



# eJACD

The Official Journal of the American College of Dentists

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**Our Second Century  
of Service Begins**

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# The Character of a Profession: *The Next 100 Years*

N. Karl Haden, PhD, FACD



*Dr. Haden's Keynote Address at the Annual Meeting in October, 2020.*



*Dr. Haden is the President and CEO of the Academy for Academic Leadership and an Honorary Fellow of the American College of Dentists.*

The American College of Dentists has been called a “guiding light,” and the “conscience of dentistry.” Dentistry stands or falls on the cornerstones of professionalism and ethics, and the College has ensured these cornerstones are firm and strong. If the cornerstones are professionalism and ethics, the keystone is leadership. Each is embodied in each College Fellow. For 100 years, the American College of Dentists has led and modeled the covenant between the dental profession and the patients and communities it serves.

This article will use the concept of character to describe the dental profession, those who comprise it, and the ACD. I will begin with a memory from my youth. Then, I will talk about the history of character in ethics, leading to a crisis of character facing the dental profession. I will speak of the virtue of humility and its importance to an ongoing dialogue about the profession. I will make the case that some forms of self-interest are legitimate, and we should seek them. I will then turn to the virtue of wisdom and how ACD can pass wisdom forward to future generations. Finally, I will conclude with some observations about the century to come.



# The Character of a Profession: *The Next 100 Years*

N. Karl Haden, PhD, FACD

## REMEMBRANCE

I grew up in the Piedmont region of rural Virginia. We drank water from a well that my grandfather dug with a pick and shovel during the Great Depression. I never knew my grandfather. He died in 1943. I am told he dug wells all over the county to make ends meet during those lean years. Like most homes then and now with wells, we didn't have fluoridated water. We did, however, have an abundance of Pepsi Cola in south central Virginia. During my youth, Pepsi's slogan was "You've Got a Lot to Live, and Pepsi's Got a Lot to Give." Well, Pepsi gave me a number of carious teeth.

Perhaps as a result, I grew up well acquainted with our family dentist. I confess I did not like going to the dentist—the prize I pulled from a jar at the end of the visit notwithstanding. I have only seen my childhood dentist two or three times in the past three decades, but what I remember most about him is not my experiences in the chair.

I remember him as a man who played ping-pong with me. He was an exceptional player, and he tried to teach me to be one. He was also my softball coach during my teenage years. In addition, I remember him as a deacon and usher, a leader in my church, who led our youth group. He gave his Wednesday nights to teach a group of adolescent boys who weekly set new benchmarks for shortest attention span. We schooled him in the virtue of patience.

Our family dentist never charged my father for dental care, not because my father could not afford it, but just

because he was a close friend. His commitment to service was remarkable, including going on numerous mission trips to care for those who had no access to a dentist.

As a result of all these interactions, what I remember most about my dentist from my childhood and teenage years is that he was first and foremost an honorable person. Dentistry happened to be his profession. The way he practiced dentistry was the way he led and contributed to the community. He was, and I believe still is, a virtuous man. As the Stoic philosopher Zeno said of the virtues, his actions flowed from his character.

## A SHORT HISTORY OF CHARACTER

This article is rooted in character-based or virtue ethics. Virtue ethics has a long history, longer than any other tradition in moral philosophy, dating back to the ancient Greeks and, in the West, owing more to Aristotle than anyone else (MacIntyre, 1985). Virtue ethics also emerged separately in Confucianism, Buddhism, and other philosophies and cultures (Hursthouse & Pettigrove, 2018; Goodman, 2017). The traits that are admired and respected in others vary across time and cultures, yet bear remarkable similarity.

Virtues are character traits, habits, such as prudence, justice, courage, hope, and charity, that contribute to one's personal well-being and that of others (Aristotle's *Nicomachean Ethics*, 2012). These habits help people to live good lives, treat others well,

and contribute to human flourishing in the communities and societies in which we live. One of the unique features of virtue ethics is its concern with a whole life, not simply decision making when something "moral" is at stake (Pelligrino & Thomasma, 1993). Virtue ethics focuses *not* on the principles, rules, or processes for solving moral problems, but on the choices that become habits leading to or, in the case of vices, away from a good life (Aristotle's *Nicomachean Ethics*, 2012). One might say that virtues are the character traits necessary for living a fulfilling life in a community with fellow human beings.

Over the centuries, medical morality falls primarily into three central themes: character, duties or obligations, and responsibility to the community. The character of the physician has been a consideration since around the fourth century BCE with Hippocrates, often considered the father of medicine. According to Jonsen (2000), the primary texts read by the educated physician during the Renaissance were Aristotle's *Nicomachean Ethics* and the *Politics* and Cicero's *De Officiis* (On Duty). These texts were used to inform the moral character of the physician. By the 14th century, medicine had a place in the universities across Europe. Medical texts had proliferated, guilds or societies had been formed, and the seeds of a profession were sprouting.

Also according to Jonsen (2000), the first official honor code appeared in 1803 in Thomas Percival's *Medical Ethics*; or, a *Code of Institutes and Precepts Adapted to the Professional*

*“A profession, such as dentistry, is a unique kind of moral agent. It is comprised of a moral community of individuals, who are moral agents, who have specialized knowledge, and who have agreed to use this knowledge for the good of others. The oaths or pledges made by those who comprise the profession of dentistry are in a sense collectively made and reflect the bond of trust between the professional and the patient and society.”*

*Conduct of Physicians and Surgeons.* Percival, a British physician and ethicist, introduced for the first time in the literature the term “medical ethics.” Character remained a key focus. In the dedication to his son, also a physician, Percival writes, “The study of professional ethics . . . will soften your manners, expand your affections, and form you to that propriety and dignity of conduct which are essential to the character of a gentleman” (p. 55). The “gentleman physician” exhibited certain fundamental virtues: tenderness, steadfastness, and respect.

In focusing on virtue ethics, I am not proposing a replacement for principles or rules to guide ethical decision making in dental practice or in life in general. Virtue ethics does not tell us how to solve moral dilemmas. Rather, character-based ethics brings attention to the type of person most apt to show an interest in, a concern for, and a commitment to the application of ethical principles and rules to decision making. To quote the late 20th-century physician, educator, and ethicist Edmund Pellegrino, “Analysis cannot substitute for character and virtue. Moral acts are the acts of human agents. Their quality is determined by the character of the person doing the analysis. Character shapes the way we define a moral problem, selects what we think is a moral issue, and decides what principles, values, and technical de-

tails are determinative” (Pellegrino & Thomasma, 1993).

To shape the character of the profession, starting with those who comprise it is helpful. A profession, such as dentistry, is a unique kind of moral agent. It is comprised of a moral community of individuals, who are moral agents, who have specialized knowledge, and who have agreed to use this knowledge for the good of others. The oaths or pledges made by those who comprise the profession of dentistry are in a sense collectively made and reflect the bond of trust between the professional and the patient and society.

## A CRISIS OF CHARACTER

Arguably, the profession is experiencing a crisis of character or we might say that some dentists are acting out of character.

*The Ethics Report: The New Professionalism* (Chambers, 2020) describes many reasons leading to a crisis of character. Organized dentistry does not have the same influence it once had. Solo practices and isolation of the profession from the rest of healthcare inhibit community, collegiality, and dialogue. Across the profession, the values of professionalism compete with those of the free market. The character of the profession is fragmented among those

who comprise it, like brickwork that is eroded and broken into pieces over time. The character of the profession is morally pluralistic.

When I first moved back to Atlanta from Washington, DC, I needed to find a new dentist. I received a recommendation for a dentist who had graduated first in his class and had been in practice a few years. I made my appointment and went for my cleaning. He was complimentary about how well I had brushed, flossed, and taken care of myself, but at the end of the cleaning he informed me nonchalantly that I needed—I forget the exact number—either seven or nine crowns. It seemed that Pepsi still had a lot to give so many years later!

I am not a dentist, but I probably know several thousand dentists. Second opinions were easy to get. When I returned to Washington, DC, a week later for business, I made an appointment with my former dentist. What had happened, I wondered, over the eight months since I last visited his office? He quietly examined me and then looked at me in the eye and said: “If I were you, I wouldn’t do anything. Your dentist in Atlanta has suggested an aggressive treatment plan, more aggressive than I would recommend.” By the way, my Washington, DC, dentist is a member of this College.

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That was 16 years ago. I did not go back to that Atlanta dentist, even though I did not doubt his clinical competence or that he probably made an A in his ethics course.

This anecdote illustrates a crisis of character: the choice between economic self-interest and the professional commitment to put the patient's interest first. You might say this is a conflict between self-interest and altruism, the unselfish concern for others. Economics is the "invisible hand"<sup>4</sup> that breaks the profession into pieces.

Prior to the Renaissance, payments to physicians were considered honoraria (Jonsen, 2000). Just as for teachers, scribes, and others in the learned professions, compensation for physicians was considered a gift. During the Renaissance, the relationship between physician and patient started to become more transactional or commercial, based on set fees and terms of engagement. In 1918, according to Jonsen, Dr. Richard Cabot, a physician, Harvard professor of clinical medicine, and respected moral philosopher advised, "Among the rewards which the doctor must not expect is wealth. . . . I have known few physicians who fail to get a living in medicine, but the number who make comfortable incomes is equally few." That assessment changed for physicians within a few decades as it did for dentists.

That the ethical bastions of the health professions are assaulted by the values of the free market should not come as a surprise. Four of the ten *Fortune* most profitable compa-

nies in 2020 are in healthcare (*Fortune* 500, 2020). Eighteen of the 25 *U.S. News and World Report* best jobs are in healthcare; dentist is at number 2, orthodontist at number 4, and oral and maxillofacial surgeon at number 9 (U.S. News, 2020). Of the top ten best-paying jobs, all ten are in healthcare, with four of the ten in oral health, general dentistry ranking number 10 (Best Paying Jobs, 2020). A variety of factors contribute to the attractiveness of these careers, and a strong and important one is money.

Adam Smith (1994), the Scottish Enlightenment thinker and the father of modern economics, is famously quoted as saying: "It is not from the benevolence of the butcher, the brewer, or the baker that we expect our dinner, but from their regard to their own interest." In his most famous work, known familiarly as *The Wealth of Nations*, Smith argues that the pursuit of self-interest in the free market benefits society as a whole. Many economists maintain that the human is *Homo economicus*, that is, a rational maximizer of one's own interests. A financial balance sheet is an easy scorecard. The balance, however, is far more complex—and infinitely more important.

From an economic standpoint, dentistry's history is as a "cottage industry," which means literally a business run from one's own home. Technically, these cottages were corporations—professional corporations or limited liability companies (Brown, 2017). The shape of dental practice is changing dramatically, though, with corporate dentistry taking a

variety of forms, from large group practices to dental management organizations (DMOs) and dental service organizations (DSOs). As Brown explains, economic efficiency and profit are two of the reasons for this change.

Private equity and venture capital are flowing into healthcare, including dentistry (Mathis & Metcalf, 2018). Commercialism, with an emphasis on maximizing profit, is a threat to the moral character of the profession, as discussed by Chambers (2020, pp. 228-9). With deference to Professor Smith, a dentist is neither a butcher, a brewer, nor a baker. A dentist's commitment as a professional is nothing less than a sacred covenant to put economic self-interest behind the well-being of the patient.

That said, my personal story about overtreatment illustrates that self-interest is not a character trait unique to corporate dental practices. Self-interest has always existed in the cottage as well. Economic self-interest, whether in the cottage or the corporation, is a primary driver behind overtreatment, malpractice, fraud, and other business dealings, with the intent to maximize profits even at the expense of patients and the systems that support healthcare. This commercial focus has been exacerbated by the transition Chambers describes from practice models based on "relationships" to ones based on "transactions," in which "success is measured as the excess of reward to expense" and with "each party seeking to maximize his or her self-interest" (2020,

p. 226). Even the organized dental profession walks a tightrope between advocacy for the profession and advocacy for the patient.

For at least two millennia, philosophers have debated whether self-interest is an innate trait of the human species. Is altruism or beneficence unadulterated with self-interest even possible? I do not have the answer to this question, but we must discuss and debate the related issues. The moral complexities facing the health professions today were unimaginable

sionalism.” This is where the dialogue must begin.

Considering virtues and character, I would argue that the virtue of humility is essential if individuals and organizations—the profession and its stakeholders—as moral agents are to engage in this dialogue. Arguably, humility is an antidote to self-interest.

First, humility is the appropriate attitude to knowing that one does not have all the answers to the ethical challenges facing us. Humility is the

fessional the privilege to obtain special knowledge to be used in the care of others. Humility recognizes that the patient is vulnerable and honors the trust placed in the caregiver. Humility in the dentist and in the profession admits in gratitude its indebtedness to others.

Lastly, humility is essential for empathy. Self-interest is blind to others. But humility sets aside self-interest, so the provider can empathize with the patient and the community. The act of recognizing, understanding, and

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a century ago. The ubiquitous dilemmas facing the dental profession today, and maybe well into the future, are not those of bioethics, but of what it means to be a professional and a profession; not rules and principles, but the character of the provider and the profession.

## THE VIRTUE OF HUMILITY

Chambers’s *Ethics Report* “advocates an ethics of engagement...; it establishes an ethical imperative to sit down and talk with all others who are affected by our actions” (Chambers, 2020). Chambers states that “It is more than likely that dentistry will have to redefine what it means to be a professional.” Hence, the subtitle of the report is “The New Profes-

pathway to what the Zen Buddhist Shunryu Suzuki (2020) called “beginner’s mind.” In the expert mind, there are few possibilities; in the beginner’s mind, there are many.

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Secondly, humility recognizes that society has granted the health pro-

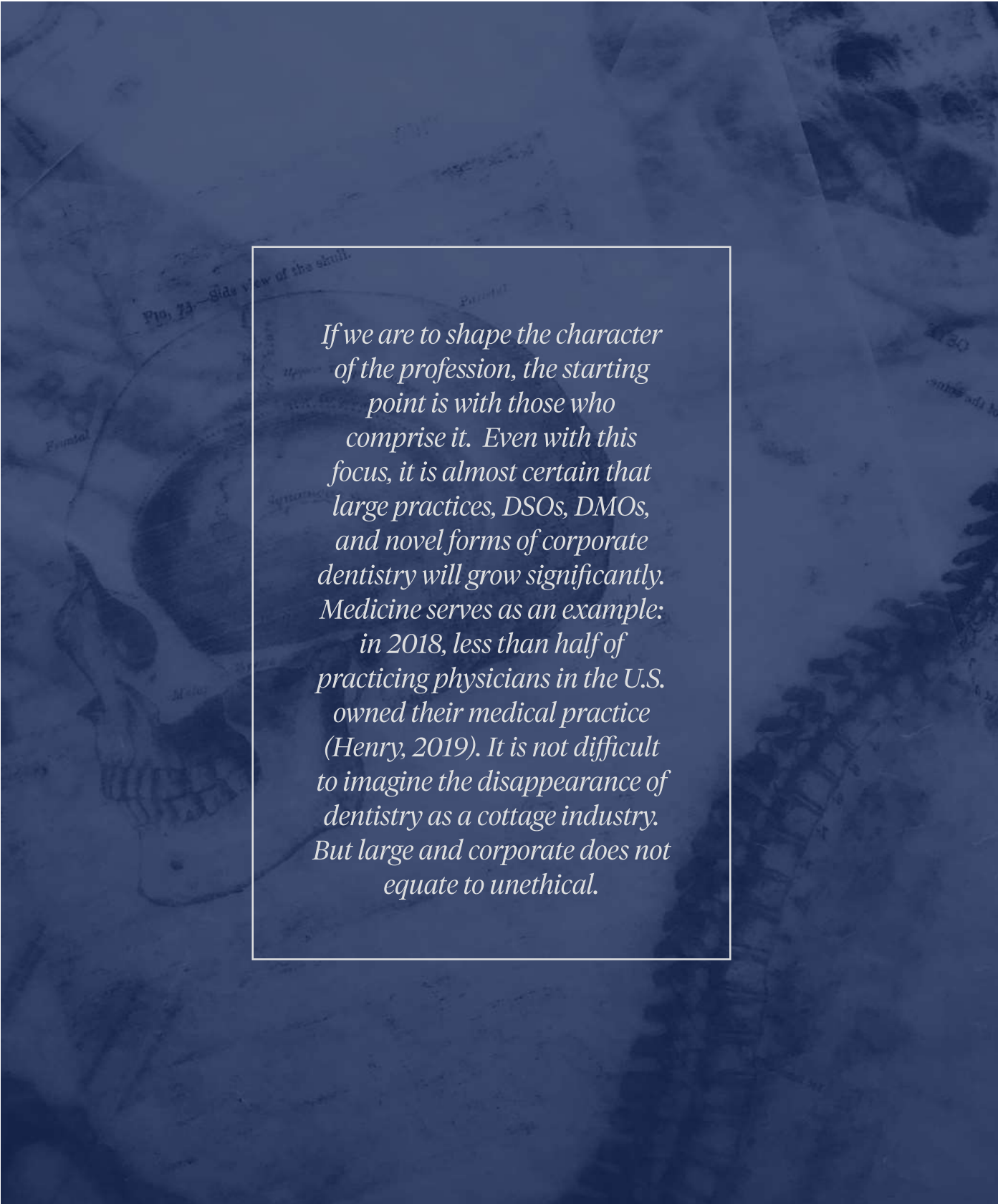
sharing the thoughts and feelings of others is at the core of humility. Empathy opens the door to compassion. Empathy helps us act for the benefit of others because we can vicariously put ourselves in their place. Humility is the virtue; empathy is the attitude and act flowing from it.

In today’s world, humility is too little appreciated. Along with economic self-interest often comes what the American economist and sociologist Thorstein Veblen (2009) called “conspicuous consumption,” the purposeful and public display of one’s wealth and power. Being humble is difficult when one knows so much and has so much. With the financial rewards possible in dentistry and healthcare that so many dentists and physicians find themselves on the hedonic treadmill is not sur-



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prising. The virtue of humility helps in seeing the world aright, that everyone is a debtor (even after paying off student loans).

## THE VIRTUES OF SELF-INTEREST

Introducing the virtue of humility broadens the scope beyond how one practices dentistry to how one practices life. The virtues are about human flourishing and provide a broader perspective.

Humans are aptly called *Homo economicus*, the economic human, but we also belong to the species *Homo sapiens*. We are the sapient ones, the wise ones. Except for the universe itself, nothing is more complex than the human brain. It contains somewhere around 100 billion neurons, each of which communicates with thousands of other brain cells. More than a few philosophers have argued that our intelligence is the image of the divine in each of us. With human rationality comes a number of highly unique activities and relationships that are naturally good for our species—physically, mentally, and spiritually.

These goods are legitimate forms of self-interest. Arguably, humans are morally obligated to pursue these goods because we are deficit as human beings if we lack them. They include such things as friendship, citizenship, family, lifelong learning, physical fitness, spiritual exercises, and other activities that contribute to happiness and well-being. They are good for us and generally good for those around us. To enjoy many of these things, a person needs a certain level of financial means. The virtuous person aims to look at all things in moderation, even money.

The virtuous person replaces the financial statement, the all-too-easy calculus for success, with life's balance sheet—far less precise but far more rewarding.

If we are to shape the character of the profession, the starting point is with those who comprise it. Even with this focus, it is almost certain that large practices, DSOs, DMOs, and novel forms of corporate dentistry will grow significantly. Medicine serves as an example: in 2018, less than half of practicing physicians in the U.S. owned their medical practice (Henry, 2019). It is not difficult to imagine the disappearance of dentistry as a cottage industry. But *large* and *corporate* does not equate to unethical.

Last year, the Business Roundtable, a group of CEOs from America's largest companies, rejected the Friedman Doctrine, named for the 20th-century Nobel Prize-winning economist Milton Friedman, that a corporation's only responsibility is to its shareholders (U.S. Business Roundtable, 2019). These CEOs reframed the purpose of corporations as stakeholder value, not just shareholder value. This means, among other things, that employee well-being, fair relationships with vendors and suppliers, and care for the community and environment are also the purpose and responsibility of business. How this plays out is yet to be seen, but some corporate entities can and do exhibit social responsibility. There are corporations that aim for human flourishing as the end and profits as the means.

Corporations, like other organizations, are moral agents. Culture is the set of norms for how people behave, think, and frame situations. Corporate culture affects the ethical decision making of the individ-

uals who comprise the company. What constitutes a virtue or a vice is strongly influenced by what the corporation rewards. In 2019, only ten percent of the 59% of graduates entering private practice plan to be sole proprietors; only five percent intend to open a new practice (ADEA, 2020). Choosing one's employer is a decision that puts one's character at stake. The contemporary philosopher Edwin Hartman (2013) explains: "If a strong organizational culture can affect one's character, then the choice of an employer is a most important one. ... It will in effect be choosing which desires to cultivate. ...It is choosing a character."

In thinking about some challenges to oral health in the United States, particularly access issues, it is arguable that because of resources and outreach, the corporate practice of dentistry offers one of the best means of caring for those who are underserved. The use of new technologies and collaborative care with other health professionals will also advance in these models. Ethical corporations have the potential to contribute to the flourishing of individuals and communities is limitless.

As the College practices the ethics of engagement, it must educate students and influence leaders who take their places in corporate entities. Those are inevitable and even morally obligatory conversations. If economic self-interest in corporate dentistry is a central concern, the College must act to shape the character of the business of dentistry through engagement of those who lead it. Perhaps at some point, the College will have corporate members. These businesses would see their purpose as the flourishing of patients and communities and view profit as the means to this end.

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### THE VIRTUE OF WISDOM

Returning to the premise: in shaping the character of the profession, the starting point is with those who comprise it. The Platonic dialogue *Meno* abruptly begins with these questions: “Can you tell me, Socrates, is virtue acquired by teaching? Or not by teaching but by training? Or neither by training or learning but comes to men naturally or in some other way?” (Plato, 1982). After exploring the question, no clear answer emerges. The *Meno* concludes with Socrates speculating that those who possess virtue possess it “as a gift of God.” It takes bravado to proffer an answer where Socrates failed.

The question is often asked, “Can ethics be taught?” The answer to the question is “Yes,” if ethics is defined as following the rules. Like any strategy, ethics can be taught and practiced, even if the intent and the act are incongruous. The Greek root of ethics is *ethos*, which means character. If the question means “Can we shape the character of the learner and form a person of ethical character?” we are falling short if for no other reason than the fact that character formation is not the purpose of ethics courses. Their primary purpose is to answer the question “What should I do?,” not “What kind of person should I be?”

Shaping character is much harder than teaching principles and rules. When I ask people, “What has had the greatest influence on your career?” I usually get a “who” answer,

not a “what.” The “who” is often a teacher. For me, beyond my parents, particularly my mother, my “who” is a teacher. Although I had accomplished scholars as ethics professors during my time as a graduate student in philosophy, my “who” was not an ethics teacher. What I learned from my greatest influence—what has remained and, I hope, matured over the years—had little to do with the subject matter of the classroom, but it had everything to do with the aim of a worthwhile and fulfilling life. Since this individual was a high school English teacher, economic self-interest was never a priority.

My teacher endeavored to help me answer the question “What should I do?” by answering the question “What kind of person should I be?” The first question is more like a science, while the second question is more like art. As Supreme Court Justice Oliver Wendell Holmes Jr. said, “Life is painting a picture, not doing a sum” (Philosiblog, 2016). In virtue ethics, one’s choices are the paint strokes on the canvas of one’s life.

Eleven years ago, I started a Great Books of the Western World club. Getting together every six weeks or so with a group of men and women to discuss and debate timeless ideas is one of the deepest joys of my life. We have read from Homer to Hegel and from Euripides to Einstein. Two things strike me as I reflect on this more-than-a-decade-long journey of the mind. First, the reading is work. It is leisure work, but it requires a willingness to struggle with texts that will

easily defeat readers unless they are committed. The commitment says there is a diamond to unearth for those who are willing to dig for it.

Secondly, and more important, a certain level of maturity that comes no other way than through life experience is required to understand these works. This is especially true of great literature. I do not mean to say that we waste these readings on the young, but you often just “can’t get it” without having lived life—in particular, experiencing the inevitable suffering that the years bring. When I was in high school, Herman Melville’s *Moby-Dick* defeated me. I set it aside. When I read it again several years ago, now in my fifties, it profoundly moved me to consider my own encounters with the Great White Whale.

I am speaking here of wisdom. If gray hair is a sign of wisdom, we have a lot of wisdom in the College! We spend our early years getting things done and our later years considering what was done, why we did these things, and how what we did has led us to the lives we now live. I do not think there is an age threshold for wisdom that fits everyone, but I will say that by the time you are 50, you have seen some things. With age comes a different perspective. The perspective comes from the tutelage of life’s most severe teachers: an aging body, sickness, death, a divorce for roughly 40 percent of the U.S. population, and for some the terrible anxieties of parenthood. **Wisdom is possible at any age, but for most of us it accrues with the years.**

Many in the College are well acquainted with the things that get dentists into trouble. For example, according to Bloomberg, the amount of income necessary to exit the bottom 99 percent in 2017 was just over \$515,000 (Tanzi & Steverman, 2019). Some know from experience that those who aspire to great wealth in life are likely to be disappointed. Many know that greed is

always continue—but by broadening the conversation to what constitutes a good life. Many members of the College are academics. While none have taken a vow of poverty, they made a decision at some point in their career that maximizing income is not a core value. Sharing that story with newcomers to the profession is important.

argue that “North American medical education favors an explicit commitment to traditional values [or virtues] of doctoring—empathy, compassion, and altruism among them — and a tacit commitment to behaviors grounded in an ethic of detachment, self-interest, and objectivity.” Unfortunately, the tacit commitment too often speaks louder than the explicit one. This should not be said of ac-

*One of the central functions of education and, more specifically, moral education is to teach how to reason in the right direction. Perhaps there is room for a turn to moral psychology in ethics instruction, a turn to the formation of moral reasoning, including the place of desire, emotions, choice, character, contribution to the community, and human flourishing. Perhaps taking time to discuss with students and to learn with colleagues about those legitimate forms of self-interest that make for a complete, fulfilling life can occur.*

a rapacious god that devours your soul and leads you not only to make poor clinical decisions, but bad life choices. Some know what it is like to self-medicate and fall into an addiction to cope with a lack of meaning, purpose, and fulfillment in life. Many have been through these things and have picked up wisdom along a hardscrabble road.

Practical wisdom is about making the right choices, and so is ethics, and so is living a fulfilling life. Whether or not these experiences resonate with you, this College is filled with people of practical wisdom. Passing this wisdom forward to a new generation of Fellows is critical to the character of the profession.

How to accomplish that is challenging. This wisdom can be passed on not by abandoning dialogue about what constitutes professionalism—this dialogue is important and must

One of the central functions of education and, more specifically, moral education is to teach how to reason in the right direction. Perhaps there is room for a turn to moral psychology in ethics instruction, a turn to the formation of moral reasoning, including the place of desire, emotions, choice, character, contribution to the community, and human flourishing. Perhaps taking time to discuss with students and to learn with colleagues about those legitimate forms of self-interest that make for a complete, fulfilling life can occur. Maybe adding Leo Tolstoy’s *The Death of Ivan Ilyich* or George Eliot’s *Middlemarch* to the ethics curriculum will spur such dialogue.

Secondly, role modeling the character of the profession is equally important. Many years ago, I read an article entitled “Vanquishing Virtue: The Impact of Medical Education.” In it, Coulehan and Williams (2001)

academic dental institutions nor of the organized professions. Students will remember teachers long after the coursework has faded from memory. Colleagues will pay attention to what you do more readily than what you say.

Thirdly, and related to role modeling, more heroes in dentistry are needed. For too long, William J. Gies has felt alone on dentistry’s Mount Rushmore. Heroes are made not born. They become heroes by making the right life choices. They create narratives—and dentistry’s heroes can create the narrative of the profession. They are the moral paradigms of the profession. When faced with a moral dilemma, hopefully the dentist will not only think about what principle or rule to apply, but also ask what—fill in the name—would do. There are countless heroes, people of deep character and commitment, in dentistry. Their stories must be

## The Character of a Profession: *The Next 100 Years*

N. Karl Haden, PhD, FACD

*A Swedish proverb states, “The afternoon knows what the morning never suspected.” I wonder if the founders of the American College of Dentists could have envisioned what this College would become. The 1920s was the first decade to have a nickname, the Roaring 20s. It was also called the Jazz Age. It was a time of great prosperity, new music, and silent movies. It was also a time of notorious gangsters and racism as the Ku Klux Klan instigated lynchings across the South. The decade began with a nation exhausted by a world war and a global pandemic that killed more than a half million Americans in 1918 and 1919. It roared to prosperity and ended with a groan on Black Tuesday, October 29, 1929, as the stock market crashed and the shadow of a decade-long economic depression fell.*

told. Maybe there is a collection of biographies to come in the College's library.

### THE NEXT HUNDRED YEARS

Back to all those crowns in my proposed treatment plan. After my initial experience, I found a new dentist here in Atlanta. When he first examined me, he said, “If you were my brother, this is what I would do.” And then he proceeded to explain which teeth we would watch. On my first visit, he gave me his card and wrote his cell number on the back. He said, “If you ever need me, call me.” I must have looked at him askance because he said, “I really mean it. Call me if you ever have a problem.” About a year later, I needed one of those crowns. I broke a tooth—on Christmas Eve. He was there for me. When he retired, he sold the practice to another dentist who exhibits the same character and clinical competence as he did. I

have had three of those seven or nine crowns since 2004, and when I have the next one, I know who will place it.

I have very little idea what the next 100 years holds for dentistry, which is why I believe in the ethics of engagement for charting and sailing these waters. Moral complexities will inevitably become more complex. But I cannot imagine a society in which we wish for dentists who are greedy, arrogant, dishonest, cowardly, and unfair. If history is any guide, in a century, character will still count.

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The decade began with a nation exhausted by a world war and a global pandemic that killed more than a half million Americans in 1918 and 1919. It roared to prosperity and ended with a groan on Black Tuesday, October 29, 1929, as the stock market crashed and the shadow of a decade-long economic depression fell.

One hundred years later, we find ourselves exhausted from another pandemic, our backs bent under the strain of a ravaged economy, and our hands grasping to raise ourselves above racism and social injustice. As in the 1920s, so in 2020, the character of our nation is tested. Turbulent times call for the virtues. We are buoyed by hope: through courage, move forward confidently into the storm, and with wisdom we will persevere and overcome. As the better angels of our character prevail against these challenges, so too these challenges will shape us as individuals, as a College, as a profession, and as a nation for the century to come.



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