología.

## Female professional identities and Spanish women doctors in late Francoism (1965-1978)<sup>1</sup>

TERESA ORTIZ-GÓMEZ, ANA DELGADO,  
DOLORES SÁNCHEZ Y ANA TÁVORA

At the end of the 19th century and beginning of the 20th, female physicians in the USA and England developed a strong associative activity independent of the existing general associations, which were all constituted by male physicians. It culminated in the creation of national organisations and of an international associative movement of women doctors that begun with the creation of the Medical Women's International Association (MWIA) in 1919.<sup>2</sup>

This international movement included associations of women doctors in Spain and Latin America. Its impact in Latin America has not been studied, although there are data on the existence of an active international network on the American continent, the Pan American Medical Women's Alliance (PAMWA), from the 1940's to at least the 1970's. National associations of female physicians had previously existed in some Latin American countries, such as the *Agrupación Médica Femenina* founded in Chile in 1938.<sup>3</sup>

<sup>1</sup> This paper is part of the project Trabajo, género y medicina. Actividades de las médicas españolas en la segunda mitad del siglo XX (Ref.: RS/EL exp: 51/97), founded by the Programa Sectorial de I+D de Estudios de la Mujer; Ministry of Work and Ministry of Education. An earlier version of this paper was also presented at the Annual Conference of the Social History of Medicine Society "Medical professionals: Identities, interests and ideology". Glasgow, July, 1999.

<sup>2</sup> Cora B. Marret. "On the evolution of women's medical societies". *Bulletin of the History of Medicine* 53 (1973): 434-448; and Ellen S. More. "The American Medical Women's Association and the role of the woman physician, 1915-1990". *Journal of the American Medical Women's Association* 45 (1990), 5: 165-180.

<sup>3</sup> In Latin America, some medical women's associations were founded between the 1930's and the 1960's, at least in Chile (*Agrupación Médica Femenina*, 1938), Cuba (*Asociación Cubana de Mujeres Médicos*, 1940's), Argentina, Brasil, Colombia y Peru (1960's). PAMWA congresses were celebrated in Mexico (1940), Puerto Rico (1960) or

In the mid-nineteen-sixties, four Latin American countries (Argentina, Brazil, Columbia, Peru) and Spain were affiliated to the MWIA,<sup>4</sup> which was founded in 1919 with the following objectives:

- To promote solidarity and relationships between medical women.
- To foster scientific and professional exchanges.
- To develop specific care and health education activities for women and children.
- To achieve equality of opportunities for medical women.<sup>5</sup>

Initiatives to form associations of female physicians took on different forms according to the time period and the social-political conditions of each country. However, in all cases they allowed the doctors to build and share their professional identities as women, distinct from the masculine professional identity that had dominated medicine for centuries.<sup>6</sup> Through these identity-building and collective processes, women doctors, minorities in most countries of the world, defined fields of major interest and styles of practice for female professionals, trying to establishing their own space in medical practice. They attempted to transform their professional setting to adapt it to their aspirations, while at the same time adjusting to the limits socially imposed on women.<sup>7</sup>

Peru (1967). This relation is based on publications summarized by Sandra Chaff *et al.* *Women in medicine. A Bibliography of the Literature of Women Physicians*. Metuchen: Scarecrow Press, 1977.

<sup>4</sup> MWIA, Tenth Congress, July 9-15, 1966. Rochester, New York; Niagara Falls, Ontario. Official Program, s.l., s.e.

<sup>5</sup> Marret. "On the evolution", *op. cit.*; and More, "The American MWA", *op. cit.*

<sup>6</sup> About gender identities in the medical profession, see Margaret Pelling. "The women of the family? Speculations around early modern British physicians". *Social History of Medicine* 8, 1995, 3: 383-401; and Teresa Ortiz-Gómez, "El género, organizador de las profesiones sanitarias", in Consuelo Miqueo *et al.* (eds.), *Perspectivas de género en salud*. Madrid: Minerva, 2001, pp. 39-61.

<sup>7</sup> On processes of constructing collective professional identities, see: Claude Dubar. *La socialisation. Construction des identités sociales et professionnelles*. Paris: Armand Colin, 2000. Antonio Bolívar, Jesús Domingo y Manuel Fernández, "Identidad profesional y narrativa", in *La investigación biográfico-narrativa en educación. Guía para indagar en el campo*. Granada: Force, 1998.

Spain joined the MWIA in 1927, after doctor Elisa Soriano founded the *Asociación de Médicas Españolas* (AME), which remained active until the Spanish Civil War in 1936.<sup>8</sup>

Twenty five years later, in 1961, a group of 16 female physicians started meeting in Valencia, a university city in Eastern Spain and the third most populous city in the country. They came from different specialities, and in 1965 officially established themselves as the Spanish Association of Medical Women (*Asociación Española de Mujeres Médicos*) —which we shall refer to as the AEMM—, and remained active until 1978. It was one of the first independent groups of women in Franco's Spain, although its existence has been ignored until now by both the well established Spanish feminist historiography and the medical historiography. In the mid-seventies there were only two other organised women's groups in Spain, made up of university graduates and intellectuals.<sup>9</sup> The three groups followed the tradition of bourgeois and professional women's organisations of the twenties and thirties, and for women doctors the former association was a clear reference point.

In this paper we shall study the ways in which the members of AEMM defined themselves as professional women and the degree to which they constructed their own differentiated professional identity. The sources we have used come from the AEMM and some of its founders in the initial years (1961-1968), mainly the minutes of their meetings, their publications in the association's journal,<sup>10</sup> as well as interviews or articles in the general and medical press. We also turned to current oral sources and used some results of a discus-

<sup>8</sup> Teresa Ortiz-Gómez, "La Asociación de Médicas Españolas (1928-1964) y su fundadora, doctora Elisa Soriano (1891-1964)", in Manuel Valera, M<sup>a</sup> Amparo Egea, M<sup>a</sup> Dolores Blázquez (eds.). *Libro de Actas. VIII Congreso Nacional de Historia de la Medicina*. Murcia-Cartagena, 1986, Murcia, Universidad de Murcia, 1988, vol. I, pp. 595-606; Montserrat Cabré, "Autoridad e historia. El proyecto historiográfico de las médicas estadounidenses", 1925-1940. *Asparkia*, 2001 (12), 113-124.

<sup>9</sup> We refer to the *Asociación de Mujeres Universitarias*, legalised in 1953 and the *Seminario de Estudios Sociológicos*, created in 1960. See Amparo Moreno Sardá. "La réplica de las mujeres al franquismo" and Rosa Pardo. "El feminismo en España: Breve resumen", both in: Pilar Folguera (ed.). *El feminismo en España: dos siglos de historia*. Madrid: Pablo Iglesias, 1988, pp. 85-110 and 133-141, respectively.

<sup>10</sup> Named *Actividades de la Asociación Española de Mujeres Médicos* (hereafter *Actividades AEMM*).

sion group which took place in May 1999. This discussion group comprised 14 female physicians, mostly members of the AEMM, who had practised medicine in Valencia in the seventies. Our aim was to discover how these women now assess their experience in the association and their professional activity. The method we used favours individual-group interaction and the appearance of the different planes on which individual activities are constructed, both at a more explicit and conscious level and at a more implicit and subjective one.<sup>11</sup>

We are interested to see how these doctors, who decided to come together because they were women and shared a profession, defined their group, and what representations they created of themselves and of other professional women they used as their models. We also wish to observe how they constructed a collective identity through their own organisation, to what extent this model was accepted or rejected by female and male physicians, and what role gender values played in their accounts of themselves and their experience.

In 1965, 2.6% of the 40 000 physicians practising in Spain were women. Half of them had completed their medical studies within the previous five years and were therefore largely young (under 30 years of age). The distribution of female physicians was very irregular, although in every province there was at least one woman registered with the College of Physicians, mandatory for all practising doctors in Spain, and the index of feminisation ranged from 6% in Madrid to 0.3% in two small provincial capital cities in the North-west.<sup>12</sup> Thirty per cent of qualified female physicians did not practise their profession, compared with 18% of male physicians. The women who did work as doctors lived mostly in an urban setting, were more likely to have a specialised training than their male counterparts, and worked in specialities that the dominant medical dis-

<sup>11</sup> In our project we ran ten discussion groups with different age and speciality mixes. We also performed in-depth interviews (professional life stories) with thirteen female physicians who practised in the seventies in different Spanish cities. See Teresa Ortiz Gómez, Ana Delgado Sánchez, Dolores Sánchez, Ana Távora Rivero, "Trabajo, género y medicina. Actividad de las médicas españolas en la segunda mitad del siglo XX", unpublished report, Instituto de la Mujer, 2000.

<sup>12</sup> *Anuario Estadístico de España del año 1965*. Madrid: Instituto Nacional de Estadística, 1966, p. 100.

courses in Spain considered to be appropriate for women. These specialities were basically paediatrics, in which about 40% of female physicians worked, followed by obstetrics and gynaecology (22%), psychiatry, clinical analysis and ophthalmology.<sup>13</sup>

The rapid and progressive incorporation of young Spanish women into university studies, including medicine, meant that these figures increased six-fold over 10 years, so that by 1975 women represented 10% of the medical profession, still a lower proportion than in the rest of Europe.

Throughout the seventies, the Spanish National Health Insurance System (*Seguro Obligatorio de Enfermedad*) consolidated its delivery of health care services through the creation of their first general hospitals. However, most physicians worked in private practice. There were 12 doctors per 10 000 inhabitants in 1965, which was widely considered to be excessive in medical circles, above all among male physicians.<sup>14</sup>

In Valencia, there were 58 women doctors in 1960. In different towns in the province there were 15 more, giving a total provincial feminisation rate of 3.4%, the highest in Spain, where the mean overall rate was 1.5 per cent.

The precursors of the AEMM are to be found among 16 of these women doctors, mainly paediatricians, but also from other specialities<sup>15</sup> who organised as a group within the Valencia Paediatrics Society at the end of 1961. Their aim was to work together on scientific and educational activities. From their first meeting they

<sup>13</sup> See Carmen Monforte and Concha Albalat, "Estadísticas del número total de médicos en España. Para el X Congreso Internacional de la MWIA" (Nueva York, 9-15 de julio de 1966), s.d., 6 ff., typescript (Dr. Albalat personal archives) and Teresa Ortiz, "La mujer como profesional de la medicina en la España contemporánea: El caso de Andalucía (1898-1981)", *Dynamis* 5-6 (1985-86): 343-366. Data on the choice of Psychiatry, Clinical Analysis and Ophthalmology specialities differed between Andalusia and Spain as a whole. A similar situation existed in France, as reported in the foreign journals section of *Actividades AEMM* (1967), p. 84.

<sup>14</sup> Teresa Ortiz, *Médicos en la Andalucía del siglo XX. Número, distribución, especialismo y participación profesional de la mujer*. Granada: Fundación Averroes, 1987, pp. 100-103.

<sup>15</sup> There were also an ophthalmologist, a dermatologist, a cardiologist, an analyst and one with no speciality. About MWIA and other national medical women associations see Monforte "On the evolution of the MWIA" and Ortiz "The American MWIA" in *op. cit.*

displayed a will to situate themselves within the wider movement of women doctors. They emphasised that they were not alone, and created a genealogy of women doctors like themselves, also dedicated to creating networks of female health professionals. At that first meeting they decided to take part in the homage paid in Madrid to doctor Elisa Soriano, founder of the Association of Spanish Female Physicians, which had existed in the thirties. They also joined the Medical Women's International Association (the MWIA), on whose statutes they based their own a few years later.<sup>16</sup>

The AEMM was founded in 1965 with aims that were generally those of the international association: "To promote a spirit of friendship, understanding and intelligence among medical women in Spain [...] to study problems that especially interest female physicians related to women, children and social medicine, and to facilitate co-operation between Spanish medical women throughout the world".<sup>17</sup> Their objectives did not include demands for themselves as female professionals, but rather represented a social and ethical commitment to a way of practising their profession and relating with their colleagues. Doctor Lola Vilar, a well-known paediatrician in her sixties, the leading figure in the association during these years added:

Faced by the world-wide shortage of doctors [...] it has been said [at the 1996 MWIA Congress in Rochester] that the female physician represents our hopes, the potential reserve of healthcare for humanity in the future. Her social role will be increasingly more decisive, and so the new generations must be prepared [...] and the only formula is an unlimited faith in the value of the work and the constant desire to succeed as a professional and a human. To help them in this difficult task is one of the aims of our association.<sup>18</sup>

At the end of 1967, the association had 129 members from 25 different Spanish provinces. One year later, the membership had risen to 153, representing 10% of female physicians in the country. The

<sup>16</sup> *Libro de actas 1961-65*, 17-11-61 meeting, s.f. The year after they joined MWIA, four associations of women physicians from Latin America became members: Argentina, Brazil, Columbia and Peru. MWIA Tenth Congress, July 9-15, 1966. Rochester, New York; Niagara Falls, Ontario. Official Program, s.l., s.e.

<sup>17</sup> AEM. *Estatutos*, art. 2. Valencia, s.e., 1965.

<sup>18</sup> "Editorial", *Actividades AEMM*, 1967, p. 3.

group from València made up 53 of these, alongside members from another 28 provinces. Membership continued to rise to a peak of around 200 in 1971, the year of its first and only national congress. By the mid-seventies, membership had fallen to 75.

During the founding years, the association's activities varied quite a lot. They attended national and international conferences, interviewed leading members of their profession, asking them to support their project. They organised numerous cultural and scientific activities, published a journal and met at least once a month to debate and organise. They maintained constant links with female physicians in other countries through the MWIA and received three visits from representatives between 1965 and 1968.

The targets of these initiatives were, apart from AEMM members themselves, other physicians and professionals as well as young people and mothers, for whom they organised health education conferences and courses in schools and church halls. The members themselves gave informational talks, and most were addressed to a medical audience, although many non-doctors, male and female, were invited to speak. This allowed them to gain authority among themselves and also to link with other professional and social sectors, in what we could consider an *exchange of recognition*. Among the invited speakers were leading male physicians from Valencia and Spain, who the association always accorded special treatment, chairing meetings or giving the opening address. Guests also included non-member female physicians, young doctors, professional and intellectual women and women doctors from associations in other countries. Missionaries were also invited to speak about their health care experience in Africa, which, along with the education of adolescents, was an important issue in the early years of the AEMM.

Most of these contributions were published as papers in the journal of the association (*Actividades de la AEMM*). Between 1965 and 1971, ten issues of varied format were published, including two sections of special interest: one, a revision of articles published in medical women's journals abroad,<sup>19</sup> and the other, biographical

<sup>19</sup> Extracts from articles published in 1967 and 1968 in the journals *Femmes Médecins*, *Mitteilungsblatt des Deutschen Ärztinnenbundes*, *Journal of the Medical Women's Federation* and *Journal of the American Medical Women's Association* were included.

notes on important contemporary women doctors, called "Woman and doctor".

Among articles by women doctors in this and other journals during this period (1961-1967), we have found no reference to any situation of inequality or disadvantage for women in the professional setting. There is no reference to the difficulties that they must have had as women doctors responding to the contradictory roles of being a bourgeois wife and mother as well as a dedicated physician. Neither is there any mention of tensions in the profession, either among themselves or in their family setting.

On the contrary, there is continual affirmation of the important role of women in the profession, a role based on the acceptance of differences between men and women. These differences were understood to be social and natural; were not seen as restrictive but rather as positive and very appropriate for practising the profession. In an interview, doctor Vilar said:

The female physician perfectly realises that we are living a historic moment, and knows that she must bring to the common good of humanity the female values of which there is increasing need. Her sensitivity, her capacity for tenderness, her understanding of the pain of others, must move beyond the family environment and enter into current society, still too hard for the human being, despite the enormous technical advances.<sup>20</sup>

She also wrote in another article on the first MWIA Congress she attended in Baden-Baden in 1960:

I was impressed by the quality of the Congress and the affection with which we were received and by the especially human way in which the issue of "Problems of the elderly woman" was dealt with: they were treated with such understanding, sensitivity and thoughtfulness, that a "female way" of doing medicine was revealed.<sup>21</sup>

<sup>20</sup> "Se ha constituido la Asociación Española de Mujeres Médicos" [entrevista a Lola Vilar]. *Tribuna Médica* 2 (1965), 45, p. 8.

<sup>21</sup> Lola Vilar, "La Asociación Española de Mujeres Médicos celebra su primer congreso", typescript, circa 1971, f. 1. [On her attendance at the MWIA Congress in Baden-Baden in 1960] (Dr. Vilar family archives).

Female values were identified with the universal values of the profession, humanitarian values that in some way implied a criticism of other more technical, bureaucratic and less personalised approaches to the practice of medicine, such as those developing in Spain with the National Health Insurance System.

This recognition of the most stereotyped and idealised female qualities also implies their reassessment in novel ways, since these professional women used them to defend women's work, in particular medical work, as a way of contributing to the improvement of the profession and society.

This argument abounds in the profiles of women doctors that appear in the journal. In 1965, the first of these biographical notes was published, on the Philippine female physician Fe del Mundo, then President of the MWIA. She had given the closing address in Valencia in the AEMM's first year:

The best lesson we learned from her was her very presence [...], her delicate, almost fragile figure. She looked like an exquisite tropical flower [...]. She possesses a deep faith [...]. A goodness that is living matter [...]. Exquisite, delicate, pleasing [...]. Her calm bearing and her understanding smile conceals incredible activity [...]. She never talks about herself, although the list of posts of responsibility she holds is intimidating, nor about the Philippine Association of Medical Women [...]. She is a model to be imitated because of her enormous scientific and health-social work.<sup>22</sup>

The more feminine personal qualities of Fe del Mundo were emphasised, as was the case with other important women doctors that appeared in issues of the journal (*Actividades AEMM*) in 1968, sometimes at the expense of the reporting of their professional curricula.

This definition of other women doctors, established as models, was also a form of self-definition, and certainly enhanced their development as a female group. They achieved support from inside and outside the profession through not openly questioning the gender values imposed in the profession, as expressed, for instance, in

<sup>22</sup> It does not provide her full curriculum, but notes the organisation of "a fabulous MWIA Congress", and many international posts. *Actividades AEMM*, 1965, s.n., p. 17.



segregation into specific specialities and difficulties found to work in some areas or to gain promotion.<sup>23</sup>

The women that most actively participated in the AEMM, most of whom are now retired, evaluate their collective experience as a cultural enterprise that won them friends, contacts and travel; that functioned without tensions between members or with other professional sectors, and that did not conflict with their family life. They consider that the association was largely built by the efforts of one person, namely doctor Lola Vilar, as opposed to the collective construction described in the written sources. We have not yet completed our analysis of the discussion group, but we can report that their assessments are in strong agreement with the female professional identity that these women constructed.

We will continue studying the extent to which this identity was reinforced or questioned in subsequent phases of the association, but it is certain that it did not constitute a model for younger professional women who were graduating in large numbers from Spanish universities, because they did not join it. The association ended its activity in the summer of 1975, months before Franco died and Spain started the *transition* to democracy.

<sup>23</sup> About gendered practices and identities, see Ellen S. More. *Restoring the balance. Women physicians and the profession of medicine, 1850-1995*. Cambridge MA: Harvard University Press, 1999.

## To be a female student of science at a Calvinistic University, 1930-1960. Some remarks and results

IDA H. STAMHUIS AND BRIGITTE HERTZ

In 1880, a Calvinistic university named Vrije Universiteit (VU) (Free University) was established in The Netherlands. A crucial role was played by Abraham Kuyper (1837-1920), a theologian and subsequently a politician, who also became one of the new university's professors. Three Faculties were set up: Theology, Law, and Humanities. Fifty years later, in 1930, a Faculty of Mathematics and Natural Sciences was added. In 2005 the university will celebrate 125 years of existence, and the Faculty of Sciences (as it is named now) its 75<sup>th</sup> year of existence. Because of this anniversary, various historical projects have been initiated. We were interested in an investigation into the situation of the first female students of the Faculty of Mathematics and Natural Sciences.<sup>1</sup> In this paper we will introduce the topic, formulate questions and present some results. But first, a sketch of the Calvinistic context should be given.

### PILLARIZATION

In the Netherlands, from about 1870 to 1970 the different branches within Christianity are clearly distinguishable. The differences be-

<sup>1</sup> In earlier historical studies we investigated various topics on women in science, but not yet on women in science in the Calvinistic world: Ida H. Stamhuis. "A Female Contribution to Early Genetics: Tine Tammes and Mendel's Laws for Continuous Characters". *Journal of the History of Biology* 28 (1995), pp. 495-531. Annemarie de Knecht-van Eekelen and Ida H. Stamhuis (eds.). "'Zy is toch wel zeer begaafd'. Historische bijdragen over vrouwen in de bètawetenschappen", Thematical Issue *Gewina* 20 (1997), nr. 4 (1997), "Inleiding", pp. 5-15. Ida H. Stamhuis and Marianne I.C. Offereins. "Twee vrouwelijke natuurkundigen en hun promotor in het interbellum: Lili Bleeker, Truus Eymers en Leonard Ornstein", Thematical Issue *Gewina* 20 (1997), nr. 4, pp. 88-100.