

*IN
THEIR
OWN
WORDS*

JEWISH DOCTORS, ANTISEMITISM, AND THE RESTRICTIVE
QUOTA SYSTEM AT THE UNIVERSITY OF TORONTO'S
FACULTY OF MEDICINE

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UNIVERSITY OF TORONTO
TORONTO 5, CANADA
OFFICE OF THE REGISTRAR

MEMORANDUM

Confidential

To: The President, University of Toronto.

Selection of candidates for the Faculty of Medicine

This office admits candidates to the Pre-medical Years of the Faculty of Medicine. It does so on the advice of a Selection Committee of the Council of the Faculty of Medicine.

I am deeply disturbed by one aspect of the selection process. There is a definite limitation imposed by the Selection Committee on the number of Jewish students whom they are prepared to accept in the Pre-medical Years. There are, of course, solid practical reasons for this restriction and I am the first to sympathize with the Council in what is an awkward dilemma. Against that, however, is the very real danger that the University can be charged - and rightly so - with exercising the very kind of discrimination that we disavow publicly.

As an example, during the session 1957-58 eleven well-qualified applicants were refused. These figures became nine in 1958-59 and fourteen in the session 1959-60. In each year, a fairly large number of candidates with lower academic standing were admitted. In most cases it was quite unrealistic to argue that the rejected candidates were refused on any other grounds than that they were Jewish.

Whatever the practical difficulties may be, I think that this should stop. One way out of the dilemma would be to abolish the two Pre-medical Years. Candidates for Medicine should be advised to take the General Science course and after that proceed to the First Medical Year.

I have not discussed this in any detail with the Dean of Medicine as yet. I would like a chance of talking with yourself at your convenience.

R. Ross
R. Ross,
Registrar.

RR/cc

December 4th, 1959.

INTRODUCTION

Historical Background

The journey that Jewish physicians underwent over the course of the twentieth century to become accepted members of the medical community in Toronto was by no means an easy or straightforward one. As Edward Shorter writes in *Partnership for Excellence: Medicine at the University of Toronto and Academic Hospitals*, “Jewish students began showing up in the medical class in significant numbers around 1900” in Toronto.¹ He goes on to elaborate, “They landed in an environment where there were virtually no Jewish physicians.”² This project focuses on the mid-century years during which formal and informal quotas were in place to limit the number of Jewish students who could attend medical school at the University of Toronto or obtain training and staff



positions at the central academic hospitals in the city.

Toronto during the mid-twentieth century was a city in transition from a rigid, largely White Anglo-Saxon Protestant community that upheld structures of discrimination and bigotry at its core to a more inclusive society in which those of diverse backgrounds began to see a place for themselves. Accepted attitudes and approaches to cultural, religious, racial, and ethnic difference began to change incrementally after World War II, though many institutions took years or even decades to embrace such a transformation. It was not uncommon in the first half of the twentieth century, for example, for signs to be put up at beaches, parks, resorts, and other recreation facilities that said “No Jews or dogs allowed”; in some cases, those restrictions persisted well into the 1950s. Clauses were built into legal documents limiting what properties Jews were permitted to purchase, and who was allowed to sell to them. Certain occupations were off-limits to Jews based solely on egregiously false antisemitic beliefs. There was no disputing that Jews were second-class citizens in Toronto and were faced with the very real physical, emotional, social, and financial ramifications of Canadian antisemitism.³

These dominant discriminatory attitudes built into the very systems that governed the city of Toronto meant that many Jewish communities clustered together in specific neighbourhoods: the Ward, Kensington Market, Harbord Village, and later Forest Hill and North Toronto. Because of the predominance of Jews in these areas, many schools, such as Harbord Collegiate Institute, contained almost all Jewish students through a kind of informal segregation process. It was not uncommon for scuffles, fights, and



occasionally violent brawls fueled by antisemitism to break out between groups of Gentile students and their Jewish counterparts. The largest and most well-known of these was the Christie Pits Riot, which took place on August 16, 1933.

Racial tensions between Gentiles and Jews in Toronto were high after the appointment of Adolf Hitler as Chancellor of Germany in January of the same year. Following a series of baseball games between the Harbord Playground team (all Jewish) and their rivals from St. Peter's (all non-Jewish), the confrontation turned violent when St. Peter's supporters unveiled flags with swastikas on them, shouted "Heil Hitler," and painted antisemitic graffiti on public property. The ensuing riot "remains one of the worst outbreaks of ethnic violence in Canadian history with over 10,000 participants and spectators."⁴



University of Toronto Archives. 2002-51-4MS

Old Medical Building, University of Toronto, 1966.
University of Toronto Archives. University of Toronto
Library fonds. A1972-0045/001 (89)

Medical School Quotas and Discrimination

Though it has been historically difficult to find official documentation about the quota system at the University of Toronto's medical school, significant recent scholarship proves that it was in place for decades in the lead-up to and aftermath of World War II.⁵ Charles Levi uncovered a 1959 memorandum from Robin Ross, the University Registrar, to Claude Bissell, the President of the University of Toronto, stating in clear and unequivocal terms that "there is a definite limitation imposed by the Selection Committee on the number of Jewish students whom they are prepared to accept in the Pre-Medical years."⁶ Ross goes on to cite examples of numerous ac-



ademic years in which Jews were rejected while other applicants with lower grades were accepted: “In most cases it was quite unrealistic to argue that the rejected candidates were refused on any other grounds than that they were Jewish.”⁷ While Ross acknowledges that there may be “practical reasons for this restriction,”⁸ he is also aware that the optics of such transparent antisemitism are unbecoming for the university, describing the “very real danger that the University can be charged – and rightly so – with exercising the very kind of discrimination that we disavow publicly.”⁹

Anecdotal evidence, archival research, and firsthand recollections support Ross’s findings, with Jewish attendance never exceeding roughly 20% of any incoming premedical or medical class. At a certain point in the 1950s, the assistant to the Registrar is reported to have told incoming Jewish students that the admissions process entailed populating a list of 20-25 high-scoring Jewish applicants and halting acceptance once that number had been reached. Those whose names may have appeared after that quota was filled, regardless of merit or grades, would not be accepted. Thus, antisemitism was built into the very structures of medical training.

Admission records at the University of Toronto Archives demonstrate just how ingrained such antisemitism was. The standard application form to the Faculty of Medicine from the 1920s to the mid-1950s asked for religious denomination (with an urging to “be specific”) as well as the nationality of both parents. For many Jewish applicants, these questions proved difficult. Some would write “Jewish” as their parents’ nationality and “Hebrew” as their religious denomination; others would write the reverse. Some, though not most, listed “Canadian” as one or both parents’

UNIVERSITY OF TORONTO
 Application for Admission to the
MEDICINE 502297
 Faculty of SCHOOL of Arts, Medicine, Applied Science and Engineering, Household Science, Forestry, Music, Dentistry, Architecture, Physical and Health Education, Law.

College (Arts only) _____
 University, Victoria, Trinity St. Michael's

First Given Name _____ Second Given Name _____ Third Given Name, if any _____ Surname (in block letters) _____

Career or Profession for which Applicant is preparing (Arts and Applied Science only) _____

Permanent Post Office Address _____ Toronto Address _____ Telephone _____

Place of Birth **TORONTO** Date of Birth _____ Age **18**
 Month _____ Day _____ Year _____

Name of Father or Guardian _____ Father's Nationality _____ Father's Occupation _____

Father's Place of Birth **POLAND** Mother's Place of Birth **POLAND** Religious Denomination of Applicant (be specific) **HEBREW**

Information Record (The applicant must not make any further entry on this page. Please turn over.)

University of Toronto Faculty of Medicine application form, 1950. University of Toronto Archives. Office of Admissions. A1969-0008/195

RELIGIOUS PREFERENCE:
 Anglican..... Baptist..... Christian Science..... Jewish. Lutheran..... Orthodox.....
 Presb..... Rom. Cath..... Unitarian..... United..... Other (be specific).....
 PRESENT OCCUPATION, if not a full-time student ... **STUDENT**

University of Toronto Faculty of Medicine application form, 1960. University of Toronto Archives. Faculty of Medicine. A1979-0056/002 (05)

nationality. This emphasizes several important features of Toronto Jewish life in the mid-century: firstly, most Jewish seventeen- to twenty-year-old applicants were the children of immigrants or refugees, or were immigrants or refugees themselves¹⁰; secondly, Canadian antisemitism affected Jewish applicants' senses of identity; and thirdly, the idea of Jewish nationhood (both before and after the creation of the State of Israel) represented an important facet of Jewish applicants' cultural and national understandings.

NOTE.—This application is to be filled out in duplicate and returned to the Registrar of the University no later than September 10th.

UNIVERSITY OF TORONTO
Application for Admission to the

FACULTY of Medicine
Arts, Medicine, Applied Science and Engineering, Household Science, Forestry, Music, Dentistry

College* _____
University, Victoria, Trinity, St. Michael's

First Given Name [REDACTED]	Second Given Name [REDACTED]	Third Given Name, if any [REDACTED]	Surname [REDACTED]
Course*	Career or Profession for which Applicant is preparing*		
Permanent Address [REDACTED]	Toronto Address		Telephone [REDACTED]
Birthplace [REDACTED]	Month, Day and Year of Birth		Age 19
Name of Father or Guardian [REDACTED]	His Nationality <u>Jewish</u>	His Occupation [REDACTED]	
Mother's Nationality <u>Jewish</u>	Religious Denomination of Applicant <u>Hebrew</u>		

University of Toronto Faculty of Medicine application form, 1930. University of Toronto Archives. Office of Admissions. A1969-0008/187

As time went on, the application forms became more involved, requiring four completed pages of high school grades and demographic, social, physical, and habitual characteristics. On these forms, there was an entire section on "Church Societies and Activities" in which applicants

UNIVERSITY OF TORONTO
Application for Admission to the
FACULTY or SCHOOL of **MEDICINE**
Arts, Medicine, Applied Science and Engineering, Household Science, Forestry,
Dentistry, Physical and Health Education.

College* University
University, Victoria, Trinity, St. Michael's

First Given Name [Redacted] Second Given Name [Redacted] Third Given Name, if any [Redacted] Surname (in block letters) [Redacted]

Course† [Redacted] Career or Profession for which Applicant is preparing* [Redacted]

Permanent Address [Redacted] Toronto Address [Redacted] Telephone [Redacted]

Birthplace [Redacted] Date of Birth Month [Redacted] Day [Redacted] Year [Redacted] Age [Redacted]

Name of Father or Guardian [Redacted] Father's Nationality Stateless, ex-German Father's Occupation [Redacted]

Father's Place of Birth Hamburg Mother's Place of Birth Hamburg Religious Denomination of Applicant (be specific) Jewish

Educational Institutions attended: Elementary School: [Redacted] From 19 [Redacted] To 19 [Redacted]

Continuation or High School or Collegiate Institute [Redacted] From 19 [Redacted] To 19 [Redacted]

[Redacted] From 19 [Redacted] To 19 [Redacted]

[Redacted] From 19 [Redacted] To 19 [Redacted]

College or University [Redacted] From 19 [Redacted] To 19 [Redacted]

Special facts to be considered by the Committee on Admissions:
I had to emigrate from Germany in 1934 to Spain, where I had to earn my living and could not attend any medical school here. I lived in Spain till 1942 and from that time till May 1944 in Portugal, where I was in "residence forced". In Canada I am since June, 1st, 1944.

Signature and address of Person who certifies to Applicant's Character [Redacted] Date Received [Redacted]

Date of Application [Redacted]

University of Toronto Faculty of Medicine application form, 1944. University of Toronto Archives. Office of Admissions. A1969-0008/193

were asked whether they had taught Sunday school or joined the church choir. Jewish applicants devised many different ways of answering these questions, from crossing out “Church” and writing “Synagogue” to simply writing “N/A.” However they chose to answer these questions, it is clear that the system was set up in such a way as to make it obvious who the primary applicants were expected to be. No space was granted for those who might not be practising Christians and this obvious assumption of unity perpetuated a white, Gentile hegemony at the University of Toronto’s medical school.

Jews were in some ways the canaries in the coal mine, forced to endure antisemitic actions both formal and informal before shifting demographics and the influx of immigrants from around the world transformed

Has your educational training been broken by employment or absence from school? Indicate the nature of the interruption and dates.	19
<i>German Concentration Camp</i>	19 40

University of Toronto Faculty of Medicine application form, 1951. University of Toronto Archives. Office of Admissions. A1969-0008/195

other groups into primary targets of discrimination in Canada. Additionally and significantly, although Jewish applicants were expressly restricted by the quota system, women, Black people, and other perceived minorities (including Catholics) were subject to varying forms of discriminatory limitation. For example, in a letter from the Secretary to the Registrar at the Faculty of Medicine, dated May 25, 1923, a request is placed to reject an applicant because “when she wrote for an application we did not realize she was colored. Colored students are a problem when they get to the hospi-

tal and we would be glad if you could avoid accepting her application, if it is possible." This overt racism was not an unusual feature of admission practices in the 1920s, and vestiges of such discrimination still remain.

2. List below the community, church or athletic organizations in which you have been active.

(a) Church (Sunday School, Choir, Clubs, etc.)

Shevi Shomayim Synagogue
B'nei Britz, Hebrew Youth Association
Hechalutz Hatzair Youth Association,

University of Toronto Faculty of Medicine application form, 1958. University of Toronto Archives. Office of Admissions. A1969-0008/197

II. List below the community, church or athletic organizations in which you have been active.

(a) Church Societies and Activities:

Have you taught Sunday School? Yes

Have you been a member of the choir? Yes (synagogue)

Club activities.....

University of Toronto Faculty of Medicine application form, 1957. University of Toronto Archives. Office of Admissions. A1969-0008/197

May 25th, 1923.

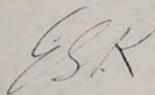
Dr. James Brebner,
Registrar,
University of Toronto.

Dear Dr. Brebner:-

I am enclosing an application for
admission received from Miss [REDACTED],
[REDACTED]

When she wrote for an application
we did not realize she was colored. Colored students
are a problem when they get to the hospital and we
would be glad if you could avoid accepting her appli-
cation, if it is possible.

Yours faithfully,



Secretary.

Letter from University of Toronto Faculty of Medicine Secretary to Registrar, 1923.
University of Toronto Archives. Faculty of Medicine. A1979-0023/005 (32)



Toronto Hospitals and the Development of Mount Sinai Hospital

The possibility of training in one of the Toronto hospitals located near the university campus was, as the preceding letter demonstrates, not open to those who did not meet strict racial, religious, and gender-based criteria. As Ira Robinson describes in *A History of Antisemitism in Canada*, “Until the post-Second World War era, no Jewish doctor was able to obtain a clinical position at the University of Toronto or, with one exception, an indoor staff position at a teaching hospital in Toronto.”¹¹ The profiles shared below demonstrate the very real challenges that Jewish medical students, interns, and fellows faced in Toronto when trying to obtain the necessary training to become a licensed physician or to specialize in certain fields. After initially barring Jewish residents altogether, the Toronto



teaching hospitals maintained a “Hebrew list,” from which precisely two Jewish interns were permitted to be accepted at Toronto General Hospital, and one Jewish intern at Toronto Western Hospital.¹² This quota effectively meant that the vast majority of Jewish trainees had to go abroad, frequently to the United States or the United Kingdom, to complete their training. Some unfortunately were not able to pursue this option and were forced to abandon the practise of medicine.¹³

Many cite Dr. Barnet Berris as the pioneering Jewish doctor who broke through the antisemitic barriers facing Jews in the profession and obtained the first staff position at Toronto General Hospital. Berris’s memoir, *Medicine: My Story*, details his experiences as a Jewish doctor and his many encounters with antisemitism as he progressed in medicine. Born in Toronto to a Polish mother and Russian father, both Jewish immigrants, Berris graduated from the Faculty of Medicine in 1944. Expecting to be accepted at either Toronto General or Toronto Western given his marks, Berris was shocked to discover that he had been rejected because of the Jewish quota and labelled the “Alternate Hebrew” on the “Hebrew List” at Toronto General. After asking to see the list, he discovered that the one Jewish trainee listed under Toronto Western had in fact decided to go to Toronto General. Seeing as he had been the runner-up on the “Hebrew list,” Berris assumed that the single Jewish position at Western was now vacant and asked whether he could fill that spot. He was summarily rejected and never received an explanation. “In a naïve way,” writes Berris, “I was not prepared to accept the presence of antisemitism in a university I thought would have a moral standard above the norm, particularly in a medical faculty I thought was composed of members of a noble and caring



profession.”¹⁴ Although Berris was able to secure an internship position at St. Joseph’s Hospital, this first exposure to antisemitism opened his eyes to the very real discrimination present in Toronto’s medical community.

After joining the Army in 1945 and completing medical residency training at the University of Minnesota, Berris returned to Toronto in search of a job. He met with the Chair of the Department of Medicine, Dr. Roy Farquharson, seeking an appointment to the university staff and was rebuffed on the invented claim that “we really don’t know you.”¹⁵ Berris knew the real reason for his rejection: “Jewish doctors were not considered for staff appointments in the University of Toronto Department of Medicine.”¹⁶ Farquharson eventually relented and offered Berris a chance to complete a fellowship in medicine, with the knowledge that it was incredibly unlikely for a Jew to be appointed to the university at the end of a fellowship. During his time as a fellow at Toronto General, Berris was “very conscious of being Jewish” and encountered antisemitism in small and large ways; nonetheless, he excelled and was eventually appointed on staff at the Toronto General Hospital in 1951. He worked there for thirteen years, always on his “best behaviour” as a Jew in a hostile environment, until moving to Mount Sinai Hospital to become Chief of Medicine in 1964. His legacy includes having one of the medical training academies at the University of Toronto named in his honour.

Mount Sinai became the hospital it is today in large part because so many Jewish medical students and interns needed a place to train and simply could not find one at the university teaching hospitals. Its origins are worth noting because of the efforts of certain forward-thinking indi-

viduals who recognized the need for a Jewish hospital: not only one that served Jewish patients in a culturally competent manner, but one that granted Jewish doctors a place to work given the antisemitic restrictions imposed at all the other Toronto hospitals. Four Jewish immigrant women, Mrs. Cohn, Miller, Spiegel, and Adler, spearheaded the campaign for



Dorothy Dworkin and Ezras Noshem: Members of the Mount Sinai Hospital Ladies' Auxiliary, Toronto ca. 1923 Ontario Jewish Archives, fonds 10, item 1

Mount Sinai as part of the Ezras Noshem ladies' aid organization, knocking on doors in the Jewish community to raise money for a new Jewish hospital.¹⁷ The Hebrew Maternity and Convalescent Hospital (later Mount Sinai) opened in 1923 on Yorkville Avenue in Toronto, with Dorothy Dworkin,



a Jewish nurse and fundraiser, appointed as President. It is important to remember the significant role that Jewish women played in the foundation of the hospital, especially given the intersections of sexism and antisemitism with which they had to contend.

Dr. Leonard Davies, Chief of Orthopaedics at Scarborough General Hospital and a 1944 graduate of the University of Toronto medical school, details the development of Mount Sinai Hospital in a 2009 letter to his classmate, the renowned neuroscientist Dr. Henry J. M. Barnett. Davies describes how Ben Sadowski, a Jewish businessman, philanthropist, and leader in Toronto's Jewish community, purchased the plot of land next to Toronto General Hospital on University Avenue where the Hospital for Sick Children currently stands. Having experienced antisemitic discrimination himself, including having a scholarship revoked when the donor discovered he was Jewish, Sadowski was determined that there should be a safe and reputable hospital close to the university for Jewish doctors to train and practise medicine. His aim was to have the Mount Sinai Hospital on Yorkville expanded and relocated to the University Avenue location.

After World War II, Sick Kids Hospital (then located on College Street) became interested in the plot of land that Sadowski had purchased for Mount Sinai, arguing that it was essential for their new premises to be located next to Toronto General as a world-renowned hospital. When they sent a delegation to bargain with Sadowski, "they expected his demands for money to be very steep because after all he was a Jew."¹⁸ Sadowski told the delegation that he would sell them the land for one dollar on the conditions that they would find a plot of land of equal size on University



Avenue for Mount Sinai Hospital, that they would modify their hiring practices to accept Jews as interns and staff at Sick Kids, and that Mount Sinai would become a university-affiliated teaching hospital. This is what eventually transpired, and Mount Sinai Hospital opened its current premises on University Avenue across from Sick Kids and next to Princess Margaret Cancer Centre in 1953. With the help of many ground-breaking doctors, some of whom are profiled below, Mount Sinai grew into a leading, internationally respected research and teaching hospital.

Sadowski was instrumental in prompting Vincent Massey, the Chancellor of the University of Toronto from 1947-1953, to change the university hospital hiring practices to accept Jewish interns, fellows, and staff: “He explained that there were no Jews on the staff of any of the teaching hospitals, that they refused to take Jewish interns except for two at the Toronto General Hospital and that they refused to train Jewish doctors in any of the specialties.”¹⁹ Massey was shocked to discover this and determined to halt the systemic antisemitism that had governed the University of Toronto and its associated teaching hospitals for years. Though the lifting of antisemitic restrictions took many years to come into full effect, it was a crucial step in the journey toward an equitable and inclusive medical community in Toronto.



Project Method, Interviews, and Acknowledgments

The idea for this project originated with Dr. Elliot Lass, a family physician in the Department of Family and Community Medicine, who proposed an investigation into the quota system that limited the attendance of Jewish medical students at the University of Toronto. In 2022, he and Dr. Ayelet Kuper (Senior Advisor on Antisemitism, 2021-2022) assembled a committee to investigate this issue, which also included Dr. Lisa Richardson (Temerty Medicine's Associate Dean, Inclusion and Diversity), Dr. Chaim Bell (Physician-in-Chief at Mount Sinai, who has conducted extensive archival research on this topic), and myself, Dr. Joanna Krongold (joint postdoctoral fellow at the Anne Tanenbaum Centre for Jewish Studies and the Temerty Faculty of Medicine). We received help from the staff at the



Ontario Jewish Archives and the Sidney Liswood Health Sciences Library at Mount Sinai Hospital.

As I pursued archival research on the quota system and Jewish medical students at the University of Toronto, Tys Klumpenhouwer and the staff at the University of Toronto Archives provided me with invaluable assistance. I was able to access admission records, medical school applications, administrative correspondence, and even photographs at the University of Toronto Archives that yielded crucial and sometimes shocking insights about the prevailing attitudes regarding Jews and other applicants from the 1920s to the 1960s.

Over the course of approximately six months, Dr. Lass and I conducted interviews via Zoom or telephone with fourteen senior doctors and scholars. All expressed a willingness to assist us in this endeavour, candidly sharing memories, thoughts, and opinions about their experiences with antisemitism before, during, and after their medical training. Some doctors chose to remain anonymous, to omit certain stories from the final project, or to remove themselves entirely from this publication; we have respected their wishes. The doctors that are represented in this document have given their consent to sharing their stories publicly. All quotations are attributed to the doctors being profiled unless otherwise specified.

Many if not most of the doctors we interviewed downplayed the antisemitism that they encountered, demonstrating an acceptance of just how ingrained anti-Jewish discrimination was at the time. Not knowing a world without antisemitism and possessing living memory of the genocide of Jews during the Holocaust, many of these doctors were forced to tol-



erate antisemitism as an implicit part of normal life in Toronto. As Berris writes in his memoir, “The accepted stance of most Jews, including myself, was not to make waves, to abide by the existing rules and customs and to blend into the community without drawing attention to ourselves.”²⁰ Far from negating Canadian antisemitism, the stories represented in this project confirm how entrenched it truly was: “there was no mechanism available to bring about any change in this area...there were no laws prohibiting such activities and minority groups at that time had very little influence, political or otherwise.”²¹ Jewish medical students and doctors were frequently made aware that they had to outperform their non-Jewish colleagues and maintain a spotless record in order to succeed.

Some interviewees asked that we omit the names of prominent antisemitic offenders or particularly damning encounters, showing a sense of compassion that sadly was not often extended to them as Jewish doctors. It is also important to note that the doctors with whom we spoke represent the success stories, those who overcame numerous obstacles in order to achieve their prestigious positions. The parallel story that cannot be told here is that of the many Jewish students who had the grades and desire to qualify for medical school but did not gain admission because of the quota system.

Dr. Lass and I were incredibly lucky to have spoken with Dr. Bernard Langer, the trailblazing surgeon whose story is shared below, just weeks before he died in February 2022. As with all of our interviews, our exchange with Dr. Langer added greatly to our understanding of the medical system in Toronto during the postwar years. Dr. Judith Friedland, a grad-



uate of the Physical and Occupational Therapy program in 1960, kindly spoke with us about her experiences related to antisemitism and sexism in her training and career. Dr. Jacalyn Duffin shared her wealth of knowledge, research, and practical experience with us through an interview and her written articles on quotas for Jews and women in the Canadian medical system.

We consider ourselves honoured to have had the chance to speak with the doctors who became our interview subjects. Their recollections, intelligence, generosity, and humour lent the project an authenticity and immersion in the subject matter that we never could have obtained through scholarly research alone. This project is dedicated to them.



PROFILES



Dr. Sam Rubenzahl – Class of 1954

Dr. Sam Rubenzahl was one of the earliest attendees of the University of Toronto's medical school with whom we had the pleasure of speaking. He began his premedical training in 1948 and experienced life in postwar Toronto as a relative newcomer; having grown up in Oshawa, Rubenzahl and his family moved to Toronto so that he could attend medical school. Life in Oshawa had its benefits and challenges. Rubenzahl recalls being part of a small Jewish community and a secular Jewish family. Although his family was not particularly religiously observant, Rubenzahl attended *cheder* (Jewish school) after hours, studied Jewish topics, and had a bar mitzvah. Antisemitism, whether overt or covert, was not a part of his daily life and "was not something I thought about much growing up." With a

non-Jewish best friend and acceptance from both the Jewish and Gentile communities in Oshawa, Rubenzahl did not encounter any discrimination in his early years.

Rather than originating in antisemitism, challenges presented themselves to Rubenzahl in the form of financial difficulties facing his family.



Dr. Sam Rubenzahl

Rubenzahl's father ran a small tailoring shop in Oshawa, but the family was by no means wealthy. When his parents separated, the family's pecuniary problems increased and in fact contributed to Rubenzahl's desire to become a physician. Across the street from Rubenzahl's father's tailor shop



was the office of a family doctor; as Rubenzahl became friends with the boys of the family, he realized that their lifestyle was something to which he could aspire. Their economic status allowed them to live far more comfortably than Rubenzahl's family, and a career in medicine became a serious consideration after that point.

When Rubenzahl applied to medical school at the University of Toronto from his high school in Oshawa, he was completely unaware of any quota limiting the attendance of Jewish medical students. "The important thing was getting the right marks," recalls Rubenzahl, "I sort of assumed that if I got the right marks, I would be accepted into medicine. And in fact, that's the way it worked out." Due to his exceptional academic achievements, Rubenzahl was accepted at the University of Toronto. The summer before he was to begin his medical school career, Rubenzahl's family, consisting of his mother and two sisters, moved with him to Toronto. Because of the family's financial difficulties, Rubenzahl could not afford to relocate to Toronto alone, let alone secure a spot in the dormitories or pay for tuition by himself. Throughout his medical school years, Rubenzahl's single mother had to work incredibly hard to support the family. Rubenzahl himself took any job he could find and worked "any time there was a spare moment" outside of the rigorous demands of his medical training.

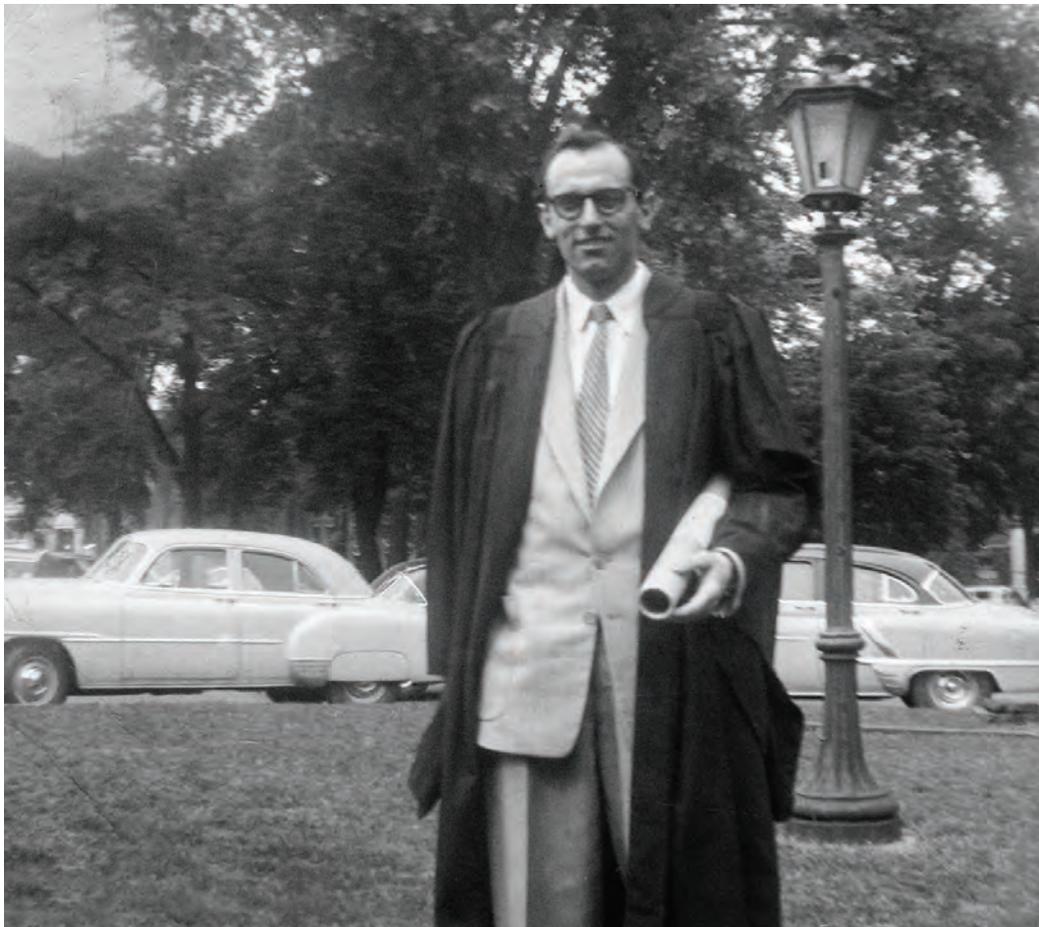
Despite these challenges, Rubenzahl excelled in medical school, forming friendships and collegial relationships with his fellow students. In fact, Rubenzahl's closest friends at the time were Gentiles, and anti-Jewish sentiment was never expressed directly to him from other students. None-



theless, medical school was the place where Rubenzahl first heard about the quota system, especially for Jewish doctors who wanted to pursue careers in medicine. This was confirmed at the five-year reunion meetings hosted by the Faculty of Medicine, at which Rubenzahl remembers a particularly affecting speech given by the pioneering neurologist, Dr. Henry J. M. Barnett. Though he was not Jewish, Dr. Barnett spoke openly about the quota system and lectured in detail about the topic to the entire group of alumni.

In Rubenzahl's final year of medical school, he had an experience that he reflects may have been an example of antisemitism from the administration while simultaneously demonstrating one non-Jewish friend's sincere affection, solidarity, and allyship. Tuition at the University of Toronto was due twice annually, in the fall and spring, and by the time Rubenzahl reached his final medical examinations he was unable to find enough money to pay for his second tuition installment. All of his sources of income had "pretty well been drying up" and despite trying every source available, Rubenzahl found himself in the final year of medical school studying for exams that he may never be permitted to write. When Rubenzahl went to discuss his situation with the Dean of the Faculty of Medicine, Dr. Joseph Arthur MacFarlane, he received only one response: "quit!" Dean MacFarlane advised Rubenzahl in no uncertain terms to leave the medical school, work for a year, and return when he had made enough money to complete his degree. Dazed, Rubenzahl left MacFarlane's office and returned home to continue studying, unsure of how the problem would resolve but determined not to lose all of his hard work.

One night just before the examinations were scheduled to take place, Rubenzahl was disturbed from studying by a knock at the door. When he opened it, Rubenzahl was shocked to see his closest non-Jewish friend standing on his doorstep, along with the friend's father. They came



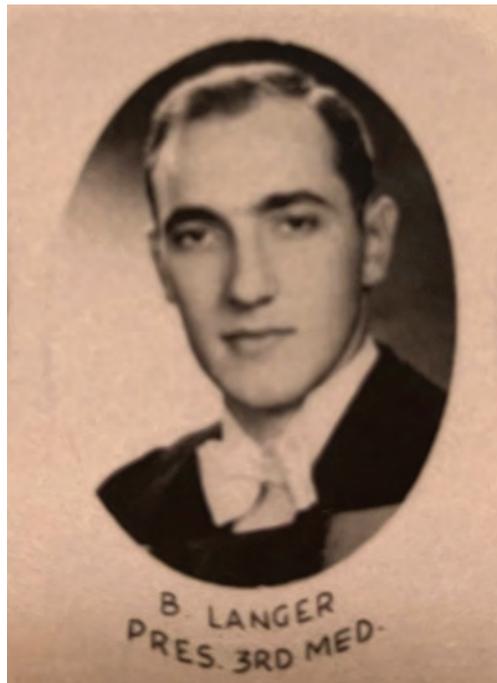
Dr. Sam Rubenzahl at his graduation from medical school

in and, aware of Rubenzahl's situation, "said they wanted to loan me the money for tuition. It was like money from heaven! And it saved me." This amazing act of generosity allowed Rubenzahl to write his exams, pursue training in Canada and the United Kingdom, and eventually establish his



own family practice. Rubenzahl paid the friend back for the loan around the time he got married and was working as a postgraduate, and the two remained close until the friend's untimely death.

Currently, Rubenzahl is inclined to characterize the Dean's response to his financial situation as antisemitic, although he is aware from conversations with colleagues that the incident could be interpreted in different ways. Nevertheless, what is clear is the extraordinary support and kindness of a friend willing to look past any barriers – whether financial, religious, ethnic, or cultural – that may have separated the two students. Rubenzahl went on to pursue a successful career as a physician, and at 92 years of age has helped countless patients over the course of his near sixty-year tenure at Baycrest Health Sciences Centre in Toronto.



Dr. Bernard Langer – Class of 1956

Dr. Bernard Langer's impact on the Jewish doctors who followed him at the University of Toronto's medical school was immense. In fact, it is rare to encounter a Jewish doctor who was not influenced by him while progressing through medical school, training, and job appointments in the 1950s and 1960s. "Bernie Langer was there ahead of me," recalls Dr. Bernard Goldman, "I felt protected by him having done it first." Dr. Charles Tator concurs, describing Dr. Langer as "somebody to look up to as having made it in the administration," a trailblazer who "broke through" the Protestant medical establishment of Toronto in the 1950s. Dr. Jack Colman cites Barnet Berris as the first Jew to overcome some of those barriers in

medicine, while Bernard Langer occupied a similarly ground-breaking position in surgery. One Jewish doctor from the class of 1966 puts it succinctly: “we admired and worshipped Bernie Langer.”

Such grand aspirations were far from the young Bernie Langer’s mind when he applied to medical school in 1950; though he would later



Dr. Bernard Langer (seated, right front row) in medical school

go on to shatter many antisemitic glass ceilings, he himself notes that “in a way it was antisemitism that spurred me in [the direction of medicine].” Having developed a passion and aptitude for mathematics, Langer had originally planned to pursue actuarial science as a career. A memorable visit with a non-Jewish high school guidance counsellor soon changed his



mind. He was told in no uncertain terms that banks and insurance companies, the only places in Toronto at the time to acquire the appropriate actuarial training, “do not hire Jews.” In need of a new career path, Langer observed that the best and brightest of Harbord Collegiate, his predominantly Jewish high school in downtown Toronto, were applying to medical school. He realized that medicine was a career seemingly open to Jews and decided to submit an application to the University of Toronto’s Faculty of Medicine.

Despite the possibility of gaining admission to medical school as a Jew (a possibility that was nonexistent in actuarial science), Langer was aware of a limitation on the number of Jewish applicants admitted to the first year of premedical school at the University of Toronto: “I knew there was a quota...everybody knew about the quota. It was just accepted as the way things were.” With this knowledge and his exceptional intellect, Langer worked hard in Grade 13 to achieve nothing but “firsts,” the highest standings possible in each of his subjects. Such academic achievement saw him through the admission process and once he arrived at medical school, he quickly realized that Jews made up roughly 20% of his incoming class. As Langer notes, however, “Jews were nowhere near 20% of the population in Toronto...so it was a pretty generous quota.” Nonetheless, as archival records and firsthand accounts demonstrate, not all those Jewish applicants who had competitive grades when they applied were admitted into the medical program at the University of Toronto.

Once he was accepted to medical school, Langer joined the only Jewish fraternity that existed at the time and mostly socialized with other



Jewish students. Having experienced antisemitic incidents as a child, such as being called “dirty Jew” by neighbourhood children and observing signs around the cottages at Lake Simcoe that read “No Jews Allowed,” Langer confronted more insidious forms of antisemitism while at medical school. This discrimination did not originate with his fellow students, most of whom came from Gentile backgrounds and some of whom remained lasting friends, but from the administration itself. For example, performance prizes were given as medical students achieved various milestones in their degrees, with one prestigious prize awarded to the second-year premedical student with the highest grades. In 1951, the year before Langer would be in contention for the honour, a Jewish student, Dr. May Cohen, had won the prize. “In my year, I had the highest marks,” Langer recalls, “[but] there was no prize. When I inquired at the Dean’s office about the prize, I was told that the donor had withdrawn the prize that year. I was given no reason why. The following year there was a prize awarded; [it was just that one year that] they revoked the prize. My assumption was that one Jewish prize winner was enough for that donor.”

Langer did not let this hurdle curtail his academic achievement, winning the Gold Medal for the highest first-class honours and gaining a much sought-after internship at Toronto General Hospital. “I knew that it was very hard for Jews to get positions in some hospitals, the Toronto General Hospital in particular,” says Langer. This implicit bias was made clearer to him when he decided that he wanted to train in surgery and had an interview with the Chair of the Department of Surgery: “He was a little reluctant. We didn’t talk about being Jewish at all, but he was reluctant because I was married, and he didn’t think I could handle rigours of surgi-

cal residency because I was married.” After assuring the Chair that he had won the Gold Medal, played on the varsity water polo team, was elected class president, and graduated at the top of his class, all while being married, Langer managed to convince the Chair that his marital status would not have an impact on his success as a surgeon.



Dr. Bernard Langer at his graduation from medical school

This incident highlights the ways in which Jews had to maintain a spotless record, often being required to outperform their non-Jewish counterparts in order to succeed in the profession: “because I was Jewish

and known to be Jewish, I had to make sure that I behaved in a way that represented the Jewish community in the best possible [light].” This became clear as Langer continued his training, trying to get a job in pediatric surgery at the Hospital for Sick Children. After being repeatedly rebuffed and told that he would have to complete more training in order to come on staff at Sick Kids, Langer eventually became Chief Resident at Toronto General Hospital. He realized that the Chiefs of Surgery at three major hospitals, Toronto General, Sick Kids, and Mount Sinai, all assumed that he would be going to Sinai after completing his training because he was Jewish. By the time an offer finally came from Sick Kids, Langer had formed important relationships at Toronto General and had developed a passion for adult surgery. He took a meeting with Dr. Fred Kergin, Toronto General’s Chief of Surgery, and explained the situation to him: “I had worked closely with this [Chief] for six months as Chief Resident and it had never occurred to him to offer me a job. His assumption was that...I was Jewish, so I was going to Sinai.” This was acknowledged as “just the way it is” by many Jewish doctors at the time, both those who ended up taking jobs at Mount Sinai and those who did not. Langer credits Dr. Kergin at Toronto General for thinking it over after the idea was proposed; several days later he received an offer to come on staff at the General, becoming the first Jewish surgeon appointed to a major Toronto teaching hospital.

Although Langer declares that this historic breakthrough was “ready to happen” due to the changing demographics of postwar Toronto, his appointment at Toronto General Hospital was not without controversy. Another Toronto-based doctor recalls that Langer was in fact initially rejected by the General, and that it took the advocacy of the Head of General

Surgery, Dr. Bruce Tovee, to convince the hospital administration to hire him: “[Langer’s] mentor, Bruce Tovee, said, ‘if Langer’s not good enough for you, then I’m not good enough for you.’” Tovee not only succeeded in getting Langer on staff at Toronto General, but also appointed him in Tovee’s old position as Head of Surgery for the Toronto Police Service,

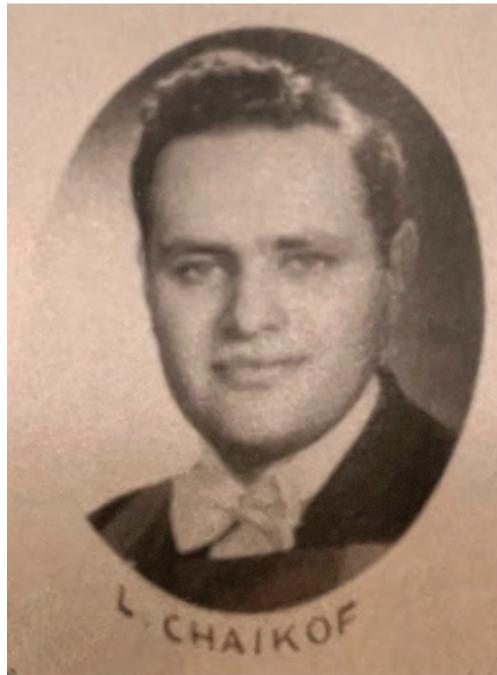


Dr. Bernard Langer (third from right) and colleagues at his graduation from medical school

allaying the fears of some doctors at Toronto General that Langer would take away their patient load and billings. “Toronto Police at the time was a Protestant boys’ club,” says a Toronto doctor who graduated from medical school a decade after Langer, “so it was a big statement.”



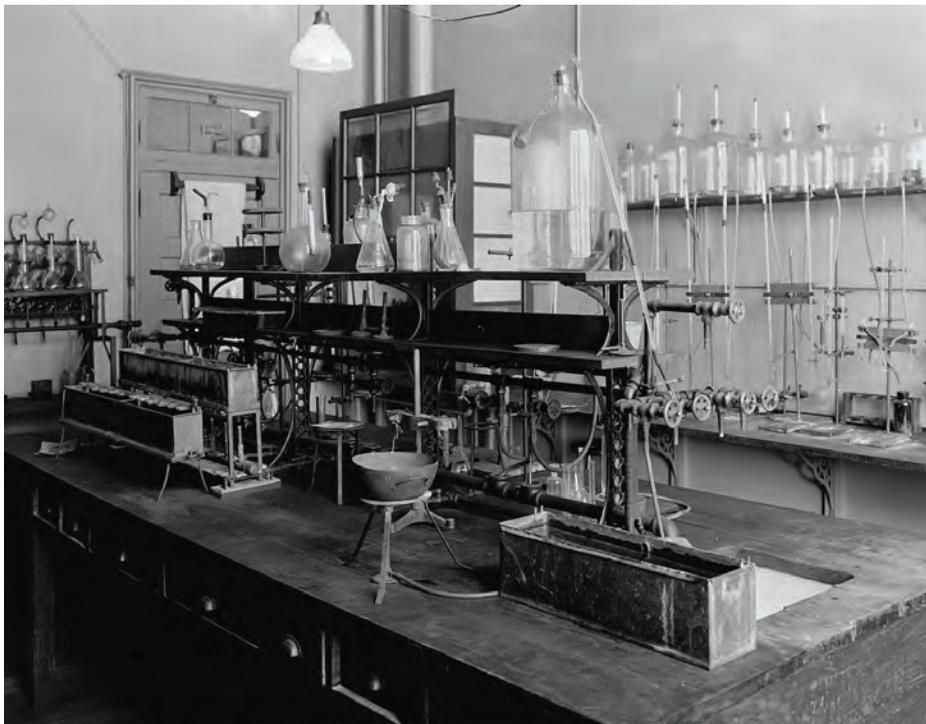
Langer's appointment as the first Jewish surgeon at Toronto General Hospital paved the way for other Jewish students, residents, and doctors to be taken into training programs and on staff at the General and other Toronto hospitals. As more and more Jewish doctors succeeded in gaining prominent leadership positions, Langer rose through the ranks of Toronto General Hospital and was appointed as Head of General Surgery in 1972, a position he held for seventeen years. In 1985, Dr. Langer and his team performed the first liver transplant in Toronto, and his pioneering work in the field of hepatobiliary/pancreatic surgery continues to have a positive impact on patients and medical professionals in Canada and around the world. Among his many accomplishments and accolades are his roles as Department Chair of Surgery at the University of Toronto, as President of the Canadian Association of General Surgeons, as President of the Society for Surgery of the Alimentary Tract, as Vice-President of the American Surgical Association, as President of the Royal College of Physicians and Surgeons of Canada, as co-creator of the Canadian Patient Safety Institute, and as an Officer of the Order of Canada. In overcoming some of the antisemitic barriers that had prevented Jewish doctors from progressing in the Toronto medical community, Bernie Langer was an exemplar and a trailblazer for those who followed him.



Dr. Leo Chaikof – Class of 1956

While Bernard Langer opened the door to more inclusive hiring practices at Toronto General Hospital, signalling a shift in the Toronto medical system, the antisemitism that lent an air of hostility to the University of Toronto medical school and the surrounding hospitals did not disappear overnight. Dr. Leo Chaikof, who also graduated in 1956, remembers a “cliquish” environment in which Jewish students felt safer associating with each other than with the Protestant majority at medical school. Chaikof grew up in Toronto, and recalls being called racial slurs such as “kike” and getting into fights with non-Jewish neighbourhood children. He attended Harbord Collegiate and later Forest Hill Collegiate, another predominantly Jewish high school slightly north of the downtown core.

The antisemitism that Chaikof encountered as a child did not stop him from joining Habonim, a Labour Zionist Jewish youth group, when he was old enough. In fact, Chaikof harboured ambitions to emigrate to a kibbutz in Israel, but when he discovered that there were no vacancies, he turned his sights to a scientific career closer to home. He applied and was accepted to the Honours Bachelor of Science program in Physiolo-



University of Toronto Archives, 2001-77-132MS

Banting and Best's laboratory, University of Toronto Medical Building. University of Toronto Archives. Department of University and Publicity fonds. A1965-0004[4.23]

gy and Biochemistry at the University of Toronto in 1948. While there, he worked at the Banting and Best laboratory at the University of Toronto with Dr. Charles Best himself, one of the renowned co-discoverers of insulin. After completing his BSc and getting married, Chaikof was accepted to



the University of Toronto's medical school in 1952. Approximately 20% of Chaikof's incoming class was Jewish, and he recalls that an even steeper quota was imposed upon women: in his class of 150 students, fifteen were women, and only two were Jewish women. There were between nine and ten people assigned to clinic groups during medical school, and Chaikof remembers the how exclusive these small groups were when it came to the Jewish students.

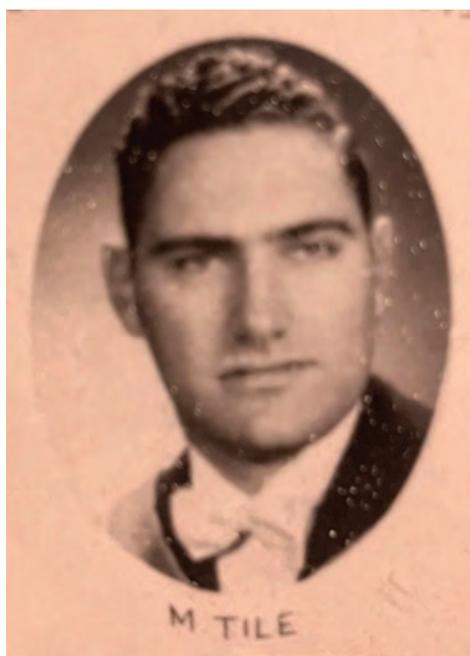
Having joined the Jewish fraternity, Chaikof witnessed firsthand the antisemitic attitudes that prevailed in Toronto at the time. A Jewish classmate of his applied to Toronto General Hospital, for example, and was told there was no work for him there. Armed with this knowledge, Chaikof interned at Mount Sinai Hospital and then faced a difficult decision. In order to complete his residency and gain crucial surgical experience, Chaikof would have to relocate to the United States to complete his training. He ultimately decided to take this route, becoming a surgical resident at the Henry Ford Hospital in Detroit in 1957.

Although the atmosphere in Detroit was different than that in Toronto, it too presented Chaikof with troubling instances of discrimination, intimidation, and antisemitism. He recollects one disturbing experience during his residency at Ford in which anti-Jewish sentiment was on full display. As he and his team were preparing a patient for surgery that required epidural anaesthesia, Chaikof witnessed the resident anaesthesiologist paint a swastika on the patient's bare skin with iodine. Whether this frightening act of antisemitism was directed at Chaikof or the patient is not clear, but the chilling effect of it demonstrates how pervasive and blatant



anti-Jewish hatred remained in North American society during the late 1950s.

When Chaikof returned to Toronto in the early 1960s, he was able to get a job in surgery at the Doctor's Hospital, a largely Jewish institution located on Brunswick Street in downtown Toronto that had been in operation for just under ten years when Chaikof came on staff. He held a partnership and became Chief of Surgery at Doctor's Hospital, working there from 1976-1991 before moving to Toronto Western Hospital, where he finished his surgical career. Overcoming the obstacles of antisemitism that were placed in front of him, from childhood through to his surgical training, Chaikof became a specialist in colon and bowel operations and practiced general surgery over the course of a nearly fifty-year career.



Dr. Marvin Tile – Class of 1957

Dr. Marvin Tile, who would go on to become a pioneering orthopaedic surgeon, was born in Toronto at Mount Sinai Hospital on Yorkville Avenue to Polish immigrant parents on January 11, 1933, just nineteen days before Adolf Hitler was appointed chancellor of Germany. The shadow of the Second World War hung over his childhood as it did over many families living in the Ward and Kensington Market, neighbourhoods known for their Jewish and immigrant populations. Tile grew up on Euclid Avenue in a home owned by a Hoffman family, who lived on the first and third floor of the house, with the Tiles on the second. The son of the Hoffman family, Teddy, was a medical student and became a hero to Tile, who would go up to the third floor room where Teddy studied to “hug him and bug him.”



When Canada joined the war effort, Teddy was determined to quit medical school and enlist in the RCAF, despite his parents' objections and the possibility of fast-tracking his medical degree. Tragically, Teddy Hoffman was shot down flying missions over Europe; his death had a profound impact on Tile's life and influenced his decision to pursue medicine as a profession.

Despite this connection with the University of Toronto medical school, Tile did not come from a family of doctors and his desire to become a physician was by no means certain when he was a child. However, one of his earliest memories can be dated to his first encounter with the medical profession. When he was four years old, Tile fell off his tricycle and broke his clavicle. His mother took him to the Victoria Hospital for Sick Children, located on College Street, where he was treated with reassuring kindness and expert care by the physician who bound his arm in a sling. When Tile fractured his ankle in a football injury during his final year of high school, he had a similarly positive experience at the Wellesley Hospital's emergency room, eventually becoming a friend and colleague of the doctor who treated him there. This incident not only strengthened his desire to become a medical doctor but also to pursue an academic career.

Tile was very involved in athletics during his high school years at Harbord Collegiate, a predominantly Jewish school with exceptional scholarship: "there was nothing like it in the province and everyone knew it." The quota limiting the admission of Jewish students, especially in medicine and dentistry, was well-known to the students at Harbord, says Tile. As he recalls, Jewish applicants had to take nine subjects and have a min-

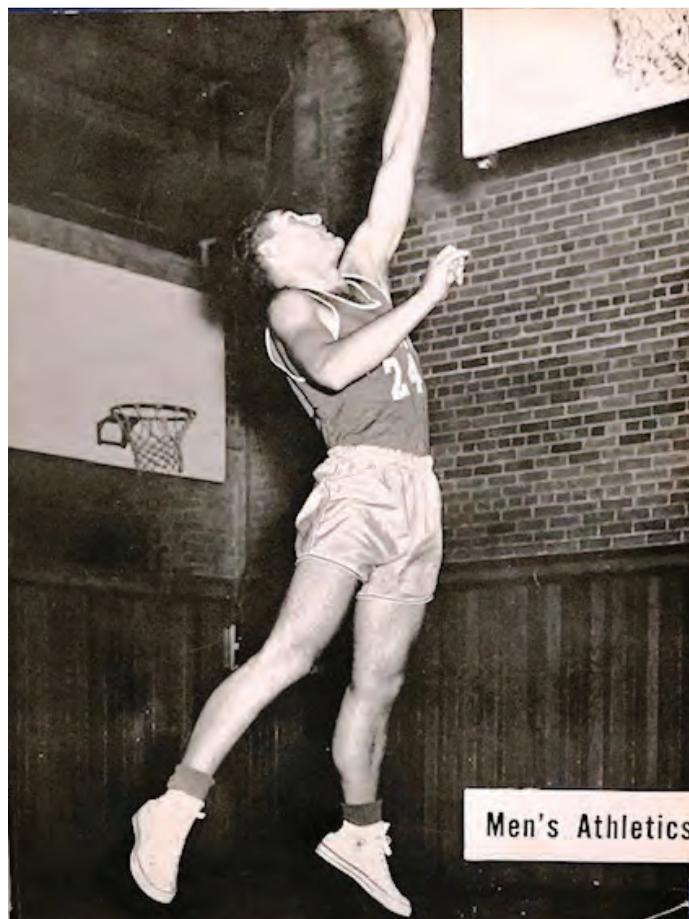


imum of seven “firsts” (grades of 80% or over) in order to “even get close to the medical school.” Competition among the students at Harbord was fierce. Knowing his weakness in French, which at the time comprised two essential subjects, Tile arranged for a strict but kind French teacher to give lunchtime seminars to some members of the football team. He has never forgotten how that teacher went above and beyond her regular assignment to help and doubts he would have been accepted without high marks in French.

Graduating with seven “firsts” and two “seconds,” Tile was accepted into medical school in the “bottom rung” of the Jewish applicants from Harbord. However, a Jewish friend of his who had six “firsts” was not so lucky. Had this friend’s rejection been based solely on marks, Tile would not have considered it part of an antisemitic quota; however, he remembers distinctly that another non-Jewish friend only got five “firsts” and was accepted to medical school. The admissions standards at the University of Toronto in the early 1950s clearly had to do with more than simply grades.

Quick to situate this discrimination in its historical context, Tile notes that over time the quota system, perhaps unwritten but nevertheless prominent and detrimental, applied to many marginalized groups in addition to Jews, including Black, Chinese, South Asian, and women applicants. The intersection of these different forms of discrimination perpetuated the dominance of a largely white, male, Protestant majority at the University of Toronto medical school.²² Tile’s philosophical response to the antisemitism that he readily admits he confronted during and after his medical training is to deal with every discriminatory act vocally while continuing to excel as

much as possible. Although during the war years he faced overt antisemitic incidents and personally had the experience of knocking down signs that barred Jews from Kew Beach and Wilcox Lake, legislation to ban these obvious acts of antisemitism was passed in Ontario after World War II. Therefore, Tile maintains that most, though not all, antisemitism has since become covert and expressed through individual bias.



Dr. Marvin Tile on the University of Toronto varsity basketball team

Once admitted to premedical school in 1951, Tile recalls encountering a sense of disdain tinged with antisemitism from some fellow students



who had attended private schools like Upper Canada College or the University of Toronto Schools. On the first day of classes, Tile was seated with a non-Jewish Ukrainian friend, both of them dressed in leather jackets, white buck shoes, and outlandish shirts. As Dean Joseph Arthur MacFarlane rose to give a serious address to the incoming class about the solemn undertaking of the “the best of all professions,” the Hippocratic Oath, and the importance of behaving and dressing properly, an altercation ensued between the well-dressed private school students and the scrappy “bunch of Jew boys from downtown” that almost resulted in a fist fight. In that moment, it didn’t matter that Tile’s friend was not Jewish; he was seen as a “downtown bum” and looked down upon as a Jew by association.

In short order, Tile remembers, the same students whose contempt so rankled him became his friends and colleagues as they all faced the same gruelling demands of medical school. Tile excelled during his time at the University of Toronto, playing for three years on the varsity basketball team, getting married, and graduating with two children in tow and one on the way. Thinking that he wanted to set up a family practice in the east end of Toronto, Tile got an internship at Toronto East General Hospital. Partway through his first year of interning, Tile decided that orthopaedics was in his future and was supported by Dr. Ed Simmons, who would become “one of the great back surgeons of the world in his time.” Despite the well-known adage that no one at Toronto East General could ever get into the Department of Surgery at the University of Toronto, Dr. Simmons and a number of other doctors saw a promising future for Tile in orthopaedics and fought hard for him to be accepted. Tile says that their support had nothing to do with perceptions of Jewishness, and he credits them as key factors in his

success in the field.

As Tile progressed in the world of orthopaedics, he obtained fellowships in Europe and Israel and staff positions at St. Joseph's Hospital and Sunnybrook Health Sciences Centre, the large Veteran's Hospital that was in the early stages of becoming a public teaching hospital affiliated with



Dr. Marvin Tile (second from right) at his graduation from medical school, with his pregnant wife Esther, son Gary, and colleagues

the University of Toronto's Faculty of Medicine. Securing these positions, however, was a struggle. Dr. Ted Dewar, the long-term University of Toronto Professor of Orthopaedics at the time, told Tile in no uncertain terms that he belonged at the Mount Sinai Hospital; though the reason for this was unstated, it was obvious that it was related to his Jewishness. This did

not stop Tile, who had the support of the Surgeon-in-Chief of Sunnybrook and St. Joseph's, Dr. George Pennall (Tile's mentor and eventually his colleague and "greatest supporter"). In 1968, Tile was asked to become Chief of Orthopaedics at Sunnybrook; he agreed if the Board would commit to building a Trauma Unit on site. The Sunnybrook Board accepted these terms, and the Trauma Unit was built in 1971 with Tile coming on



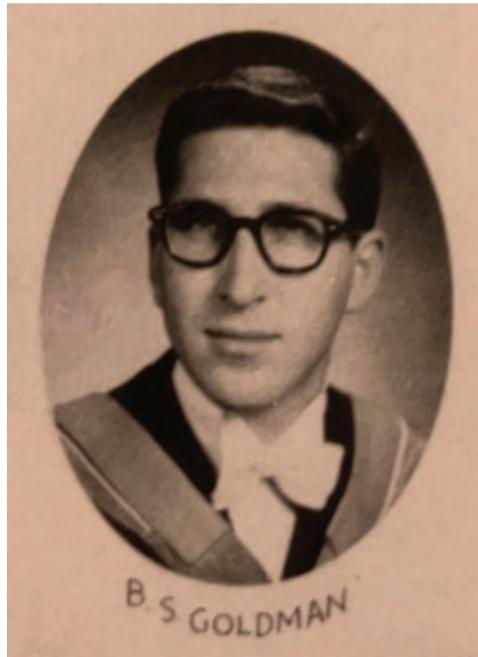
Dr. Marvin Tile receiving the Order of Canada in 2009 from the Governor General of Canada, Michaëlle Jean

staff as Chief of Orthopaedics that year. Five years later, the Trauma Unit was approved by the Ontario government, becoming the first and (still) largest Trauma Unit in Canada.

In the face of overt and covert antisemitism over the years, including at exclusive Toronto institutions like the Granite Club and the Royal Canadian Yacht Club, Tile went on to help establish the undergraduate



trauma teaching program, the paramedic program, and the expansion of both the trauma program and the orthopaedic division at Sunnybrook. His ground-breaking work in orthopaedics included participation in the first total hip replacement surgeries in Canada after his fellowship in England, being the founding president of the Ontario Orthopedic Association, and the past president of the International Society for the Study of the Lumbar Spine, the Canadian Orthopaedic Association, and the AO Foundation in Davos, Switzerland. He was awarded the Order of Canada in 2009 for his invaluable contributions to the research, education, and practice of orthopaedics through his numerous articles, books, and presentations. Dr. Tile was able to overcome the barriers facing him as a Jewish doctor, working to combat antisemitism personally and professionally.



Dr. Bernard Goldman – Class of 1960

As with many Jewish physicians who were medical students at the University of Toronto in the postwar period, Dr. Bernard Goldman remembers that antisemitism was very much “in the air” at the time, though it only occasionally “surfaced.” Goldman grew up in a Jewish household in the Harbord Street neighbourhood in downtown Toronto, an area that was mostly populated by Jews in the 1930s and 1940s. Nonetheless, Goldman remembers avoiding certain walking routes to prevent “being hassled on the way to school” by non-Jewish neighbourhood boys. In a particularly memorable excursion, Goldman’s father, a pharmacist, took him to a retail



pharmacists' convention at a then-segregated hotel in Muskoka. Goldman's father and other Jewish colleagues had to walk into the nearby town carrying a baseball bat in anticipation of any antisemitic incident that may occur.

Despite these early encounters with antisemitism, Goldman learned from his father how to live as a proud Jew while getting along with people of many different backgrounds. Goldman's father harboured the ambition and the academic achievements to pursue medicine but was unable to afford the tuition. Instead, he graduated from the Faculty of Pharmacy as a Gold Medallist in 1933 and ran a downtown pharmacy, eventually becoming the first Jewish president of the Toronto and subsequently Ontario and Canada Retail Pharmacists' Associations. Goldman's father supported many of the high school and university-age customers at his store to pursue careers in medicine, as well as returning soldiers after World War II. In addition to this store, Goldman's father later owned a drugstore in the predominantly Gentile neighbourhood at Christie and Dupont. This second store provided Goldman with an opportunity to observe firsthand his father's skill of adapting to many different social and professional situations. "He was the epitome of a role model," says Goldman; his father's suave nature, quick intellect, and adeptness at public speaking meant that "he had no problem moving in many different circles" and the family did not experience any antisemitism or hostility from the local clientele.

In part owing to his father's curtailed dream of becoming a doctor, and in part owing to the impact of physicians in Goldman's life, from the paediatricians who set his broken arm, gave him stitches, or removed his



appendix as a child to the doctors who were his father's colleagues, Goldman felt destined for a medical career. After moving north to the Forest Hill neighbourhood as a young teen, Goldman attended Forest Hill Collegiate Institute and excelled in high school, joining the Jewish fraternity and winning many awards for scholastic achievements. When it came time to apply to medical school, Goldman was very much aware of the quotas that limited Jewish enrollment: "Everybody knew it. It was just common knowledge. We all worked hard to do as well as we could." Having obtained the necessary grades, Goldman was one of the Jewish students to make up the implicit 25% quota in place at the time.

While at medical school, Goldman recalls a collegial and respectful atmosphere within clinic groups, which were made up of Jewish and Gentile students. Goldman never once encountered an overt antisemitic incident during his time at the University of Toronto. He was "insulated by decent people" and got along well with his colleagues, performing in the Faculty of Medicine's musical, *Daffydil*, and even earning his athletic letter playing varsity soccer, volleyball, and hockey. In addition to these activities, Goldman's outstanding academic record led to his winning the Silver Medal (along with Dr. Martin Barkin²³) and choosing to intern at Mount Sinai Hospital. Goldman "wanted to be part of Mount Sinai's potential within the University," although the atmosphere of unspoken antisemitism at Toronto General may have also been a factor in his decision. Those Jewish interns who went to Toronto General at the time (for example, Bernard Langer, Marvin Tile, and Harold Hoffman) "maybe had more guts to tough it out there," says Goldman.

After interning at Mount Sinai, Goldman found himself in a position to experience the culture of Toronto General Hospital firsthand, completing his residency there as well as at the Hospital for Sick Children. He was accepted as a fellow in the Cardiovascular and Thoracic training program under Dr. Bill Bigelow, the pioneering Canadian heart surgeon. As a research fellow in Dr. Bigelow's lab, working on hy-



University of Toronto Archives, WFM040-2

Members of *Daffydil* in performance, University of Toronto Faculty of Medicine, 1948. University of Toronto Archives. Walter F. Mackenzie fonds. B2003-0001/059-2

pothermia and hibernation, Goldman was forced to confront real antisemitism for the first time in his medical training. His research year had discovered a flaw in the previous investigators' work, and he found himself the recipient of a prior investigator's hostility. Obscenities and

racial slurs such as “dirty kike” were also directed at Goldman from the hard-drinking Cardiac Surgical Resident at Toronto General Hospital, to whom Goldman would be assigned in his first clinical rotation. When a lab mate brought this to the attention of the Professor of Surgery, Goldman was quickly switched to a General Surgery rotation. Though



Dr. Bernard Goldman after receiving the Order of Canada in 2009

Goldman initially felt dislocated, the General Surgery experience was extremely positive. He was awarded the prestigious McLaughlin Fellowship to do chest surgery in England and cardiac surgical research in Boston. At the end of his third year on staff at Toronto General with an appointment



at Mount Sinai, Goldman was advised by Dr. Bigelow to accept a position at Queen's University. Knowing that his departure might mean the end of his opportunities at Toronto General, whether owing to his Jewishness or not, Goldman was assisted in his conundrum by two supportive mentors: Dr. Bruce Tovee, the leading General Surgeon at Toronto General, and Dr. David Bohnen, who was Surgeon-in-Chief at Mount Sinai. These two well-established doctors stood by Goldman, motivated by nothing but "fairness and decency," and preserved his position at Toronto General: "their mentorship really took antisemitism out of the picture."

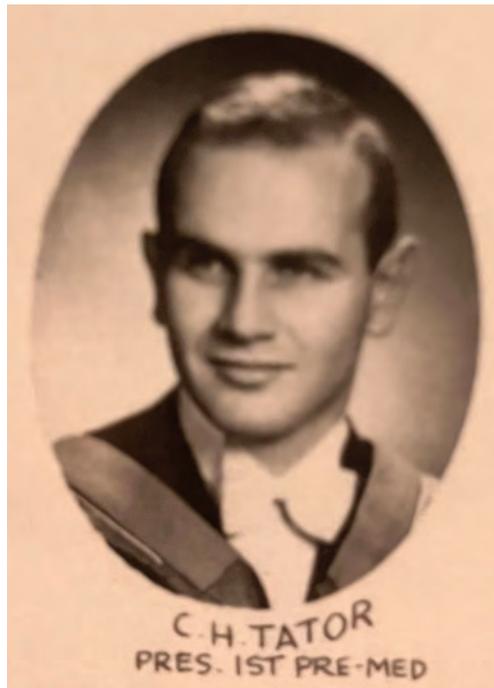
As Goldman completed his training and progressed in his career, he confronted antisemitism in mostly subtle iterations. For example, he would be asked questions or hear comments about "the Jews" rooted largely in misunderstanding and ignorance and only very occasionally in willful and deliberate discrimination. While not officially enshrining antisemitism into any written code, these actions were examples of the "good Christian genteel recognition that you're not there, you're not them." At one point, Goldman got tired of the seemingly relentless jokes from a colleague that had the flavour of antisemitism about them and put him in his place. Goldman remembers an anaesthetist at Sunnybrook Health Sciences Centre, the hospital at which he eventually became the Head of Cardiovascular Surgery and Surgeon-in-Chief, railing against the Jewishness of Sunnybrook and ranting about seemingly excess Jewish patients.

At this point in his life, rather than dwelling on the antisemitism he encountered, Goldman focuses on the kind and generous colleagues, mentors, patients, and friends at Toronto General, Mount Sinai, Sun-

nybrook, and during his clinical and research placements in the United Kingdom and the United States who embraced and encouraged him. He possessed the marks, skills, and work ethic to become an Order of Canada-winning surgeon, initiating breakthroughs in cardiovascular research, treatment, and teaching. Keeping the lessons learned from his father close at hand, Goldman is a clinician, investigator, teacher, mentor, editor, author, and proud Jew who strove for excellence in his career and “lived a life that was fully aware [of] but not intimidated” by overt or implicit antisemitism.



Dr. Bernard Goldman in his role as Surgeon-in-Chief at Sunnybrook Health Sciences Centre



Dr. Charles Tator – Class of 1961

From a very early age, Dr. Charles Tator was aware of the antisemitism that was rampant in Toronto during and after World War II. Tator's mother, whose family had fled from Galicia before she was two years old, instilled in young Charles the knowledge and concern that antisemitism was a part of life. Even as a toddler, Tator remembers being warned to watch out for families in the neighbourhood that had the reputation of discriminating against Jews. Tator experienced these fears through his mother's eyes, although he himself was never the object of antisemitic discrimination during elementary school, middle school, or high school.



Affectionately called “Husky” because of his Jewish name Yeheskel, Tator attended Forest Hill Collegiate and was an excellent student throughout his public school years.

It was at Camp Wahanowin, a secular Jewish camp in Orillia, Ontario, during the summer after his final year of high school that Tator began to entertain serious thoughts of applying to medical school at the University of Toronto. All of the people that Tator liked and looked up to at camp were medical students, and this respect convinced him that medical school would be the right place for him. Tator’s decision was not a straightforward or obvious one owing to his mother’s negative history with the medical profession. Her father (Tator’s namesake) died when she was just fifteen years old at Toronto Western Hospital and her favourite brother later died of undiagnosed appendicitis. These experiences of perceived medical negligence inspired an aversion to doctors in Tator’s mother, and she vehemently objected to his going to medical school. Brooking his mother’s disappointment at his career choice, Tator was accepted to premedical school in 1955 along with approximately thirty other Jewish students. In their incoming class of 140-145 students, roughly 20% were Jewish.

Like many other doctors, Tator recalls that antisemitism was “in the air” during medical school. He had heard through rumours and classmates that there was an attitude of antisemitism in the medical profession and that those who wanted to train in specialties were not able to find placements to do so in Toronto. While antisemitism “didn’t rear its head with me” in medical school proper, Tator did experience it while working a summer job as an orderly at Toronto General Hospital after his second year

of premedical training. Since the medical career path had not been “in me since diapers like some other people,” Tator wanted to make sure that being a doctor was a good career choice. Having chosen the hospital in which he was born, and telling no one about his Jewish background, Tator experienced rampant antisemitism for the first time at Toronto General.



Dr. Charles Tator, courtesy of the Canadian Medical Hall of Fame

“What I heard was shocking,” recalls Tator, noting that it was not the doctors or nursing staff but the orderlies who perpetuated antisemitic stereotypes and gave voice to racist epithets. They would hurl insults such as “dirty Jew” at people, claiming that Jews “had all the advantages and they don’t do any work, [that] they’re nogoodniks and thieves.” Not know-



ing that Tator was Jewish, these slurs were not directed at him but nonetheless demonstrated a level of accepted and targeted bigotry that Tator did not experience either before or since. Tator says that in retrospect he regrets not confronting and challenging the orderlies or telling them he was Jewish. He was so intent on discovering whether medicine really was a desirable career and had a sufficiently resilient personality that he was able to dismiss the orderlies' ignorance. The possibility of rising above this "corridor chatter" and not taking it personally may have had to do with Tator's ability to "pass" as non-Jewish; with reddish-blond hair from his mother, blue eyes from his father, and a last name that did not sound particularly Jewish, Tator for the most part was able to avoid antisemitism directed toward him in particular.

Despite having faced antisemitism head-on while working as an orderly at Toronto General, Tator's experience at the hospital confirmed his desire to become a doctor, and in particular, a surgeon. He was assigned to the operating room in the Private Patients' Pavilion on the top floor of Toronto General and "saw the world's greatest surgeons there, unbelievably skillful people." Tator was completely "mesmerized" and inspired by what he saw; "I wanted to be them," he recalls. This experience was, more than anything else, the deciding factor in determining Tator's career choice: "I made up my mind that I wanted to be a doctor and to be a surgeon in specific." Tator went back to medical school proper, having completed his two years of premedical training and his job as an orderly, with renewed passion and ambition. He loved medical school and found that "the brain was the thing that fascinated me the most." This fascination ultimately led to his pursuit of a Master's and PhD in Neuropathology.



By the time Tator was ready to intern and specialize in neurosurgery, he sensed that a change was occurring in existing antisemitic attitudes in Toronto. He felt no pressure or obligation to leave the city in order to specialize and was never told that neurosurgery was not an acceptable field because he was Jewish. Pioneers like Dr. Bernard Langer made it seem possible for other Jewish trailblazers, such as Tator, to achieve their dreams and ambitions in research, surgery, teaching, and administration. Tator had Jewish role models and leaders in the field of neurosurgery to look up to, and felt that he was “never held back from doing anything I wanted to do” because he was Jewish.

Tator is aware of the fact that racism and antisemitism have been and continue to be features of Canadian life, and his wife, Carol Tator, is in fact a renowned scholar of racism and social justice issues in Canada. While acknowledging the necessary work still to be done, he believes that the elimination of many expressions of overt racism, prejudice, and antisemitism, including the quota system for Jewish medical students, is a tribute to the progress made in Canada since his parents’ generation. Tator became the first full-time neurosurgeon at Sunnybrook Health Sciences Centre and later the Neurosurgery Chief at Toronto Western Hospital, and his innovative work in the treatment of spinal cord injuries and concussions has had far-reaching impacts both nationally and internationally. Tator was awarded a Lifetime Achievement Award from the Canadian Spine Society in 2003 and was promoted from Member to Officer of the Order of Canada in 2017. He remains the only Jew to have held the position of Head of the Division of Neurosurgery at the University of Toronto in its 100-year history.



Dr. Elaine Manace Borins – Class of 1962

Dr. Elaine Manace Borins occupies a significant position in the history of quotas at the University of Toronto's medical school and the antisemitism that defined training and hiring practices in Toronto hospitals in the postwar period. Not only was Borins a Jewish woman, by extension facing the intersection of at least two different kinds of discrimination, but she comes from a long line of Jewish doctors who graduated from the University of Toronto. Her great-aunt was, in fact, the first Jewish woman to graduate from medical school in Canada in 1908. However, she was unable



to get a license to practice medicine because women were barred from internship positions (a bias that persisted for decades and ultimately led to the formation of Women's College Hospital in Toronto).

Dr. Borins' father, Bernard Abraham Manace (born with the last name Manischewitz), also graduated from the University of Toronto's Faculty of Medicine in 1926. When Dr. Manace applied to medical school in 1920, he did not experience any restrictions affecting his application based on his Jewishness. However, because Jews at the time were not permitted to train and obtain a license to practise in Toronto, Borins's father secured an internship position in the United States and had to change his name from Manischewitz to Manace to sound less Jewish. After training in the United States for seven years, Dr. Manace returned to Canada in 1933; even then, he was unable to find work at Toronto General Hospital because of deep-seated biases against Jewish doctors. Dr. Manace went on to become a key physician in the creation of Mount Sinai Hospital on Yorkville Avenue.

When Borins was a child and teenager, growing up in Toronto and attending Forest Hill Collegiate for high school, she was aware of antisemitism but moved in predominantly Jewish circles. She recalls that "everybody knew about the quotas" in high school, but that admission to the University of Toronto medical school was based on grades and different high school allotments at the time. In high school, she was repeatedly told when applying to medical school that she was "taking the place of a more deserving male applicant" and questioned about her motives for wanting to become a doctor. She attained the necessary marks to be accepted



and went for an initial interview with Dean Joseph Arthur MacFarlane in 1956, assuming that she would in fact be barred from attendance because of the Jewish quota. Instead, it became clear that rampant sexism posed more of a threat to her admission status. Borins recalls being told that the female quota was “10% of the class and not one more,” and that “women shouldn’t be going to medical school anyway.” After all, how could they guarantee that they would not get married, have children, and drop out? Facing down this blatant misogyny, Borins responded to Dean MacFarlane’s interview questions, including her stance on abortion, and discovered that deflecting these inquiries was a productive approach. She was ultimately successful, gaining acceptance into the first-year premedical program in 1956.

Once in medical school, Borins often overheard colleagues having conversations about people not looking right because they were Jewish, but such talk would cease when Borins appeared on the scene. The women in the class of 1962 stuck together whenever possible, although the class was sectioned alphabetically. Borins recalls that each class, regardless of the number of women present, would begin with a greeting of “Hello, gentlemen” from the presiding professor. After getting married while in medical school, Borins found out she was pregnant prior to her third year. She was wisely advised by her female obstetrician not to disclose her pregnancy and to be sure to pay her tuition, aware that the prevailing sexism at the University of Toronto meant that tuition was unlikely to be refunded in case of pregnancy. Knowledge of her pregnancy would likely have precluded Borins from being admitted into her third year, placing her entire academic career in jeopardy. Prior to having the baby, Borins had to obtain a

leave of absence from Dean MacFarlane. She was granted only one week, and then had to return to school and complete final exams.²⁴

Borins's work ethic and academic prowess led to her graduating second in her class, an achievement accomplished as a married woman with a young child. Antisemitism reared its head when it came time to seek



University of Toronto Archives, WFM105-1

Members of the Medical Women's Undergraduate Association at a social, 1952.
University of Toronto Archives. Walter F. Mackenzie fonds. B2003-0001/105-1

internship positions. By tradition, the graduating Gold Medallist always got to choose their internship and subsequent residency location, and the most sought-after position at the time was cardiovascular surgery at Toronto General Hospital. However, the Gold Medallist of the class of 1962, who happened to be Jewish, was not chosen for the top residency position; rather, it was offered to the non-Jewish person who had rated in tenth po-



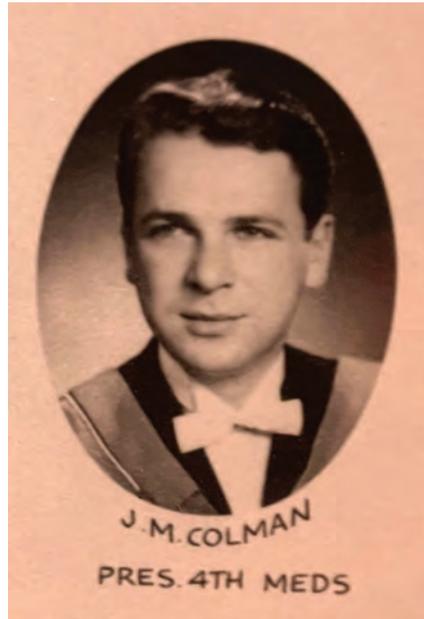
sition for academic standing. “To the credit of the class,” Borins says that everyone protested and “nobody went to Toronto General Hospital that year.” For her own part, Borins knew that it was unlikely or even impossible to train at Toronto General because of the medical hierarchy in Toronto that still perpetuated sexist and antisemitic attitudes. Borins feels lucky to have gotten a spot at Mount Sinai to complete her training, aware that she benefitted from remaining in the downtown system while many of her Jewish colleagues had to go to the outskirts of the city for their internships.

After interning at Mount Sinai, Borins pursued research, established a part-time practice, raised a family, and eventually decided to specialize in psychiatry. She worked at Toronto Western Hospital, which at the time was tainted with a reputation of having formerly been, as Borins’s father told her, “the most antisemitic hospital in Canada.” Though her father had been aware of a small number of Jewish appointments at the hospital, including as the Heads of Medicine and Psychiatry, times were changing by the time Borins arrived at Western. As such, she was able to establish a successful psychiatry practice without having to confront antisemitism in aggressive ways.

Perhaps surprisingly, Borins credits some of her success in medical school and her subsequent career to the sport of fencing. Fencing is “stylized fighting, which is what professional life is,” states Borins. The strategy involved in the sport is necessary when confronting disagreements of many different kinds, argues Borins, because of the agency involved in choosing whether to “pick up the gauntlet” and accept the fight. “If you have to go into a fight,” says Borins, “you should remember that you may not win,



even if you're in the right." This perspective is a fitting metaphor for the fight against antisemitism that so many Jewish medical students and doctors continued to wage, in the face of sometimes overwhelming impediments, in postwar Toronto.



Dr. Jack Colman – Class of 1967

Dr. Jack Colman's journey to becoming a doctor was prompted by a youthful desire to improve people's lives and make a positive impact on the world around him. He was a student who excelled in high school at Bathurst Heights (now John Polanyi Collegiate Institute) and later Northview Heights Secondary School, and was aware that "going to medical school was one of the things that Jewish guys who did well would do." As a child, Colman would avoid walking through the yard of the neighbouring Catholic high school and heard stories about signs prohibiting Jews from



the Granite Club and the Beaches, although he himself personally experienced little to no direct antisemitism. In 1960, when Colman graduated from high school, admission to the University of Toronto's medical school appeared to be dependent solely on grades, and Colman's academic achievement left little doubt that he would be accepted. Though he had heard of the quota restricting Jewish medical students, he did not worry about his own standing and in fact graduated from high school at the top of his class.

The first year of Colman's premedical training allowed him to understand the quota in a new light. It was "obvious there was a quota and that I escaped being caught up in it," recalls Colman. In previous years, he remembers, there were exactly 25 Jewish students out of an incoming class of 125; similarly, there were 25 Jews in his year and 25 in the year after. The quota system was therefore apparent "not because it was announced or spoken about" but because medical students were able to look around at their class and count the exact same number of Jewish students every year. In fact, Colman knew some Jewish friends and fellow high school students who were rejected from the University of Toronto medical school but whose marks were higher than those non-Jewish students whom he eventually encountered in the incoming premedical class. "It was the way it was," says Colman of the antisemitism that still determined medical school admissions. "Those of us in the class were happy to be there. We knew that someone was counting the Jews but there was nothing we could do about that."

While Colman never experienced antisemitism from his colleagues



or classmates, he did encounter biased attitudes from the administration during his time at the University of Toronto. Before transitioning from the premedical program into medical school proper, Colman wanted to expand his knowledge and worldview beyond the seemingly narrow trajectory laid out before him. He decided that travelling would provide him with an opportunity to round out his character and found an exciting sophomore year abroad program at Hebrew University in Jerusalem. Although Colman did not need the academic credit, he was keen to learn more about his Jewish background. He came from a very left-wing Jewish family, did not have a bar mitzvah, and had never learned Hebrew (although he wanted to). The program in Israel, which at the time was fairly new and had 62 students, seemed like a perfect fit.

Colman realized that he would have to obtain a leave of absence from medical school for the academic year 1962-1963, and accordingly set up an appointment to discuss his options with Dean Joseph Arthur MacFarlane. After explaining his plan to take a year off from medical school, expand his horizons, and learn new things, the Dean was “extremely enthusiastic and encouraging.” It was when Colman mentioned where he was planning to go that the entire atmosphere in the room changed: it was as if “a switch turned [and] the rest of the meeting was very uncomfortable.” Dean MacFarlane tried to convince Colman that going to Israel was a “stupid idea” and that studying in London or Paris would be an eminently preferable option. The negativity in the room was palpable, but Colman did not let Dean MacFarlane’s attitude deter him from pursuing his plans to study in Jerusalem. He knew enough about Israel to understand the historical and cultural importance of Jerusalem, and his experience there



turned out to be an amazing one. He had the opportunity to learn Hebrew and Yiddish, study Jewish history, and explore the Hebrew Bible, availing himself of the outstanding academics offered by Hebrew University.

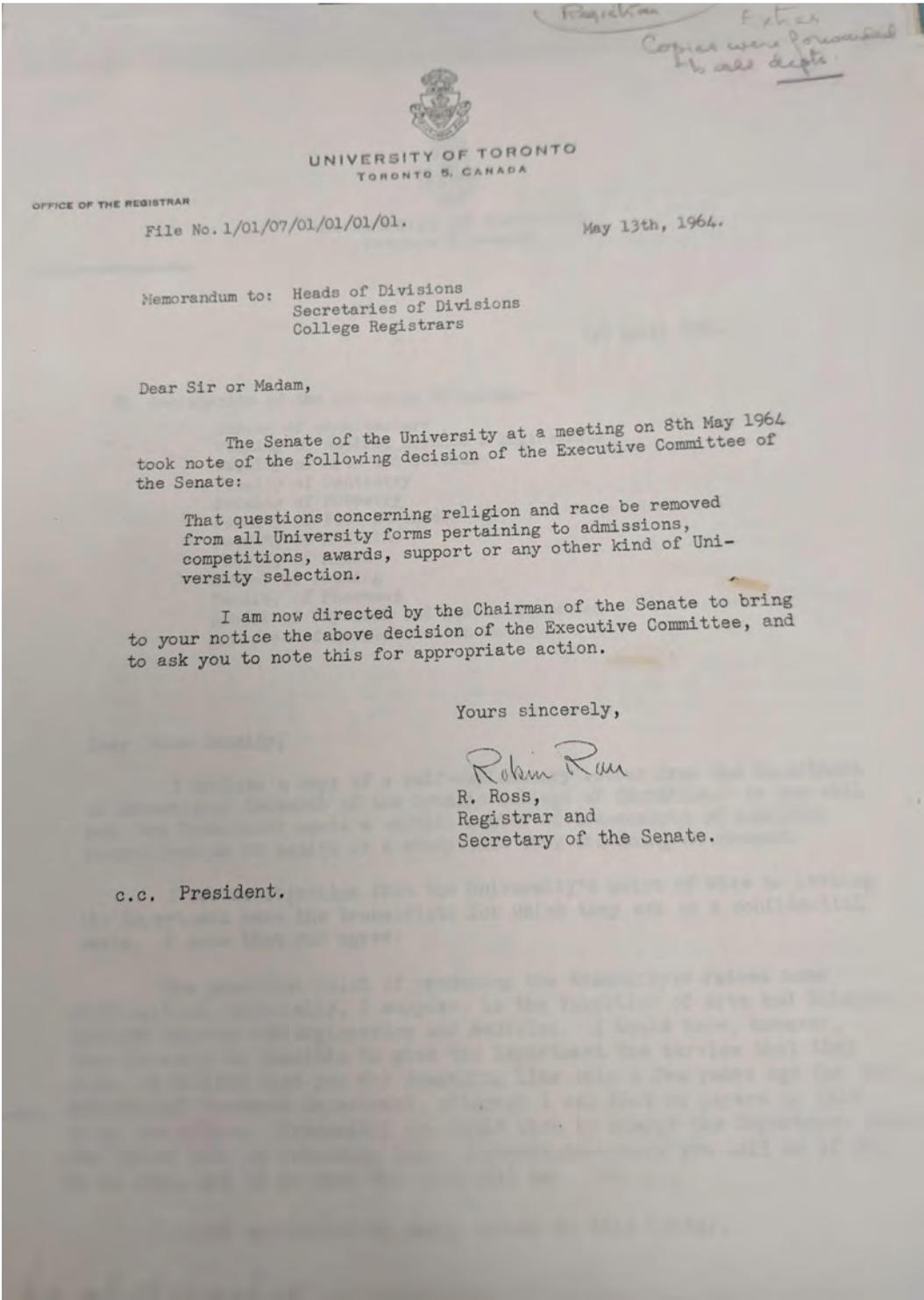
While Colman was in Jerusalem, he realized that he had no formal document stating that he would be able to return to medical school after his year abroad: “all I had was [Dean MacFarlane’s] word, and not very strongly given.” Filled with anxiety, Colman got in contact with the administration at the University of Toronto medical school and learned that a new Dean had been appointed along with a number of Associate Deans. To his relief, the new Dean of Student Affairs was Dr. Jan Steiner, a European Jew who promptly wrote a letter confirming Colman’s place at medical school in 1963. Colman completed his medical education with outstanding grades and was elected class president.

When it came time to undertake his rotating internship, Colman knew that he wanted to go to Mount Sinai Hospital: “a lot of us Jews knew that we would feel more at home and comfortable at Sinai.” After his internship, Colman went to Montreal to complete his training in Internal Medicine and Cardiology at McGill, returning to Mount Sinai in Toronto as a cardiologist in 1973. Colman “lived through the process of Sinai becoming a major power.” He was subsequently appointed to a staff position at Toronto General Hospital, making significant contributions to the Adult Congenital Heart Disease program and leading clinical and research breakthroughs in the field of heart disease and pregnancy.

Although Toronto General is now a “home” for Colman and has many Jewish staff members, he recalls his days of medical school and in-



ternship when “walking in the doors of the General gave me the creeps.” The “culture of the place” was uptight, cold, and uncomfortable, governed by the prevailing order of white Protestant men and generally unwelcoming to Jews. It is a testament to changing attitudes and the appointment of prominent Jewish physicians that the culture of Toronto General Hospital is so different now, Colman believes. He cites Berris, Langer, and those who went through the medical training system ten years ahead of him as the barrier-breaking instigators of positive change. Aware of the obstacles many Jewish physicians faced, whether in the form of the quota system or the inability of Jewish interns to train in Toronto due to antisemitism, Colman firmly believes that the history of Jewish doctors in the Toronto medical community has valuable lessons for our contemporary moment. One of these lessons is to acknowledge and accept antisemitism as a form of discrimination that still plagues our society, albeit in different forms, today. “To talk about racism and not talk about antisemitism in the same breath... is dangerous and wrong,” argues Colman. “These stories need to be told because it can happen again.”



Letter from University of Toronto Registrar to Heads and Secretaries of Divisions and College Registrars, 1964. University of Toronto Archives. Faculty of Medicine. Office of the Dean. A1979-0023/016

CONCLUSION

The stories of these remarkable physicians demonstrate the resilience, determination, ingenuity, and luck necessary to overcome a system of discrimination against Jewish medical students and doctors in place at the University of Toronto Faculty of Medicine and the major Toronto teaching hospitals in the mid-twentieth century. With the cessation of the quota system in the 1960s and the introduction of more inclusive and equitable hiring practices, the university and its affiliated institutions have made strides to combat antisemitism in the ensuing decades. However, as Toronto and the university and its affiliated institutions have made strides to combat antisemitism in the ensuing decades, so too have the forms of discrimination present in their midst. Other marginalized groups have been subjected to oppression, exclusion, and violence, and antisemitism has morphed and changed. Though it does not exist in the same guises as during the postwar period, it has reared its head in both insidious and blatant ways in recent years. Our work as members of this community is to address the ever-changing nature of antisemitism, acknowledging its history in our institutions even as we work toward its elimination in the future.

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Shorter, Edward. *Partnership for Excellence: Medicine at the University of Toronto and Academic Hospitals*.

Endnotes

- (1) Edward Shorter, *Partnership for Excellence: Medicine at the University of Toronto and Academic Hospitals*, 541.
- (2) Ibid.
- (3) Irving Abella, *A Coat of Many Colours: Two Centuries of Jewish Life in Canada*, 182, 215.
- (4) “Christie Pits Riot,” *Canadian Encyclopedia*.
- (5) See for example, Martin L. Friedland, *The University of Toronto: A History*; Edward Shorter, *Partnership for Excellence: Medicine at the University of Toronto and Academic Hospitals*; Ira Robinson, *A History of Antisemitism in Canada*; Sheri Fineberg, “Jewish Students in Canadian Universities: The Rise and Fall of a Quota System” in *Canadian Content*; Charles Levi, “Research Note” in *Historical Studies in Education*; Jacalyn Duffin, “The Queen’s Jews: Religion, Race, and Change in Twentieth-Century Canada” in *Canadian Journal of History*; R.D. Gidney and W.P.J. Millar, “Medical Students at the University of Toronto, 1910-40: A Profile” in *Canadian Bulletin of Medical History*; Wyn Millar, Ruby Heap, and Bob Gidney, “Degrees of Difference: The Students in Three Professional Schools at the University of Toronto, 1910 to the 1950s” in *Learning to Practise: Professional Education in Historical and Contemporary Perspective*; W.P.J. Millar, “We wanted our children should have it better”: Jewish Medical Students at the University of Toronto, 1910-51” in *Journal of the Canadian Historical Association*.
- (6) Levi quoting memorandum from Ross to Bissell, “Research Note” in *Historical Studies in Education*.
- (7) Ibid.
- (8) In itself, an acquiescence to latent antisemitic beliefs either held by himself or perceived to be held by the President of the University and the Selection Committee.
- (9) Levi quoting memorandum from Ross to Bissell, “Research Note” in *Historical Studies in Education*.
- (10) One applicant describes how his schooling was interrupted by his time in a “German concentration camp.”
- (11) Ira Robinson, *A History of Antisemitism in Canada*, 73-74.
- (12) Barnet Berris, *Medicine: My Story*, 31.
- (13) Jack Parlow, personal interview.

(14) Barnet Berris, *Medicine: My Story*, 32.

(15) *Ibid.*, 59.

(16) *Ibid.*

(17) It has proved difficult to discover the first names of the four female founders of Mount Sinai, perhaps a telling example of the treatment of women at the time.

(18) Davies quoted in “The Epic Journey of the University of Toronto Medical Class of 1944,” *University of Toronto Faculty of Medicine*.

(19) *Ibid.*

(20) Berris, *Medicine: My Story*, 45.

(21) *Ibid.*

(22) See Martin L. Friedland, *The University of Toronto: A History*, 520.

(23) Dr. Martin Barkin was an extraordinary Jewish doctor whose career trajectory in some ways mirrors Goldman’s: they went to junior and high school together, entered medical school at the same time, tied for the Silver Medal, received McLaughlin Fellowships, and trained in England and Boston. Bright, collegial, funny, and a brilliant intern, Barkin specialized in urology; his outgoing, intelligent, and adaptable nature allowed him to excel in multiple career paths, including surgery and administration at Sunnybrook, business, civil service, and politics. He wore his Judaism with open enthusiasm, and never shied away from telling a Yiddish joke or embracing his Jewish background.

(24) Borins shared another example of Dean MacFarlane’s rigidity from the early 1960s, when a large protest was held by the male medical students objecting to the dress code requirement of a shirt and tie (nothing was said about women’s attire). According to Borins, “Dean MacFarlane came in and said, ‘there’s no dress code, everybody can wear whatever they want.’” He went on to declaim that he had no notion of where the idea of the dress code originated and that there were no restrictions on clothing choices at the University of Toronto’s Faculty of Medicine. “However,” he went on, “next week we’re publishing a list of who’s in the class and if you’re not wearing a shirt and tie you won’t be on the list.”

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This book was designed by Tiffany Pludwinski.

