## 'A Glut on the Market:' Medical Practice Laws and Treatment of Refugee Doctors in Australia and New Zealand, 1933-1942

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A letter in the *Sydney Morning Herald* on Christmas Day 1939 landed as a round in a rhetorical war over New South Wales' handling of refugee doctors. "In spite of many fine doctors," wrote Elsie Dangar, "the medical profession as a whole is a most narrow minded trade union." How could a government send men to war, she questioned, "when our behaviour at home does not live up to the ideal we are fighting for?" During the Nazi maelstrom which sent thousands of doctors into far exile, medical boards throughout the British Empire laboured persistently to bar refugees' registration as practioners. The hostile thrust of the British Medical Association's United Kingdom and overseas branches contrasted with practices in the largest jurisdiction in the United States. New York State registered refugee doctors after they passed an exam while the City of New York operated a night school in English language instruction for refugee doctors. Flexible and constructive measures were not just missing from the Empire; the BMA opposed steps mildly analogous to those taken in New York.

Furthermore, politicians in Australia and New Zealand by and large did the medical boards' bidding and helped impede the registration of refugee doctors, although there were exceptions. New Zealand Prime Minister Peter Fraser hinted at a radical measure to clip the profession's wings. When a sub-committee of the New Zealand Medical Council recommended curtailing the activities of German refugee doctors after the declaration of war in September 1939, Fraser minuted that "any attempt to do so

<sup>&</sup>lt;sup>1</sup> National Archives of Australia, Series A 433, Control Symbol 1939/2/2197 (hereafter NAA, NSW Premier) Premier of New South Wales - Problem of employment of alien refugees (including doctors) *The Sydney Morning Herald*, clipping dated 25 December 1939, no page cited. The expression "most narrow minded" is important, because trade unions had admitted refugee tradesmen. *Sydney Morning Herald*, clipping, 18 December 1939, no page cited.

<sup>&</sup>lt;sup>2</sup> Some jurisdictions used the term medical board, other medical council. Boards or councils were empowered by medical practice acts to regulate the profession.

<sup>&</sup>lt;sup>3</sup> The New York Times, 18 September 1938, p.53; 10 March 1939, p.7.

would inevitably result in a demand for the curtailment of the powers of the medical council." For the most part, however, the New Zealand Medical Council and the equivalent medical boards in Australian states mustered their influence to block refugee doctors seeking to practice. A few refugees tried to challenge them and some made headway with assistance from lawyers. From 1933 to 1945, legal wrangles over the professional status of refugee doctors exposed the profession's mercenary side. No reactions by a public figure were as tart as Fraser's and his remained confidential; most state governments in Australia fell into line and assisted the BMA with its policy of greatly restricted access to registration.

The plight of refugee Jewish doctors put their registration into the foreground of medical board activities. Prejudice and protectionist self-interest occasionally encountered state pragmatism which favoured less obstruction to registration. It is useful to outline the legal context for medical registration, as it will explain the diverse ways that the state and the medical profession interacted over the subject of refugees. In the British dominions, medical practice acts devolved onto medical boards the guild-like authority to register doctors as legally entitled to treat patients. In Australia, state parliaments were responsible for these empowering medical practice acts; in New Zealand, the national parliament. These state medical boards and the New Zealand council drew members from local branches of the British Medical Association and the branches followed the BMA lead on many issues, including the home association's practice of framing barriers to the registration of refugee doctors. The BMA at home and abroad lobbied for the means to frustrate applicants. Thus it requested legislation to set a quota on refugee doctors, a long period of residency in a British dominion, or completion of a full degree programme in a medical school in the United Kingdom or a Dominion.

Complicating the picture, medical schools in the Empire functioned independently from medical boards and generally-speaking had a less protectionist outlook on the registration of refugee doctors. The stage was set for a multi-dimensioned tussle amidst the rapid downward plunge in international relations. Across the Empire there were permutations on the outcomes from the many-sided arguments. Each board and each

<sup>&</sup>lt;sup>4</sup> Archives New Zealand, Health Department, Series 163, Sub-number 47, Admission of Foreign Doctors into New Zealand (hereafter NZ Health), handwritten minute on margins of report on the New Zealand Medical Council meeting of 26 September 1939.

government differed in its handing of the issue, although the separate boards and the state governments kept in contact over the issue. Furthermore, the tactics of protectionism were common and straightforward: restrictive legislation, restrictive interpretation of credentials by medical boards, an insistence on documents or testimonials from hostile jurisdictions, postponement of decisions, and denial of reciprocal registration privileges where they existed. Counter measures from more liberal elements were plain and repeated in many places: introduce university short courses to give refugees British Empire credentials, expose the conduct of the medical boards, organize refugee doctors' associations, and hire solicitors to threaten action.

Law's fields of social friction and reserves of power are masked by society's longing for predictability and justice, and obscured by cloistered decision-making. In law-respecting societies, most people operate without questioning the statutes, administrative regulations, and judgments that smooth day-to-day affairs. Friction, power, and conflicts of interest are covered too by assertions from professionals that they can determine what is best for the public. When economic advantage is in the balance, manipulation, obstruction, and delay play out; self-serving interpretations of laws, naked uses of power, and claims of expertise are marshaled by protagonists. Documents surviving from these confrontations overflow with examples of character failings by the leaders of groups whose members had substantial egos and influence. Disclosures about such matters are the bread and butter of critical legal history. Even so, seeing the medical profession in a self-protective corporate mode rather than in a healing mission may surprise. Witnessing the uses and abuses of laws, noting recourse to arguments involving constitutions and treaties, and then calling attention to the implicit fields of social friction, historians of law can highlight foibles to inform moral and ethical behavior in our time. Legal history is a righteous calling.

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Interest in emigrating originated after the Nazi government began targeting
Jewish doctors in early 1933. The Nazis ordered Berlin hospitals to relieve Jewish
doctors of their duties. Within a few days orchestrated discrimination spread to Bavaria.<sup>5</sup>
In short order, German Christians throughout Germany were advised to shun Jewish

<sup>&</sup>lt;sup>5</sup> The Times (London), 20 March 1933 p. 11; 27 March 1933, p.11.

doctors.<sup>6</sup> At first, the Nazis hoped for a popular movement against Jews prodded by agents; however, they soon turned to legislation and edicts. The Nuremburg Laws of 1935 established a "legal" framework for removing Jews from most professions and the civil service.<sup>7</sup> During the lead up to the Berlin Olympic Games in 1936, the persecution of Jews moderated but returned conclusively in late 1938. The medical licenses of Jews were cancelled; Jews were only allowed to treat other Jews. Persecution inexorably followed German aggression into neighbouring countries.<sup>8</sup> In each occupied country, Jewish doctors were banned from practice.<sup>9</sup> Nazi nihilism was expressed in the regime's determination to destroy a set of doctors - approximately ten percent of all German doctors - weakening private practice, public health agencies, and hospitals.

Inquiries from central Europe about medical registration in Australasian jurisdictions began immediately after the Nazi assumption of power. In late 1933, the Queensland Medical Board received its first refugee inquiries; in 1934 New Zealand granted entry to its first refugee doctor. Over the next three years, inquiries to medical boards trickled in on behalf of Jews still in Germany; refugee doctors actually landing in Australia and New Zealand were rare until 1938. In late 1938 and into 1939, boards throughout the Empire received a flood of both inquires from Europe and applications from landed refugees. If applications to the Queensland board and to the Commonwealth for wartime temporary registration are any indication, over a third of refugee doctors landed in 1938, a quarter in 1939, and a tenth in 1940. The *Sydney Morning Herald* in 1941 estimated that ninety per cent of the refugee doctors in New South Wales had arrived in Australia in the eighteen months preceding the war.<sup>10</sup>

In 1938, refugees largely originated from Germany; following the Munich Agreement they also started to arrive from Czechoslovakia; Austrian applications surged because in both Germany and Austria regulations in October 1938 cancelled the licenses

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<sup>&</sup>lt;sup>6</sup> The Time, 1 April 1933, p. 10.

<sup>&</sup>lt;sup>7</sup> Michael Marrus, *The Holocaust in History* (Toronto: Lester & Orpen Dennys, 1987), 27.

<sup>&</sup>lt;sup>8</sup> The Times (London), 10 July, 1933, p. 13 and p.92.

<sup>&</sup>lt;sup>9</sup> The Quisling government in Norway instituted the ban. *The Argus* (Melbourne), 5 October 1940, p.3. <sup>10</sup> National Archives of Australia, Melbourne Repository, Series number MP508/1 Control Symbol 65/710/123, Enemy Alien Doctors. Employment [Box 102], *Sydney Morning Herald*, clipping dated 17 April 1941, no page cited.

of Jewish doctors.<sup>11</sup> Like its counterparts in other states, the Queensland board took the position that as reciprocity did not exist between Great Britain and Germany, German diplomas could not be recognized but that if the holders of those degrees also held British degrees they would be entitled to registration.

Dr J. Leon Jona of Melbourne inquiring whether German medical degrees held by Jews who had been forced to leave Germany would be recognized in Queensland for registration. It was decided to reply that as reciprocity did not exist between Great Britain and Germany, German diplomas could not be recognized but that if the holders of those degrees also held British degrees they would be entitled to be registered. 12

The absence of a reciprocal agreement between Germany and the British Empire gave all Australasian medical boards a pretext for denying registration.

Australian medical boards moved beyond this perfunctory rejection of applicants on a case by case basis and had to open policy discussions about refugee doctors - mainly Jews - applying for registration because of developments in Scotland that in the eyes of protectionists allowed streams of foreigners to threaten the livelihood of locally trained doctors. Scottish medical educators and medical board members, perhaps less anti-Semitic and more pragmatic than English counterparts, had established a fifteen month Scottish Conjoint Diploma (medical and surgical) programme for refugees. The fortunate refugee doctors who went through the programme and promptly emigrated to the Dominions were registered. Until the launching of that programme, Australian states along with other jurisdictions in the Empire had recognized any British medical qualifications, but once the Scots had created a means for refugees to qualify with little loss of time, imperial reciprocity in medical credentials came under attack. When refugees bearing Scottish certificates began to appear in the Dominions, insecure doctors and parochial politicians set out to bar further registrants. Critics denounced the Scottish

<sup>&</sup>lt;sup>11</sup> National Archives of Australia, Series A1928, Control Symbol 652/17A, Application Forms of Alien Doctors Licensed under National Security (Alien Doctors) Regulations (hereafter Applications 1942), application of Arthur Kessel.

<sup>&</sup>lt;sup>12</sup> A/38182, Queensland Medical Board, Minute Book, 14 January 1926 to 10 June 1937 (hereafter minute book 2), 9 November 1933.

<sup>&</sup>lt;sup>13</sup> See for example A/38184, Medical Board of Queensland, Minute Book, A/38183, 8 July 1937 to 8 Feb 1940 (hereafter minute book 3), 12 August 1937, 10 March 1938,12 May 1938, 9 November 1939.

short course, not because it allowed unqualified doctors into the empire, but because it was "a subterfuge."

Promptly in mid-1937, the Scottish path came under attack. The government of South Africa refused to recognize the certificates, claiming that the holders had flooded the country and the medical association had until then no legal alternative but to admit them which it definitely did not want to do. Alert to stirrings in the Dominions and at home, the British medical council stepped in to prohibit the graduates of the Scottish course from practicing in the United Kingdom, a decision with an impact throughout the Empire due to imperial reciprocity. 14 At its annual meeting in July 1938, with representatives from the Empire in attendance, the BMA considered the plight of Jewish doctors in central Europe. Opinions included outright hostility toward the refugees. Last year, said one doctor, the country let in numerous non-Aryan doctors from Germany and "now they were threatened with an invasion of non-Aryan doctors from Austria." <sup>15</sup> Others professed deep concern for the turmoil affecting Jewish doctors across central Europe, but they still wanted limits on the number admitted to practice in the United Kingdom. The Home Office had suggested to the BMA that the United Kingdom should take in 500. The council agreed to register no more than 50 and established a committee to review applications. The Scottish colleges were criticized. 16

To counter hostility toward foreign Jews by so many BMA members, the London Jewish Medical Hospital Society staged a dinner in December 1938 and invited friendly gentiles, prominent doctors known for progressive views about the medical profession. "It was dispiriting," said one of these speakers, "to find doctors here [in the United Kingdom] who gave some justification to the critics who regarded medicine merely as a competitive trade, jealous of its privileges." Doctors, he appealed, should above all people be willing to make sacrifices to help one another in distress. Of all professions they had the most job security and least to fear from competition. Hospitals always needed surgeons; the fears of an invasion were excessive. <sup>17</sup> Across the Empire, liberals had less clout than protectionists. Rarely, however, did the latter espouse overt or

<sup>&</sup>lt;sup>14</sup> The Times (London), 16 July 1938, p.12.

<sup>&</sup>lt;sup>15</sup> The Times (London), Jul 16, 1938; p. 17.

<sup>&</sup>lt;sup>16</sup> The Times (London), Jul 16, 1938; p. 17. Also see A.J. Sherman, *Island Refuge: British Refugees from the Third Reich*, 1933-1939 (Newbury Park: Frank Cass, 1973; second edition 1994), pp.123-4.

<sup>17</sup> The Times (London), Dec 20, 1938; p. 4.

virulent anti-Semitic slights. Competition was the medical profession's avowed enemy, although a strictly economic explanation for protectionism is insufficient. The references to preserving the profession for future generations of the native-born against foreigners point to a disapproval of Jews.

Resistance in South Africa and then the United Kingdom to the registration of refugee doctors with Scottish certificates emboldened the like-minded around the Empire. Ontario, Canada was an odd exception, because in 1927 the province's College of Physicians and Surgeons had cancelled reciprocity with the United Kingdom. When the Ontario college re-established reciprocity as a wartime measure in 1940, it barred most refugee doctors by simply stipulating that applicants had to have British citizenship except in "exceptional cases" to be judged on the basis of individual interviews conducted by the committee of education and registration. It is difficult to judge how the college applied this discretionary authority, although the executive committee of the Canadian Medical Association had struck a firm protectionist note at its 1938 meeting when it resolved that Canada "did not need to import doctors from foreign lands, in as much as our medical schools are producing quite as many doctors as the country can reasonably absorb." Unproven pronouncements about a saturation of doctors proliferated around the Empire from mid-1938 until at least early 1942 when the war, now truly a world war, intervened. Even then state boards wanted to keep the brakes on.

The existence of imperial reciprocity in Australasia complicated opposition to the registration of refugee doctors. Underlying the diverse responses to efforts to secure registration by one route or another, there was by mid-1938 an intensely parochial atmosphere at the BMA braches and in medical boards. A sequence of events in the state of Victoria shows how a false rumour contributed to a campaign for restricting registration. The medical board in Victoria complained in July 1938 that forty refugees with medical training had arrived aboard a single vessel; symptomatic of the times, the story was not only believed and repeated but sustained the idea of a threatening deluge of foreign doctors.<sup>19</sup> The state medical board asked the government to legislate to prevent these and other newcomers from practicing unless they had five years of study in Victoria

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<sup>&</sup>lt;sup>18</sup> The Globe and Mail, 12 April 1940, p.19; The Canadian Medical Association Journal, vol.39 (December 1938), p.593.

<sup>&</sup>lt;sup>19</sup> The Argus (Melbourne), 16 July 1938, p.9; The Canberra Times, 22 July 1938, p.1.

or a reciprocating jurisdiction.<sup>20</sup> The rumour whipped up panic among doctors and medical students. Agitated by impressions that the state would be flooded with refugee doctors, a majority of medical students at the University of Melbourne signed a petition insisting on a limit to the number of refugee doctors to be registered.<sup>21</sup> If the BMA in the United Kingdom wanted to practice protection then, asked protectionist doctors in Australia, why should Australian doctors sacrifice to make room for professionals unwelcome in the old country? The Queensland board too was interested in prohibition as soon as it learned about the action of South Africa, but it could not convince the state government to assist it with an amended medical practice act.<sup>22</sup>

The Queensland medical board recommended that the state introduce legislation that required five years of residence in the United Kingdom before British credentials would be recognized. The precise target was the Scottish programme. However, the government rejected the board's request, insisting that the state needed many more medical personnel. The press reported on a shortage of doctors and blasted the medical board's protectionism. Brisbane's *Courier Mail* reported in October 1939 that "the first class to graduate from Queensland medical school was in 1939; there were 21. But there were 22 vacancies at Brisbane Hospital and 55 vacancies throughout the state." Favourable press commentary failed to help doctors with German, Czech, and Austrian qualifications who applied for registration in Queensland through 1938 and 1939. They received the usual answer: no reciprocal agreement, no registration. Even with the endorsement of the state's Minister of Health and Home Affairs, the board rejected an applicant holding a German degree. Doctors on the state board believed they were asserting professional independence, while the Queensland government sponsored a refugee doctor in the public interest.

All other states answered quickly to the satisfaction of the medical boards. In December 1938, Victoria's parliament passed an act stipulating that registration required

<sup>&</sup>lt;sup>20</sup> The Argus (Melbourne), 16 July 1938, p.9

<sup>&</sup>lt;sup>21</sup> *The Argus* (Melbourne), 27 July 1938, p.13.

<sup>&</sup>lt;sup>22</sup> QMB, minute book 3, 9 September 1937, 12 May 1938; *The Argus* (Melbourne), 11 July 1939, p.3. A/38203, State Archives of Queensland, Correspondence of the Medical Board, 1932-1951 (hereafter MB letters), Clipping, *Courier-Mail*, 12 Oct 1939.

<sup>&</sup>lt;sup>24</sup> QMB, minute books 3, 8 December 1938, 19 January 1939.

<sup>&</sup>lt;sup>25</sup> OMB, minute book, 9 June 1938.

<sup>&</sup>lt;sup>26</sup> *The Argus* (Melbourne), 11 July 1939, p.9.

the completion of a prescribed course of study at an Australian university or one that recognized Australian medical degrees.<sup>27</sup> Tasmania and Western Australia adopted comparable legislation.<sup>28</sup> The government of South Australia in June 1938 legislated to allow the registration of refugee doctors after they had taken a special course, but a quota was imposed.<sup>29</sup> New South Wales responded with a new medical practices act in late 1938 that set an annual registration quota of eight refugee doctors; the eight had to meet specific requirements and demonstrate "outstanding capabilities."<sup>30</sup> A special commission reviewed applicants.<sup>31</sup>

In the sense that the New South Wales act allowed a small number of refugee doctors to secure registration, it was perhaps better than the *status quo* whereby the medical board routinely turned down foreign degree-holders. Nevertheless, the act set a number as a ceiling not as a requirement, so the board did not have to register any foreign applicants. In the course of a protracted letters-to-the editor debate over the act, one observer stated the lesson nicely. Emigrants were expected to put their children in Australian schools to learn "British justice and fair play, and at the same time we prevent their parents from earning a living." Several country members of the state parliament denounced the restriction and proceeded to expose the special registration committee's delays in registering even the eight doctors allowed by the act. A backbencher revolt threatened the United Australia Party government. In its 6 December 1939 edition, the *Sydney Morning Herald* reported a political crisis since Parliamentarians were protesting a cabinet that did the BMA's bidding. 33

The Scottish short course - an outrage to medical boards throughout the Empire – prompted modest imitation by several medical schools that neither shared the state boards' protectionist sentiments nor replicated the obsequiousness of state governments. When Australian university Vice-Chancellors met in August 1939, they discussed a common policy for a short course. The University of Sydney, the University of Adelaide, and the University of Queensland set up programmes that allowed refugee doctors to

<sup>&</sup>lt;sup>27</sup> The Argus (Melbourne), 8 August 1939. The article refers to the act as passed at the last session.

<sup>&</sup>lt;sup>28</sup> The Times (London) (London), 7 June 1939, p.15.

<sup>&</sup>lt;sup>29</sup> The Times (London), June 28, 1939; p. 13

<sup>&</sup>lt;sup>30</sup> The Canberra Times, 17 March 1939, p.4.

<sup>&</sup>lt;sup>31</sup> NAA, NSW Premier, Alex Mair, Premier, New South Wales to Prime Minister, 14 September 1939.

<sup>&</sup>lt;sup>32</sup> Sydney Morning Herald, clipping 13 December 1939, no page cited.

<sup>&</sup>lt;sup>33</sup> The Sydney Morning Herald, clipping 5 December and 6 December 1939, no page cited.

enter the fourth year of the six-year course of study.<sup>34</sup> Not as generous as the Scottish programme, the plan was better than nothing which was what the University of Melbourne offered.<sup>35</sup> Melbourne's lack of co-operation abided by the spirit of the 1938 student petition and was consistent with statements from Dean W.A. Osborne to the effect that German medical training was "more philosophical and attentive to science than the human patient." Osborne denied that he had anything against Jews; "many of our finest doctors are Jews."36 A shortened course of study would have met the conditions of Victoria's protectionist legislation and negated its intended purpose of drastically reducing refugee applicants for registration. However, if some liberal vicechancellors and medical faculty members believed they had expedited the registration of refugee doctors, they were mistaken. State boards held decisive power and could prevent registration by several means: pressing the medical schools to restrict the number of refugee students; taking the strict view that, since the universities' medical upgrade programmes granted certificates and not degrees, applicants for registration would still have to furnish proof of medical degrees from countries with reciprocity agreements.<sup>37</sup> Refugee doctors may have learned something in these courses, but that education did not necessarily lead to faster registration.<sup>38</sup>

Italian credentials provided a way for a few refugee doctors to secure registration. This path had its origins in struggles at the turn of the century for the control of spas and health resorts in Switzerland and Italy, and the resorts of southern France where Milords went into winter quarters.<sup>39</sup> For house calls and a suitable bed-side manner, a fellow Englishman was preferred. The Swiss struck first. The federated government in 1889

<sup>&</sup>lt;sup>34</sup> The Argus (Melbourne), 21 August 1939, p.2.

<sup>&</sup>lt;sup>35</sup> Melbourne Herald, clipping 22 December 1939 no page cited; The Argus (Melbourne), 22 August 1939, p.4.
<sup>36</sup> The Argus (Melbourne), 28 July 1938, p.10.

<sup>&</sup>lt;sup>37</sup> Melbourne Herald, clipping 22 December 1939 no page cited; The Argus (Melbourne), 1 July 1939, p.2; National Archives of Australia, Series A1928, Control Symbol, 652/17/3/Section 3, Registration of Persons Who Have Qualified Elsewhere, Secretary, New South Wales Medical Board to Dr. Curt Rosenthal, 16 October 1942. Also see Series A1928, Control Symbol, 652/17/3/Section 5, Registration of Persons Who Have Qualified Elsewhere, New South Wales Medical Board to Dr. F. McCallum, Director-General of Health, Commonwealth of Australia, 9 October 1945.

<sup>&</sup>lt;sup>38</sup>National Archives of Australia, Series A1928, Control Symbol, 652/17/3/Section 3, Registration of Persons Who Have Qualified Elsewhere, L. Landa, Member of Parliament, New South Wales, to E.J. Holloway, Minister of Health, 21 October 1942.

<sup>&</sup>lt;sup>39</sup> The Times (London), 25 November 1889, p.11.

prohibited doctors from the United Kingdom treating patients in Switzerland. Protests were useless; the Swiss wanted exclusive control of the health spa business. In 1898, the Italian government threatened the introduction of a law that barred doctors from other countries practicing in Italy. The British ex-patriot medical community lobbied in opposition. He British medical profession favored reciprocity. The Medical Act of 1886 gave the General Medical Council authority to recognize equivalent qualifications from countries which treated the United Kingdom with reciprocal fairness. Understandably, the British ex-patriot medical lobby praised the fairness of Italy to-date. No other country gave English practioners the privileges that Italy did. British advocates of reciprocity claimed that few Italians would find much to attract them to England and the few who came posed no threat to local business. Reciprocity seemed to British doctors a marginally advantageous measure. The Privy Council on the advice of the medical council extended reciprocity to Italy in 1901. At the time, the self-governing dominions accepted the authority of the British government in foreign affairs. The Orderin-Council extended to them.

In the early twentieth century a few Italian doctors secured registration in Australia. Exchanging the land of lurid sunsets and ruby wine for the land of lurid sunrises and cold beer, they established an important precedent. No one could deny that doctors with Italian credentials had been registered; reciprocity was a fact. When Nazi persecution of Jewish doctors erupted in the 1930s, medical boards in the Empire had paper palisades in place and would register foreigners only if reciprocity agreements existed. Never the less, reciprocity with Italy was honoured in parts of the Empire. Through 1939 and into early 1940, Italian officials co-operated and furnished documentation. After Mussolini's regime in May 1939 promulgated discriminatory measures against foreign doctors (essentially Jews), this co-operation may have been

<sup>&</sup>lt;sup>40</sup> The Times (London), 20 August 1889, p.7

<sup>&</sup>lt;sup>41</sup> The Times (London), 6 May 1898, p.15; 28 May 1898, p.9.

<sup>&</sup>lt;sup>42</sup> The Times (London), 28 May 1898, p.9.

<sup>&</sup>lt;sup>43</sup> The Times (London), 5 December 1899, p.12.

<sup>44</sup> The Times (London), 5 December 1899, p.12.

<sup>&</sup>lt;sup>45</sup> A/38181, State Archives of Queensland, Queensland Medical Board, Minute Book, 17 Feb to 17 December 1925 (hereafter, QMB, minute book 1), entries for 4 April 1901, 2 April 1903, 1 October 1903, 28 August 1905, 2 November 1905, 7 April 1910, 6 October 1910.

intended to reduce the number practicing medicine in Italy. 46 However, co-operation could also have expressed lack of enthusiasm for Hitlerian measures. 47

Italian medical schools remained open to Jews throughout the 1930s; Jewish doctors continued to be registered by the Italian equivalent of a medical council, the Ordine dei Medici. The British Medical Association and, through it, affiliates in the Empire, were alerted to the Italian route in 1934 by an inquiry from a Deborah Stosch-Wortley. She asked the Secretary of the British Medical Association "whether a German doctor (Jewish) holding the degree of the Royal University of Florence (Italy) together with the Diploma of the State Governing Board, would be eligible for registration in England, or South Africa – or Australia – without having to pass a further examination in either of these countries?" It is likely that she knew of the agreement between the United Kingdom and Italy. 48 A.D. Macpherson, Assistant Medical Secretary, British Medical Association, prepared a cold reply on behalf of the BMA executive. Yes, if the individual held an Italian degree and was registered with the Ordine dei Medici in one of the provinces, he or she would be eligible for registration in England. "On the other hand, it is doubtful whether the Home Office would accord such a foreign member of the medical profession permission to stay and practice in this country." Macpherson may have brushed off this inquiry in hopes of stemming a flood of applications. In any event, he revealed why the BMA hoped that the Home Office would turn back such individuals. The United Kingdom, South Africa, and Australia, it was alleged, "were already being well provided with doctors, it is in my opinion extremely doubtful whether such an applicant would be accorded permission to register, practice or remain in any of these areas."50 Next Macpherson alerted the association's branches in South Africa and Australia and asked that they reply directly to Stosch-Wortley.

<sup>&</sup>lt;sup>46</sup> For an Australian report on Italy's measures see *The Canberra Times*, 1 May 1939, p.1

<sup>&</sup>lt;sup>47</sup> Michael Marrus and Robert Paxton, "The Nazis and the Jews," *Journal of Modern History*, vol.54 (December, 1982) reprinted in Marrus editor, *The Nazi Holocaust: Historical Articles on the Destruction of European Jews: Part 4. The 'Final Solution' Outside Germany, Volume1* (Westport: Meckler, 1989), 122. 
<sup>48</sup> MB letters, Deborah Stosch-Wortley to The Secretary, British Medical Association, 15 September 1934 [copy].

MB letters, A.D. Macpherson, Assistant Medical Secretary, British Medical Association, to Miss Deborah Stosch-Wortely, 19 Sept 1934.

50 Ibid.

Australian state governments had sole constitutional authority for regulating medical practice, but the Commonwealth never the less tracked state board actions and state legislation for good reasons. In the first place, the Commonwealth needed to describe medical board practices to applicants for entry to Australia who had medical qualifications. In 1934, Canberra consulted state boards so that it could alert prospective immigrants about their prospects if they intended to practice in Australia.<sup>51</sup> In early 1937, the Commonwealth was warning such individuals emphatically not to expect registration, and in October 1938, just after the Nazis cancelled the licenses of Jewish doctors, it ceased admitting anyone whose previous occupation had been a medical doctor unless they qualified for registration in one of the states, were sponsored by a recognized Jewish refugee agency, had the money to support themselves, or would commit to taking non-medical employment.<sup>52</sup> For refugee doctors attempting entry and registration, hopes of legally practicing medicine in Australia may have diminished, but refugee aid committees and family networks assisted with securing entry permits and newcomers persisted in seeking registration.

A second reason for the Commonwealth government's interest was its concern for public welfare. After the outpouring of restrictive state legislation in 1938, the Commonwealth Minister of the Interior and former Minister of Health, Senator Harry Foll, stated that he deplored the attitude of the BMA's state branches, because the outback needed doctors. Such pragmatism had to counter not only the protectionism of the medical boards and BMA, but discrete and not-so discrete anti-Semitism. Near the height of the registration controversy, in early 1939, an Australian Labor Party politician and former Minister of Health for New South Wales, James McGirr, accused refugees of "nefarious business practices." Concerning refugee doctors, "these people are here scarcely 10 minutes when they are able to manipulate the Australian government." The issue of refugee doctors cut across party lines with rural representatives most favourable to registration.

<sup>&</sup>lt;sup>51</sup> QMB, minute book 1, 19 April 1934.

<sup>&</sup>lt;sup>52</sup> Draft letter to the Premier of New South Wales from the Prime Minister of Australia, undated but September 1939.

<sup>&</sup>lt;sup>53</sup> The Argus (Melbourne), 23 June 1939, p.3.

<sup>&</sup>lt;sup>54</sup> *The Argus* (Melbourne), 19 May 1939, p.9. McGirr became Premier of New South Wales from 1947 to 1952.

The declaration of war against Germany in September 1939 placed refugee doctors temporarily in a worse situation than before. In some Australian states, the refugees' status as enemy aliens invited misplaced retribution by the state government. The Premier of New South Wales, Alex Mair, wanted to preclude German doctors from registration, even though the Commonwealth government informed the states that it would apply no blanket policy but treat each refugee as an individual.<sup>55</sup> The United Australia Party government in New South Wales nevertheless banned German-born refugees from applying for the eight positions a year that the revised Medical Practice act of 1938 had opened to refugees. Despite the obvious objection that "they are victims of Germany, and are not our enemies but our allies,"<sup>56</sup> Premier Mair insisted that "the Government has not shifted ground, nor will it do so."57 He rejected as unfair the idea that refugee doctors could serve communities where doctors had joined the army medical corps; he took the astonishingly unimaginative position that refugee doctors would be German at heart and so he considered them a security risk.<sup>58</sup> The New South Wales branch of the BMA was delighted and denounced contrary calls for German doctors to be sent to outlying areas when other doctors joined the army. "This [replacement idea] meant let the Australian give his best years, his prospects, his livelihood, and maybe his life, and let a foreigner enter and deprive him of his means of subsistence should he return from active service." Allowing registration in any form would "lead to the everexpanding registration of foreigners by a back-door route."59

In 1939, the origins of applications to Australian medical boards altered to include more men and women who had fled to Italy, secured medical degrees, and stayed in Italy to practice medicine. A few central European Jews had gone to Italy before the Nazi ascendancy and had experienced comparatively good treatment for most of the 1930s. Foreign-born Jewish doctors fared reasonably well in Italy; if they qualified, several provincial medical boards registered them, defying fascist propaganda that blamed Jews

<sup>&</sup>lt;sup>55</sup> NAA, NSW Premier, Memorandum to the Prime Minister's Department, 26 October 1939.

<sup>&</sup>lt;sup>56</sup> NAA, NSW Premier, *The Sydney Daily Telegraph*, clipping 7 December 1939 no page cited

<sup>&</sup>lt;sup>57</sup> NAA, NSW Premier, *The Sydney Daily Telegraph*, clipping 11 December 1939 no page cited.

<sup>&</sup>lt;sup>58</sup> NAA, NSW Premier, *The Sydney Morning Herald*, clipping 11 December 1939 no page cited.

<sup>&</sup>lt;sup>59</sup> NAA, NSW Premier, *The Melbourne Herald*, clipping 5 December 1939 no page cited.

for making it hard for Italian doctors to make a living. <sup>60</sup> In 1939, both the established as well as the recent Jewish doctors started to look for ways to leave. As an ally of Germany Mussolini's government took steps against foreign Jewish doctors in May 1939 by restricting their right to practice medicine unless they qualified as Italian citizens. <sup>61</sup> The Australian state boards had little choice but to register the applicant if all the documentation could be provided. Legal counsel occasionally assisted applicants and attacked foot-dragging.

Registration became more difficult with the war in Europe and boards manipulated wartime disruptions and suspicions to undermine recourse to the reciprocity agreement with Italy. Until June 1940, when Italy invaded France, the United Kingdom and British Empire were not at war with Italy. Thus, during an interlude of Italian neutrality from September 1939 to June 1940, channels of communication were open. Australian medical boards made inquiries to Italian consular officials about Italian policies on the registration of foreign-born Jews as doctors and still requested authentication of applicants' documents. 62 Medical boards sometimes requested applicants to furnish documentation directly from Italy. Perhaps some doctors who approved of these obstructionist steps reasoned that diligence was in the public interest; there were other possible motives including anti-Semitism and fear of competition. Most hostility toward refugees in Australia seems to have had an economic character. 63 Still undue diligence could be predicated on a group slur. Refugee applicants for registration, wrote a Dr. W. Maxwell in a late 1939 issue of *The Medical Journal of Australia*, needed to be carefully examined because they came from a group noted for duplicity. "These men came from Vienna mostly...Are there not refugees who are not what they profess to be...I know the techniques of these alien people with other standards of ethics."<sup>64</sup>

<sup>&</sup>lt;sup>60</sup> Klaus Voigt, *Zuflucht auf Widerruf: Exil in Italien, 1933-1945: Erster Band* (Stuttgart: Klett Verlag, 1989), pp.166-69.

<sup>61</sup> The Canberra Times, 1 May 1939, p.1.

<sup>&</sup>lt;sup>62</sup> QMB, minute book 4, 9 May 1940.

<sup>&</sup>lt;sup>63</sup> Refugee Herbert Liffman who settled in Melbourne recalled that in Melbourne xenophobia was widespread and all newcomers were distrusted in the atmosphere of the economic depression. There was little anti-Semitism. He was not a doctor but a middle-class businessman; his assessment may have applied widely. *Fremde Freiheit: Jüdische Emigration nach Australien Breife 1938-1940* edited by Volker Elis Pligrim, Doris und Herbert Liffman (Hamburg: Rowohlt, 1992), pp.115-16.

<sup>&</sup>lt;sup>64</sup> Cited in *The Sydney Morning Herald*, clipping 15 December 1939, no page cited.

The deployment of obstructionist tactics is well illustrated by summarizing the actions of the Queensland board when it received applications from Eric Fox, Genoa (graduated 1936), Sura Markovitz Weyman, Milan (1932), Leon Wugmeister, Padua (1924), and Izydor Ropschitz, Padua (1925). The state of Victoria had registered Fox, but he wished to move to Queensland.

I served for a period of at least twelve months in the Hospital Asola, Italy, and the Bolgna University Clinic, obtaining the prescribed experience in medicine, surgery and obstetrics at each institution. However, owing to the war and racial prejudice it would probably be impossible for me to now obtain Certificates to this effect and I shall be pleased if you will waive this when dealing with my application. I was unable to practice in Italy for more that twelve months before mentioned and arrived in Victoria in May, 1939. The Medical Board of Victoria granted me registration on 4<sup>th</sup> July, 1939 and my first engagement in this state was at Murrayville where I have practiced for the last four months.

In March 1940, the Queensland board insisted on further documentation for Fox.

The application of Sura Markovitz Weyman, Milan (1932) was supported by Dr Rappoport of Brisbane and Dr Horowitz of Cairns. She was awaiting other references. A certain Dr Quinn, a fanatic opponent of registering refugee doctors, arrived at the meeting in the nick of time to introduce two motions. First, "that this application be deferred pending inquiries from the Consul General for Italy in Australia as to whether the qualifications held by her entitles her to practice in Italy and that the matter of the dates on the certificates be cleared up." Second, "that Dr. Weyman be informed that the Board is not satisfied with her certificate of character. Such certificate should be from some public official in Italy, for instance, the Registrar of the Ordine dei Medici in Milan."65 The Italian consul general replied with information that enabled the board to erect another roadblock. "Under Italian laws," he wrote, "Jewesses are allowed to practice their profession as doctors of medicine and surgery just as any other national. There are not restrictions. Similarly with foreign Jews, provided they can establish their right to reside in Italy, no restrictions are imposed on them practicing their profession." The board could now ask if applicants could establish a right to reside in Italy and if not they should not claim reciprocity. <sup>66</sup> Quinn, noting that unauthorized residents could no longer

<sup>65</sup> QMB, minute book 4, 11 April 1940.

<sup>&</sup>lt;sup>66</sup> QMB, minute book 4, 13 June 1940.

practice in Italy and thus could not be accorded reciprocity in future, wanted to know if the change would affect the status of doctors registered already under the reciprocal agreement.<sup>67</sup> He wanted a revocation of their registration.

Leon Wugmeister had applied around the same time as Sura Weyman and introduced character letters from two Brisbane doctors and a letter of reference from Mayor of Milan attesting "to good civil, moral, and political conduct." He had a certificate of registration from the "Fascist Provincial Organization of Physicians certified by the British Consulate General, Havana, Cuba" As a final blocking effort in his case, the board "directed that the applicant and other applicants similarly circumstanced be required to show the Board that they can establish their right to reside in Italy." Unable to do that, Wugmeister applied anew as a Polish citizen whereupon the board informed him that Poland had no reciprocal agreement with the United Kingdom.<sup>68</sup> Comparable yet distinctive circumstances applied to Maurice Beraha, Naples (1936); he had had to leave Italy and applied to work at Innisfail Hospital but the board learned that he had not been formally registered by any provincial chapter of the Ordine dei Medici on account of his Greek citizenship. Since Mussolini at that moment was preparing to invade Greece, he was unlikely to get Italian cooperation. His request and subsequent appeal for registration were rejected. There was no reciprocal agreement with Greece.<sup>69</sup> The origins of the applicants and the ways in which their aspirations could be blocked followed each step in the collapse of European order.

The application of Izydor Ropschitz, Padua (1925) returns us to the health tourism, because "he was a very well-known doctor on the Italian Riviera among British residents." A Polish Jew who had gone to Italy, but could stay no longer, Ropschitz had trained at The Vienna General Hospital. Fleeing to England he had volunteered for emergency medical work in London and then signed on as a ship's surgeon aboard the *Tyandareus*. That was how he arrived in Australia. He carried character references from a Lt Col G.S. Hibbert who had known him well for three years and a Commander F.G.C. Coates who wrote that he knew him well for ten years. Ropschitz was represented by J.S. Hutchinson, Barrister at Law. He had not known Ropschitz until recently, but his wife's

<sup>&</sup>lt;sup>67</sup> QMB, minute book 4, 13 June 1940.

<sup>&</sup>lt;sup>68</sup> QMB, minute book 4, 8 August 1940.

<sup>&</sup>lt;sup>69</sup> QMB, minute book 4, 10 October 1940.

cousin was a Manchester cotton merchant who spent several months annually at Alassio, Italy, knew him and wrote that the doctor had been ordered to leave Italy. 70

The board insisted on character references and a security report from the Commonwealth Investigation Department. <sup>71</sup> Eventually, after Wugmeister's counsel threatened the board with a proceeding by way of mandamus, he was registered and so too was Ropschitz.<sup>72</sup> They were the last doctors to be registered in Queensland through the reciprocity agreement, because in early December 1940, the Queensland board received a cable from the General Council for Medical Education and Registration of the United Kingdom. The British council forwarded an Order in Council revoking that of 9 March 1901 by which the Medical Act of 1886 was applied to Italy. This put an end to the reciprocity of credentials, although Australian states were reminded that they retained the authority to accept the Italian credentials if they wished. 73 Unlike the situation that had existed in 1901, the Dominions had greater constitutional authority now to venture into the world. But the Australian state medical boards and the New Zealand counterpart remained BMA satellites. Reciprocity with Italy had an unintended impact on a few lives. From 1933 to 1940, at least forty-three refugee doctors had applied for registration in Queensland. Twenty were successful and the Italian reciprocity agreement can be thanked for most of them. Victoria also honoured reciprocity with Italy.<sup>74</sup>

Developments in New Zealand from 1934 to 1941 diverged slightly from those in Australian states. However, the protagonists' attitudes resembled those in Australia. In 1933, refugee doctors began applying for admission to New Zealand with the intention of practicing medicine. According to Freya Klier, author of Gelobtes Neusseeland, the medical profession was hostile to the first five, who arrived from 1933 to 1935. In fact, initially, the medical council took a relaxed approach and without screening simply recommended refugees for a three-year course of training at the University of Otago.

<sup>&</sup>lt;sup>70</sup> OMB, minute book 4, 12 September 1940.

<sup>&</sup>lt;sup>71</sup> QMB, minute book 4, 12 September 1940.

<sup>&</sup>lt;sup>72</sup> QMB, minute book 4, 14 November 1940.

<sup>73</sup> OMB, minute book 4, 16 December 1940.

<sup>&</sup>lt;sup>74</sup> The Times (London), 7 June 1939, p.15; The Argus (Melbourne), 16 July 1939, p.9; 18 August 1939,

p.12. <sup>75</sup> Freya Klier, *Globtes Neuseeland: Fluchten bei die Ende der Welt* (Berlin: Aufbau Taschenbuch Verlag, 2006), pp.79-80.

The course entitled graduates to permanent registration upon graduation. But as early as July 1938 the council expressed alarm at "the considerable numbers of applications that are being received." Policy changed. Previously, the council had handled applications expeditiously; the council's secretary simply forwarded the files to Otago. Henceforth, the council would review applications at formal meetings.<sup>76</sup>

By early 1941 the New Zealand Customs Department had issued entry permits, valid for two years, to sixty-seven doctors; forty had arrived by mid-1941. The department, like its Australian equivalent, warned that entry did not mean that refugees had a right to practice medicine; they could practice if they had qualifications from continental countries which had a reciprocal agreement with the British Empire. In early 1939, the council recommended a limit of fifty refugee doctors. The New Zealand High Commissioner in London sent a standard letter to potential immigrants declaring that the likelihood of a permit being granted to a non-British subject was "even less in the case of professional persons, such as doctors and lawyers, than in the case of most other classes of workers." The stock phrase mirrored warnings sent by the Commonwealth government to prospective immigrants.

To enter New Zealand, several refugee doctors abandoned medicine and accepted an assortment of jobs including farm hand and lab technician. A handful had secured the Scottish certificate. The Director-General of Health reported in August 1941 that eight refugee doctors had been registered on the basis of British degrees. In an adroit move to control the situation and appear generous, the New Zealand Medical Council had approved of a plan whereby refugee doctors would submit credentials when requesting entry into New Zealand. Since mid-1938, the council exercised greater control and would determine whether to allow applicants to attend a three-year programme at the University of Otago. Support from relatives helped a few take the programme. For

<sup>&</sup>lt;sup>76</sup> NZ, Health, Director-General of Health, Memo for the Minister of Health, "Admission of Foreign Doctors to New Zealand, 22 August 1938.

<sup>&</sup>lt;sup>77</sup> NZ Health, C.J.C.J. Drake, Secretary to the Medical Council, to Dr. Stuart Moore, 14 March 1939.

<sup>&</sup>lt;sup>78</sup> NZ Health, C.B. Burdekin, Intelligence Officer, draft form letter on letterhead of New Zealand Government Offices, The Strand, London [no date but possibly as early as 1938].

<sup>&</sup>lt;sup>79</sup> NZ Health, Customs Department to Director-General of Health, 2 March 1939.

<sup>&</sup>lt;sup>80</sup> On the origins see NZ Health, C. Chapman, Registrar, University of Otago, Medical School, to The Comptroller of Customs, 3 March 1939; on the closing of the programme see NZ Health, W.H. Watt, Director-General of Health to Professor C.E. Hercus, Dean of Medical School, University of Otago, 8 August 1941.

example, forty-year-old Alfred Heppner left his practice in Berlin-Weissensee in 1936 and was assisted in New Zealand by his brother-in-law, a refugee dentist who had been among the initial émigrés. <sup>81</sup> Heppner entered the Otago course in 1939. <sup>82</sup>

Twenty-one refugee doctors appear to have come through the Otago programme. 83 In common with most of his Australian counterparts, the school's dean, C.E. Hercus, believed New Zealand had a shortage of doctors. 84 The New Zealand approach to refugee doctors seemed logical and practical; it also required coordination among immigration authorities, the medical council, and the Otago medical school. Beneath surface appearances of a coordinated accommodation to help refugees, the council's behaviour was as restrictive as that of any board in Australasia. It closed off the Italian route. Upon direct inquiry from a firm of solicitors representing an Italian doctor, the secretary of the New Zealand Medical Council, flatly denied the existence of any reciprocal agreement between New Zealand and Italy. 85 The government followed this development, because rejection hinged on a constitutional position. When another doctor applied with Italian qualifications, the Health Department consulted the Crown Law office which advised that since the United Kingdom had committed the Dominions to a treaty obligation without consulting them, the medical council should deny registration. Had the applicant, Dr. Neumann, appealed, the Director-General of Health was certain the Supreme Court would have decided in the doctor's favour. As consolation, Dr. Neumann was offered and accepted a posting as medical officer in Samoa.86

Despite initially accepting the Scottish certificate and arranging a special medical school programme, the New Zealand Medical Council claimed in late 1939 that newly accredited European doctors amounted to a glut on the market. The chairman of the council used exactly that term when he called for a halt to the Otago programme. Future

<sup>81</sup> Gelobtes Neuseeland, pp. 80-1.

<sup>&</sup>lt;sup>82</sup> NZ Health, H. Chapman, Registrar, University of Otago to the Secretary, Medical Council of New Zealand, 28 June 1940.

<sup>83</sup> NZ Health, Memorandum prepared for the Minister of Health, 5 September 1941.

<sup>&</sup>lt;sup>84</sup> NZ Health, C.E. Hercus to W.H. Watt, Director-General of Health, 25 July 1941.

<sup>&</sup>lt;sup>85</sup> NZ Health, C.J. Drake, Secretary to the Medical Council, to T.H. Sutherland, Branch Secretary, Labour Party, 21 March 1939; Messrs. Bamford, Brown, and Wheaton to the Medical Council, 22 March 1939; Messrs. Bamford, Brown, and Wheaton to C..J. Drake, 6 April 1939

<sup>&</sup>lt;sup>86</sup> NZ, Health, Memo to the Minister of Health by the Director-General of Health, "Refugee Doctors Domiciled in New Zealand" [no date but March-April 1941].

generations of New Zealand medical graduates, argued the chairman on behalf of the membership, deserved security. The "foreign doctors" were allegedly "reducing the chances of New Zealand students taking up medicine." Italian Fascist propaganda had made comparable claims. In New Zealand, the government, hospital administrators, medical educators, and some doctors saw matters differently from the BMA; they insisted there was a doctor shortage, noting too that the medical schools had small classes. It was reported as well that some refugee doctors were better qualified than their Otago instructors. 87 In addition to the medical profession's worry over its membership being swamped by newcomers, there were anxieties about an influx of men and women (possibly up to twenty per cent were women) with superior experience. Envy surfaced in scorn about the specializations of the European doctors; it was claimed that they were so narrow that they could not tackle rural general practice. A prominent Dunedin doctor revealingly referred in a letter to the council's secretary to "these psychotherapy knowalls from Vienna."88

Unhappy with the number of immigration applications from doctors, the medical council monitored protectionist developments in New South Wales while building its own protectionist case. 89 Council members rightly feared adverse publicity if they acted bluntly; for appearances' sake they needed to craft a plausible case against the programme or else "our motive might be misunderstood." They thought that recent increases in the numbers of New Zealand born medical students plus assertions about the likely stretched capacity at Otago would offer plausible cover for terminating the scheme. They had not counted on Otago faculty members calling their bluff. Otago's medical faculty disputed the council's portrayal of an over-worked faculty by voting to continue to admit refugee doctors – albeit with a majority of one. But the medical council had the last word and informed the school in March 1940 that it had no authority over the admission of refugees. The council let refugees on a waiting list know that "in the future no concession in this respect [the Otago programme] to foreign graduates in medicine

<sup>&</sup>lt;sup>87</sup> NZ Health, undated clipping [April 1939) "Refresher Course in Dunedin."

<sup>88</sup> NZ, Health, W. Newland to C.J. Drake, 28 March 1939.

<sup>&</sup>lt;sup>89</sup> NZ Health, C.J. Drake to the Secretary, New South Wales Medical Board, Secretary, 7 June 1939; New South Wales Medical Board to C.J. Drake, no date [received 22 June, 1939] and 1 September 1939. NZ Health, Hugh Douglas to C.J. Drake, 14 June 1939.

will be granted." The end of the Otago programme in March-April 1940 had little impact, because soon parties not yet in the country but holding valid entry permits were not expected to reach New Zealand on account of the serious turn in the war. 92 But the medical council's assault on refugee doctors did not stop with its termination of the Otago programme. A sub-committee of the council had drafted the resolution that had infuriated Prime Minister Peter Fraser.

That in order to safeguard the interests of medical practitioners in this Dominion and particularly of those overseas, it is a recommendation to the Medical Council that alien enemy medical men who qualify for registration in New Zealand be admitted to the Register only on condition that they limit their practice to resident positions and other duties as may be determined.<sup>93</sup>

Compared to BMA (New Zealand branch) policy, this resolution was soft. The BMA branch unanimously proposed that the medical council suspend the registration of any enemy alien practitioners. 94 In the aftermath of the stunning series of German conquests in April to June 1940, guite a few members of the New Zealand branch of the BMA felt that the refugee doctors might include "planted agents." 95

What happened to the refugee doctors whom state boards in Australia had refused to register or the immigrants to New Zealand who, to improve their prospects for entry, declared they would not seek registration? Many found work in at water, milk, and local health boards as chemists, in hospital and university laboratories as technicians, and in pharmaceutical firms. Several female doctors married and abandoned their careers; some others worked as hospital dieticians or in pharmacies. A few unregistered doctors living in Sydney ignored medical boards and practiced as "specialists" without a license; there was a narrow space within state laws that permitted someone to advertise as a skin

<sup>&</sup>lt;sup>91</sup> NZ Health, C.J. Drake to the Registrar, University of Otago, 4 March 1940.

<sup>92</sup> NZ Health, For a detailed summary of the state of the sixty-seven refugee doctors and the Otago programme see W.H. Watt, Memorandum for the Minister of Health, no date but March 1941.

<sup>&</sup>lt;sup>3</sup> NZ Health, handwritten minute on margins of report on the New Zealand Medical Council meeting of 26

September 1939.

94 NZ Health, General Secretary, British Medical Association, New Zealand, to C.J. Drake, 10 October

<sup>95</sup> NZ Health, General Secretary, British Medical Association, New Zealand, to the Director-General of Health, 2 July 1940.

specialist, orthopedic specialist, respiratory specialist, nose and throat specialist, and so forth. They could neither advertise as a doctor nor prescribe medicine. When he applied for a temporary Commonwealth license to practice medicine during the war, Ernst Fabian noted on his application form that he was a building superintendent and "health practitioner unregistered." Erich Ziegler, who had fled to Brussels where he worked as a medical officer for a Jewish Aid Centre, made his way to Australia; he wrote that he resided in Sydney as an "unregistered medical practitioner." Taking his confession further than others, perhaps in pride and defiance, Samuel Haneman declared "I am settled as unregistered practioner with predominant ear-nose-throat practice." He had been practicing for seven years and had a fully equipped surgery. "There is no other Doctor in the neighbourhood (Fletcher Street, Bondi)," he explained. These doctors took a risk. They could be charged with manslaughter in a patient's death. Barred from legal practice in central Europe because they were supposedly not German enough, refugee doctors were now prohibited from legally practicing for being too German.

Between late-1939 and mid-1940, the alignment of countries into hostile blocks was incomplete and war fronts not solidified. Consequently, the journeys of several central European refugee doctors to Australia were facilitated by Italian steamship lines and the Imperial Japanese government. The former profited from conveying Jews to the Far East and Australasia. Japanese government distanced itself from the anti-Semitic horrors of Germany. Moreover, until July 1940 Shanghai remained an international anomaly where arrivals did not require a passport or visa. In August 1939, the Japanese persuaded the British-dominated municipal council to institute visa requirements for Shanghai, but they were poorly enforced, and until March 1941, the Japanese embassy in Moscow still issued so-called transit visas that enabled refugees to reach Shanghai via Russia on the pretext that the traveler was in transit to somewhere else.

<sup>&</sup>lt;sup>96</sup> Applications, 1942, Application of Ernst Fabian.

<sup>&</sup>lt;sup>97</sup> Applications, 1942, Application of Erich Ziegler.

<sup>&</sup>lt;sup>98</sup> Applications, 1942, Application of Samuel Haneman.

<sup>&</sup>lt;sup>99</sup> Horst Peter Eisfelder, *Chinese Exile: My Years in Shanghai and Nanking* (South Caulfield: Makor Jewish Community Library, 2003), pp.10-12. Also see *The Argus* (Melbourne), 18 November 1938, p.4.

<sup>&</sup>lt;sup>100</sup> Antonia Finnane, Far from Where? Jewish Journeys from Shanghai to Australia (Melbourne: University of Melbourne Press, 1999), p.103.

<sup>&</sup>lt;sup>101</sup> Marvin Tokayer and Mary Swartz, *The Fugu Plan: The Untold Story of the Japanese and the Jews during World War II* (New York: Paddington Press, 1979), p.17 and p.27.

By Spring 1940, Germany's western offensive made flight from the continent to the United Kingdom exceedingly difficult. Until mid-1941, the Nazis still promoted the departure of Jews from Europe; however, few countries wanted to receive them. 102 Several routes remained open to Australasia. A few doctors, along with many other refugees who had recently arrived in England, were sent via the passenger ship *Dunera* to Australian internment camps as part of the British policy of deporting thousands of refugees. 103 Until the German invasion of Russia in late June 1941, Jews in small numbers could flee Europe by constricted and difficult routes. Some crossed Russia by the Trans-Siberia Railway and sailed from Vladivostok to Japan and on to Shanghai. Between 17.000 and 20.000 Jews arrived in Shanghai from 1938 to 1941. Polish doctor Meyer Mirski fled his country and found work in a Lithuanian hospital; then he possibly received his transit documents from the Japanese consul in Kovno who assisted many refugees. Mirski crossed Siberia reaching Japan in February 1941. There he worked briefly as a medical officer at the Polish Embassy, before sailing for Australia in August 1941. 105 The offensive against the British Empire and the United States in December 1941 closed off escape from East Asia to Australia and New Zealand, and by then too the organized murder of Jews in Europe had begun. 106

Several doctors had fled Germany and Austria in 1938-9 to practice medicine in Shanghai or at missionary hospitals in China. A few signed on as a ship's doctor and that employment carried them east to an Asian refuge. Shanghai had a substantial number of refugee doctors who shared general poverty with their patients" until the American Joint Distribution Committee set up a hospital at Hongkew. As valuable as Shanghai was as a refuge for thousands of Jews, many found it uncomfortable and looked to move on. Roman Zieher, for example, left Austria after the German occupation and arrived in

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<sup>&</sup>lt;sup>102</sup> Marrus and Paxton, "The Nazis and the Jews in Occupied Western Europe, 1940-1944,", p.107.

<sup>&</sup>lt;sup>103</sup> For an account of life in the internment camp at Hay see *Das Gefangenenschiff: Mit der 'Dunera'' über vier Weltmeer* (Berlin: Verlag am Park, 2001), pp.199-249. Michael Marrus, *The Unwanted: European Refugees in the Twentieth Century* (New York: Oxford university Press, 1985), p. 205.

<sup>&</sup>lt;sup>104</sup> Bernard Wasserstein, *Britain and the Jews of Europe, 1939*-1945 (London: Leicester University Press, 1999), p.43. Also see *Voices from Shanghai: Jewish Exile in Wartime China* edited, translated, and with an introduction by Irene Eber (Chicago: University of Chicago Press, 2008), p.7.

<sup>&</sup>lt;sup>105</sup> Applications 1942, Application of Meyer Mirski. On Senpo Sughara and Polish and Lithuanian Jews see *The Fugu Plan*, 20-43

<sup>106</sup> Marrus and Paxton, "The Nazis and the Jews," p.113.

<sup>&</sup>lt;sup>107</sup> Chinese Exile, pp.45-6.

Shanghai in September 1939, joined the staff of an American hospital in Changchow in October, enlisted as a doctor with the British army at Shanghai in November 1941 and was bound for Singapore when the start of the Pacific war diverted him to Manila, and then almost immediately to Melbourne. The Pacific War drove European doctors out of Canton, Singapore, Malaya, the Dutch East Indies, Papua, Manila, and the Solomon Islands. Interned as enemy aliens, late refugees with a medical degree found employment in internment camps as medical assistants. Soon some recent internees plus many earlier refugee doctors who had been rejected by state medical boards were able to practice medicine legally to aid the war effort, although the medical boards maintained their opposition and extracted concessions from the Commonwealth.

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Dedicated opponents of refugee doctors branded them enemies when the war began. The determined Dr. Quinn of Queensland attempted to thwart applicants whenever he could and introduced a motion in March 1940 "that the board approach the Commonwealth Government about precluding the registration of foreign doctors for the duration of the war, and that other state boards be approached about undertaking the same lobby." If war permitted those hostile to the refugee doctors to confuse the situation, it gave impetus to the formation of national associations of refugee doctors and the hiring of solicitors to assist with registration through Italian reciprocity. Moreover, the doctors acquired a new significance with a Commonwealth government facing an acute demand for skilled personnel; however, resistance from the medical profession and the army medical service slowed acceptance of a scheme for the wartime registration of alien doctors even though a British defense regulation of 1939, revised in 1941, provided

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Applications 1942, Roman Ziehler. Also see National Archives of Australia, Medical Practitioners (Registration in Australia of persons who have qualified elsewhere) National Security (Alien Doctors) Regn. 1942 - Licences under - Applications and Correspondence. Victoria Section 1. Series number A1928 Control symbol 652/17/4 Section 1, Zeiher to Director General of Medical Services, 13 February 1942. 

109 Applications 1942, Applications of Robert Gruenfeld, Edgar Herz, H.F. Bettinger, Roman Ziehler, Eric Kolmer, Robert Fruchtman.

<sup>&</sup>lt;sup>110</sup> QMB, minute book 4, 14 March 1940.

<sup>111</sup> Czechoslovakian doctors in Australia had an association. See National Archives of Australia, Medical Practitioners (Registration in Australia of persons who have qualified elsewhere) National Security (Alien Doctors) Regn. 1942 - Licenses under - Applications and Correspondence. Victoria Section 1. Series number A1928 Control symbol 652/17/4 Section 1, form letter reply to Dr. M.G. Brunton, noting that he was Secretary of the Association of Czechoslovak Doctors in Australia. There also was an Alien Doctors Association. See in the same file Erich Lowenthal to the Director General of Health, 16 February 1942.

guidance for it created a process that allowed refugee doctors temporary registration to work in civilian hospitals and clinics as assistants to British practioners. As individuals, the British doctors who directed the refugees "were generally described as 'fair' and 'kind' towards the foreign doctors." In September 1939, according to Marion Berghahn, the BMA had permitted 1000 refugee doctors on a temporary register. 113

The Tasmanian born Chairman of the Commonwealth Financial and Economic Committee, Professor Lyndhurst Falkiner Giblin, referencing the British scheme for temporary registration, proposed a similar plan to the Minister of the Army Percy Spender in early April 1941. As Giblin's memorandum circulated in subsequent weeks, it drew opposition from the medical services branch of the army where senior officers drew upon experiences from World War I rather than the current world situation to conclude that the public would reject treatment by "the Huns." Such was the opinion of Major-General R.H. Fetherston, Director General of Medical Services in "the Great War." The current Director-General of Medical Services, Major-General F.A. Maguire, concurred and in a May 1941 minute to the Adjutant General added another reason why the army should oppose the use of refugee doctors in civilian positions. In his mind, they would be "competing with Australian doctors absent on active service." If necessary, he suggested, Australia might have to do what the Untied Kingdom had done and recruit American doctors.

When the medical profession in May to July 1941 lobbied the government against registering refugees, it returned often to the idea that it would be wrong to allow foreigners to compete with Australians at war. In Australia it was estimated that as many

<sup>&</sup>lt;sup>112</sup> NZ, Health, Memorandum of Nordmeyer, Minister of Health, for the Director-General of Health, 30 July 1941. Also see *Times*, 8 October 1941, p.2.

Marion Berghahn, Continental Britons: German-Jewish Refugees from Nazi Germany (Oxford: Berg, 1988), pp.84-5.

<sup>&</sup>lt;sup>114</sup> National Archives of Australia, Melbourne Repository, Series number MP508/1 Control Symbol 65/710/123, Enemy Alien Doctors. Employment [Box 102], L.F. Giblin to The Hon. P.C. Spender, K.C., 3 April 1941.

<sup>&</sup>lt;sup>115</sup> National Archives of Australia, Melbourne Repository, Series number MP508/1 Control Symbol 65/710/123, Enemy Alien Doctors. Employment [Box 102], Major-General R.H. Fetherston, former Director-General of Medical Services to Major-General F.A. Maguire, Director General of Medical Services, 12 May 1941.

Services, 12 May 1941.

116 National Archives of Australia, Melbourne Repository, Series number MP508/1 Control Symbol 65/710/123, Enemy Alien Doctors. Employment [Box 102], Major-General R.H. Fetherston, former Director-General of Medical Services to Major-General F.A. Maguire, Director General of Medical Services, 12 May 1941, Minute on Employment of Enemy Alien Doctors, 19 May 1941.

as a third of the country's doctors would be called up for military service; already in April 1941 an estimated 300 of Victoria's 1700 registered doctors were in uniform. Thus, in April-July 1941, the civil shortage of doctors – not a military one – and the attendant press clamour convinced the Australia's war cabinet to follow Giblin's advice and take advantage of the refugees by licensing them to serve in country areas or in institutions for the duration of the emergency, with or without the consent of medical boards.

In late 1941, the Commonwealth government consulted the medical profession through a newly-created war-time Central Medical Coordinating Committee. This national committee argued against, but accepted, wartime registration as an expedient. 117 It alleged that a shortage of country doctors had existed before the war and thus was not a war emergency; higher state subsidies for country doctors and an extended Flying Doctors programme, it proposed, could have obviated the need to license aliens for country districts. Enclosing a petition from medical personnel with the Australian Imperial Force in Malaya and referring to another from the Middle East, the committee insisted that military doctors felt betrayed. European states had not granted Australia reciprocity, except for Russia, and the United States and Canada had not granted reciprocity, so why should Australians be singularly generous? The doctors worried about re-establishing their practices after the war; so long as that anxiety existed, claimed the committee, it would impede the enlistment of medical practioners as medical officers in the services. 118 Legal opinion supported the constitutionality of the emergency measure under the terms of the National Security Act of 1939; the government thus pressed on despite the boards' disapproval. 119 A circular letter of 6 January 1942 informed state Premiers of the coming scheme. They agreed to cooperate, although Victoria's Premier A.A. Dunstan informed Prime Minister John Curtin that registering

National Archives of Australia, Series A472, Control Symbol W5733, National Security (Alien Doctors)
 Regulations (hereafter NAA, National Security (Alien Doctors), F.A. McGuire, Chairman, Central Medical Coordinating Committee, Appreciation by Central Medical Coordinating Committee, 4 September 1941.
 NAA, National Security (Alien Doctors), Petition, Medical Practioners, Australian Imperial Force,
 Malaya, 22 July 1941

<sup>&</sup>lt;sup>119</sup> NAA, National Security (Alien Doctors), Assistant Secretary, Department of Health, to the Director General of Health, 2 February 1942.

aliens was not policy in his state; rural residents short of doctors were annoyed that their premier "harped away on the possibility of Australians losing their practices." <sup>120</sup>

To appease the states, the Commonwealth Director-General of Heath let state health departments assign the refugee doctors to duties, plus the regulations forbade any medical practice by aliens unless they were registered medical practioners. The temporary registration ordinance included a section that banned that practice under pain of a heavy penalty. The coordinating committee, representing the views of the medical boards, argued that, since temporary registrants would have to practice in places specified by the state boards, unregistered practioners would have the presumed advantage of mobility. A newly established Commonwealth Alien Doctors Board went after the unlicensed doctors at it first meeting. Unregistered doctors were prosecuted. 122

Immediately upon announcement of the temporary registration programme, there were ninety-one applicants (forty-seven from New South Wales, forty from Victoria, eleven from Queensland, three from South Australia, and one from Western Australia). More applicants trickled in over the next three years. For registration, all applicants had to pass a written and an oral exam; depending on their performance they were assigned to general practices or placed in institutions under supervision. In general, state governments delegated the licensees to narrow fields of service. Thus, for example, Dr. Johan Philip van Leendt, Leiden (1937), was assigned to the Javanese Seamen's Home in

NAA, National Security (Alien Doctors), Prime Minister to Premiers, 6 January 1942 [copy]; Premier A.A. Dunstan (Victoria) to the Prime Minister, 16 January 1942; Premier Robert Cosgrove (Tasmania), 19 January 1942; Premier T. Playfair (South Australia) to the Prime Minister, 21 February 1942; Premier W.J. McKell (New South Wales) to the Prime Minister, 19 February. On Dunstan's harping see NAA, Medical Practitioners (Registration in Australia of Persons who have qualified elsewhere) National Security (Alien Doctors) Regus. 1942 - Press Cuttings, Series number A1928, Control symbol 652/17/8652, clipping *The Herald*, 12 September 1941, p.6

<sup>&</sup>lt;sup>121</sup> NAA, National Security (Alien Doctors), J.H.L Cumpston, Director-General of Health, Memorandum, 18 March 1942; National Archives of Australia, Series A1928, Control Symbol, 652/17/3/Section 5, Registration of Persons Who Have Qualified Elsewhere Minister of Health to R. Herman, 4 December 1942; J.H.L Cumpston, Memorandum, 27 November 1942. On stopping unregistered doctors from practicing, see Cumpston to the Minster of Health, 3 May 1942 (draft); Resolution of the Alien Doctors Board, First Meeting, Canberra, 1-2 May 1942.

<sup>&</sup>lt;sup>122</sup> See the case of Joseph Gonzwa in National Archives of Australia, Personal Papers of Prime Minister Curtin Correspondence 'G', Series number M1415, Control symbol 427, Acting Director-General of Health to Prime Minister John Curtin, 31 October 1944

<sup>&</sup>lt;sup>123</sup> National Archives of Australia, Series A1928, Control Symbol, 652/17/1 Section 2, Alien Doctors, J.H.L. Cumpston, to Dr. J. Newman Morris, 7 April 1942.

<sup>&</sup>lt;sup>124</sup> National Archives of Australia, Series A1928, Control Symbol, 652/17/3/Section 3, Registration of Persons Who Have Qualified Elsewhere, J.H.L Cumpston, Chairman, Alien Doctors Board to Dr. Stratford Sheldon, 21 November 1942.

Sydney and to Dutch ships, but could not initially treat even the family members of Royal Netherlands service personnel. Throughout the programme's existence, doctors could petition for further tests to widen their license's scope. The programme was wound down at the end of the war. By then some refugees had established five years residency in a British dominion. New South Wales amended its medical practice act to allow the permanent registration of the temporary license holders. 126

The New Zealand government observed the British and Australian initiatives respecting the temporary registration of refugee doctors but encountered extensive opposition when discussing with the medical council and a wartime national medical committee the idea of a temporary registration for doctors in the Otago programme. At first, the government contemplated assigning both these students as well as recent refugee graduates to *locum tenens* work in provincial hospitals so that they would not congregate in the large centres to compete in a well-served market and annoy the medical council. 127 However, not all hospital boards, even those short of doctors, were willing to take in refugee doctors properly registered. The Nelson Hospital Board wanted them and opposed their freedom of movement; however, boards in Gisborne, Hawkes Bay, Christchurch, Cromwell, Ashburton, Gore and Invercargill did not want them. <sup>128</sup> The Director-General of Health, summarizing opinions from his contacts around the country, warned the government that "the refugee doctors are not welcomed in the public hospitals." <sup>129</sup> In September 1941, he also reported that the armed forces "will not accept the services of the alien doctors, having steadfastly set their face against employing them." <sup>130</sup> An official assessment alleged that the Otago programme would lead to the registration of most refugee doctors in the country, concluding that "there are only two or

<sup>&</sup>lt;sup>125</sup> National Archives of Australia, Series A1928, Control Symbol, 652/17/3/Section 3, Registration of Persons Who Have Qualified Elsewhere, J.H.L Cumpston, Chairman, Alien Doctors Board, to Sir Hugh Devine, 26 January 1943.

<sup>&</sup>lt;sup>126</sup> National Archives of Australia, Series A1928, Control Symbol, 652/17/3/Section 5, Registration of Persons Who Have Qualified Elsewhere, Dr. L. Polk to Chairman, Alien Doctors Board, 28 December 1945.

<sup>&</sup>lt;sup>127</sup> NZ Health, W.H. Watt, Director-General of Health, Memorandum for the Minister of Health War Control of Newly Registered Medical Practioners, no date but March or April-1941.

<sup>&</sup>lt;sup>128</sup> NZ Health, W.H. Watt, Director-General of Health, Memorandum for the Minister of Health, no date but April-1941.

NZ, Health, Memo to the Minister of Health by the Director-General of Health, "War Control of Newly Registered Medical Practioners," no date but April to June 1941.

<sup>&</sup>lt;sup>130</sup> NZ, Health, Memo to the Minister of Health by the Director-General of Health, "Emergency Medical Services in Great Britain: Use of Alien Doctors," 10 September 1941.

three who will benefit if temporary registration were made possible to them by means of Emergency Regulations." The estimate probably did not include doctors who had taken up other careers as a condition of entry or out of frustration.

In relation to the carnage of the war and the Holocaust, the plight of refugee doctors was a minor affair. Approximately 350,000 refugees escaped the Nazis before September 1939 and thousands more managed to flee from then until the end of 1941; a few thousand were doctors. 132 Their plight in host countries reminds us of the importance of debate and transparency in public life; on balance, the press, the public, and even a few politicians had a better sense of public interest than the healing profession. <sup>133</sup> The number of refugee doctors who emigrated to Australia and New Zealand is difficult to determine. There likely were between 300 and 350 refugee doctors in Australia and New Zealand from 1933 to 1945; perhaps 100 to 150 achieved registration from 1933 to 1941 and the Commonwealth granted temporary licenses to another 60 to 75 from early 1942. 134 More individuals had made inquires about emigrating and went elsewhere. 135 Large numbers and precise figures are not essential for drawing lessons, because the important fact is the insignificance of the refugee numbers compared to the size of the medical profession. New South Wales alone had 2400 doctors; in its six-year medicine programme in 1939 the University of Sydney had 869 students <sup>136</sup> and the University of Melbourne between 600 and 700. 137 In the 1930s, New Zealand graduated twenty-four (1931) to sixty-eight (1938) students and in 1940 there were 1620 registered doctors in the country. <sup>138</sup> In 1939, Australia and New Zealand thus had about one doctor for every thousand residents and

<sup>131</sup> Ibid.

<sup>&</sup>lt;sup>132</sup> Marrus, *The Unwanted*, p.203 and 205.

<sup>&</sup>lt;sup>133</sup> Island Refuge: British Refugees from the Third Reich, p. 259.

<sup>134</sup> It is difficult to estimate because official lists of names were specific to a date and did not cover the entire period. I base the upward estimate on Queensland. Only the records from that state cover the entire period. With about one-eighth of the country's population, it seems reasonable that Queensland would have an eighth of the refugee doctors seeking registration, or 320. I added the estimated 40 refugee doctors who landed in New Zealand. My research so far has found the names of 239 refugee doctors, some of who never sought registration.

<sup>&</sup>lt;sup>135</sup> See the form letter prepared by the Medical Council of New Zealand. NZ Health, C.J.C.J. Drake to a list of recipients, 2 May 1939.

<sup>&</sup>lt;sup>136</sup> NAA, NSW Premier, Sydney Morning Herald clipping, letter to the editor, 11 December 1939 no page

<sup>&</sup>lt;sup>137</sup> NAA, NSW Premier, *Melbourne Herald* clipping 5 December 1939 no page cited

<sup>&</sup>lt;sup>138</sup> NZ, Health, C.J. Drake, Secretary to the Medical Council to Sir Donald McGavin, 31 May 1940.

the added challenge of numerous sparsely settled locales; the United Kingdom had one doctor for every 822 residents.<sup>139</sup> The men and women who came from central Europe were too few to reduce drastically the incomes of Australia or New Zealand doctors, and there appears to have been need. That leaves the problem of explaining the persistent resistance to registration.

In Australia and New Zealand, most opponents to registration appear to have avoided explicit anti-Semitic remarks; however, they had recourse to a coded vocabulary. They alleged sly practices, deceit and false pretenses, and culturally unsuitable medical arts. Since the bulk of applicants were Jews, these remarks registered a specific meaning in common with anti-Semitism. As well, the tenacity and the blanket character of opposition suggest hostility to a people not just a commitment to public safety or pursuit of self-interest. Any concern about training could have been met by testing the skill sets of each applicant. But there also were plausible rationalizations emanating from medical boards. The Great Depression had adversely affected Australasian doctors like most other groups; if by benefit of hindsight we can see the relative insignificance of their plight, we still have to acknowledge that while some members of the boards and a few politicians lacked the socio-political imagination to recognize the perils of their times they were not anti-Semitic but parochial. Medical reciprocity likewise was a narrow issue, certainly narrow relative to the Nazi ejection of medical talent that could have been more effectively enlisted by the Empire at an earlier date. Yet, some board members resented that medical degrees from their universities had been rejected by European bodies, the same bodies that had once represented the very doctors who now wanted registration. A petty tit-for-tat attitude was in play, a professional pique out of all proportions to the situation. 140

A few board members may have truly believed that refugees were ill-qualified or lacked language competence. Creative thinking along the lines of the Scottish programme or the practices established in New York could have attended to these objections. The argument that the refugee doctors had inadequate training seems a weak rationale. BMA hostility to the Scottish initiative is a telling point since that initiative

<sup>140</sup> *The Argus* (Melbourne), 22 June 1939, p.3.

<sup>&</sup>lt;sup>139</sup> NZ Health, Memorandum on medical students prepared for Prime Minister Peter Fraser by C.J.C.J. Drake, Secretary, New Zealand Medical Council [undated draft; May 1939].

demonstrated that training could have been enhanced and doctors tested. Perhaps demonstrations of foreign competence irritated the BMA, because these successes showed that the guild system was not the way to protect the public. Indeed, examinations of individuals ultimately occurred as a wartime expedient in Australia. We are left asking, if the refugees had not been Jews, would the opposition to registration have been so unbending

## **APPENDIX**

Table 1: Statistics Relating to Refugee Doctors: The United States, the United Kingdom, Australia, and New Zealand, 1933-1945

Jurisdiction	Significant Data on the Numbers of Refugee Doctors
New South Wales	55 unregistered refugee doctors seeking registration: 1939 BMA statement
New South Wales	48 unregistered doctors in Sydney (Commonwealth immigration authorities) 1939
New South Wales	47 applicants for temporary licenses 1942-43; some not on 1939 list but arrived 1940-2
New South Wales	Over 25 temporary licenses granted 1942
New South Wales	485 doctors in Sydney; 1178 in suburbs, 738 in other locales
Queensland	42 applicants for registration 1933-40
Queensland	20 applicants registered 1933-40
Queensland	11 applicants for temporary licenses 1942-43
Victoria	Over 50 refugee doctors
Victoria	40 applicants for temporary licenses 1942-43
Victoria	27 temporary licenses granted 1942
South Australia	3 applicants for temporary licenses 1942-43
Western Australia	1 possible applicant for a temporary license 1942-43
Commonwealth	56 temporary licenses issued initially in 1942
New Zealand	67 unregistered doctors granted right to enter the country 1934-41
New Zealand	40 landed in the country by 1941
New Zealand	21 took three-year course at the University of Otago
New Zealand	1620 registered doctors in 1940
All Australasian	239 names encountered in national government files in Australia and New Zealand
Jurisdictions	
United Kingdom	750 Germans, Austrians, and Italians; 350 Poles; 250 Czechs: <i>Times</i> , 30 May 1941, p.2
United States	1528 refugee doctors; 170,000 doctors in the country; 5500 medical graduates
	annually: <i>The Argus</i> (Melbourne), 8 August 1939, p.2.

Table 2: Refugee Doctors: Names, Year of Arrival, and Medical Registration Status

Family	Name	State	Year	New Name	Status in Files
?	Anna	NZ	1937		Working in Health Department
Aaron	Kurt	Qld	1938		Scottish Diploma
Arnheim	Felicitas	Qld	1938		Italian Credentials
Asch	Heinz	NZ	1939		Will not practice in NZ
Austerlitz	Н	Vic	1940		Applicant for 1942 temporary license
Baer	S	Qld	1938		Italian Credentials
Baer	C	Vic			Applicant for 1942 temporary license
Bauer	Bethold	Vic			Applicant for 1942 temporary license
Baumatz	Szaja	Qld	1938		Italian Credentials
Beraha	Maurice	Qld	1940		Italian Credentials
Berg	Max	Qld	1937		Scottish Diploma
Berger	P	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Bettinger	Hans	Vic	1939		Applicant for wartime license 1942
Binder	Ludwig	NZ	1940		Registered or about to be registered in NZ 1940
Bishopverder	Ernest		1939		Scottish Diploma
Bleichroder	Ursula	Qld	1938		Italian Credentials
Bleider	Ludwig	NZ	1939		Applying for admission to Otago programme
Boehm	G	Vic			Applicant for 1942 temporary license
Boldt	Franziska	NZ	1939		Marrying Dr Einstein
Bondy	Gustav	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Bower	Herbert	Vic			Applicant for 1942 temporary license
Bower	V	Vic			Applicant for 1942 temporary license
Brunton	M	Vic			Applicant for 1942 temporary license
Bulate	S	Vic			Applicant for 1942 temporary license
Burstein	Joseph	NZ	1939		Registered or about to be registered in NZ 1940
Candi	Giovanni	Qld	1939		Italian Credentials
Carl	F	NZ	1939		Admission to Otago
Cohn	Seigfried	NSW	1940		Applicant for wartime license 1942
Coppa	Mario	Qld	1939		Italian Credentials
Costero	Vincenzo	Vic	1941		Applied for temporary license 1943
Deutsch	Edith	Vic			Applicant for 1942 temporary license
Doctor	Rolf	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Dreifuss	A.	NZ	1937		Practising in Auckland
Duerrheim	G	Vic			Applicant for 1942 temporary license
Duras	Fritz	Vic			Applicant for 1942 temporary license
Ehrmann	Ludwig	Vic			Applicant for 1942 temporary license
Einstein	Otto	NZ			Practicing in Pio Pio in 1939
Elias	?	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Epstein	K	Vic			Not interested in applying for temporary license 194
Erber	Kurt	NZ	1938		Otago course to be registered in NZ 1940

Fabisch         Walter         Qld         1939         Italian Credentials           Falk         Era         Vic         Applicant for 1942 temporary license           Feldman         IIans         Vic         Inquired about wartime license 1942           Fener         S         NSW         1938         On 1939 NSW list of unregistered foreign doctors           Finkel         Salomon         Vic         Applicant for wartime license 1942           Finkel         Freda         Vic         Applicant for wartime license 1942           Fischer         Bernard         Vic         Applicant for wartime license 1942           Fischer         Bernard         Vic         Applying for admission to Otago programme           Fleischnam         E.J.         NZ         1935         Practising in Auckland           Fleicher         Morris         Old         1938         Italian Credentials           Fres         Erich         Old         1940         Italian Credentials           Frank         Alexander         NSW         1938         Italian Credentials           Frank         Alexander         NSW         1938         On 1939 NSW list of unregistered foreign doctors           Fracklander         Hans         Vic         Inquired abou	Fabian	Ernest	Tas		Applicant for wartime license 1942
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,	Heppner	Alfred	NZ	1939	Registered or about to be registered in NZ 1940
Hersch Hans NZ 1939	Herach	H.L.	NZ	1938	Special course at Otago
	Hersch	Hans	NZ	1939	

Herz	Edgar	NSW	1942		Applicant for wartime license 1942
Heydemann	Hans	Vic			Applicant for 1942 temporary license
Hirch	Leonard	Qld	1939		Italian Credentials
Hirsch	F	Vic			Inquired about wartime license 1942
Hirschfeld	Hans	Qld	1938		Scottish Diploma
Hirsz	J	NSW	1939		On 1939 NSW list of unregistered foreign doctors
Horowitz	Wilhelm	Qld	1939		Italian Credentials
Huppert	Isidore	Vic			Applicant for wartime license 1942
Huth	Н	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Jabonski	Walter	Qld	1938		Italian Credentials
Jacobsen	E	Vic			Inquired about wartime license 1942
Jakobowicz	Rachael	NSW	1940		Applicant for wartime license 1942
Jaroschy	W	Qld	1938		Rejected in Qld
Jena	Leon	Qld	1933		Rejected in Qld
Kallman	David	NZ	1937		
Kantor	R	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Karoly	Margaret	NSW	1939		Applicant for wartime license 1942
Kassel	Arthur	NSW	1940		Applicant for wartime license 1942
Katz	Kate	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Katz	W	NZ	1938		Practising in Auckland
Kaufman	E	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Kinsbrunner	Paul	Qld	1939		Italian Credentials
Kleschova	O	Vic			Applicant for 1942 temporary license
Knosser	Isidor	NSW	1938		
Kolmer	Eric	SA			Applicant for wartime license 1942
Koplowitz	Kurt	NZ	1938	Kent	
Kouvelis	C	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Kral	Franz	NZ	1938		Registered or about to be registered in NZ 1940
Kraviat	S	Qld	1938		Italian Credentials
Krimper	Elsbeth	Vic			Applicant for 1942 temporary license
Krutsch	M	Vic			Applicant for 1942 temporary license
Kudelka	Oskar	Qld	1938		Applicant for wartime license 1942
Kuffler	Stephen	NSW			Applicant for wartime license 1942
Kuner	L	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Kurzweil	Paul	NZ	1940		Registered or about to be registered in NZ 1940
Kyeberg		Qld	1940		
Landauer	F	Vic			Applicant for 1942 temporary license
Landecker	Hans	NSW	1939		On 1939 NSW list of unregistered foreign doctors
Lappe	John	Vic			Applicant for 1942 temporary license
Lazslo	Elizabeth	NSW	1939	Wheatley	Applicant for wartime license 1942
Leeser	Felx	NSW	1939		Applicant for wartime license 1942
Lefman	Siegfried	Qld	1938		Italian Credentials
Leiboehetz	I	NSW	1938		On 1939 NSW list of unregistered foreign doctors

Leichtentritt	?	NSW			On 1939 NSW list of unregistered foreign doctors
Leiser	F	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Lemchin	G	NZ	1935		Practising in Wellingon
Levi	Siegfried	Qld	1938		European credential recognized
Levinsohn	David	NZ	1939		
Levy	Fritz	NSW	1939		On 1939 NSW list of unregistered foreign doctors
Lion	M	Vic			Applicant for 1942 temporary license
Lipman	A	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Loebel	Robert	NSW			Applicant for wartime license 1942
Lofkovitz	Leopold	Qld	1939		
Lowenthal	Erich	Vic			Applicant for 1942 temporary license
Lubbe	Thies	SA			Applicant for wartime license 1942
Lucas	Otto	NSW	1936		Applicant for wartime license 1942
Ludovic	Lenai	Qld	1939		Italian Credentials
Mandl	?	Qld	1938		Rejected in Qld
Mangold	S	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Margulies	Erich	Qld	1938		Italian Credentials
Markovitz	Sura	Qld	1940	Weyman	Italian Credentials
Marszalkowicz	S	NSW	1939		On 1939 NSW list of unregistered foreign doctors
Marulius	Martin	Vic			Applicant for 1942 temporary license
May	Oswald	Vic			Applicant for 1942 temporary license
Menschiel	V	Vic			Inquired about wartime license 1942
Meyer	Moritz	Qld	1938		Scottish Diploma
Meyer	Curt	NZ	1939		Registered or about to be registered in NZ 1940
Milstein	O	Vic			Applicant for 1942 temporary license
Mirski	Mejer	Vic			Applicant for wartime license 1942
Monheimer	Benno	Qld	1934		Rejected in Qld practising in Dunedin
Monk		NZ	1939		Applying for admission to Otago programme
Muggia	Adrianno	SA			Applicant for wartime license 1942
Munk	Rachael	NZ	1940		Registered or about to be registered in NZ 1940
Muschenko	Ivan	Vic			Applicant for 1942 temporary license
Nagler	Friedric	NSW	1938		Applicant for wartime license 1942
Newman	Catherine	NZ	1938		
Newmann	Hans	Qld	1940		Italian Credentials
Oestericher	Paul	NZ	1939		
Oppenheim	E	Vic			Applicant for 1942 temporary license
Pergram	N	Vic			Applicant for 1942 temporary license
Perloth	Soloman	Qld	1939		Italian Credentials
Phillips	Edith	Vic	1939	Deutsch	Applicant for 1942 temporary license
Plotkin	Z	NSW	1939		On 1939 NSW list of unregistered foreign doctors
Protopopoff	N	Vic			Applicant for 1942 temporary license
Rauchmann	Е	Vic			Inquired about wartime license 1942
Rechelman	Georg	NSW	1939		Applicant for wartime license 1942

Reichman	M	NZ	1938		Admission to Otago
Reinberg	?	NSW	1939		On 1939 NSW list of unregistered foreign doctors
Renth	M	Vic			Applicant for 1942 temporary license
Renth	Martha	Vic			Applicant for wartime license 1942
Revai	Arthur	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Ropschitz	Izydor	Qld	1940	Roxon	Italian Credentials
Rosenbaum	J.	NZ	1938		Holds English
Rosenman	Hans	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Rosenthal	C	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Ross	Serge	NSW	1941	Tascerbackoff	Applicant for wartime license 1942
Roubichek	Marianna	Qld			Applicant for wartime license 1942
Rubinsztejn	K	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Rychter	Sayja	NSW	1939		On 1939 NSW list of unregistered foreign doctors
Samuel	Alfred	WA			Registered in WA in 1941
Scharf	Jacob	NZ	1939		Will not practice in NZ
Schatzki	Paul	NSW	1940		Applicant for wartime license 1942
Schenlbaum	M	Qld	1938		Italian Credentials
Schiehsel	Augustin	Vic			Applicant for 1942 temporary license
Schlafrig	G	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Schlafrig	Albert	SA			Applicant for wartime license 1942
Schlesinger	Mortiz	Vic			Applicant for 1942 temporary license
Schmidt	C	NZ	1939		Admission to Otago
Schmidt	Heinrich	NZ	1939		Registered or about to be registered in NZ 1940
Schneider	J	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Schnoeder	Johan	Qld	1938		Rejected in Qld
Schubert	K	Qld			Completing studies at Queensland 1942
Schubert	Paula	Qld			Applicant for wartime license 1942
Schuller	Arthur	Vic	1939		Applicant for wartime license 1942
Schwarcz	Julius	Vic			Applicant for 1942 temporary license
Schwarzbrod	Jakob	Vic		Shaw	Applicant for 1942 temporary license
Segal		NZ	1939		Admission to Otago
Semon	Olga	NZ	1938		
Shattner	В	Vic			Applicant for 1942 temporary license
Sheffield	Ruth	Vic			Applicant for 1942 temporary license
Simons	Sofie	SA			Applicant for wartime license 1942
Singer	Ernest	Vic	1939		Applicant for wartime license 1942
Singer	K	Vic			Applicant for 1942 temporary license
Sluchi	A.	NZ	1936		Practising in Wellington
Sonnenberg	A	Vic	1940		Inquired about wartime license 1942
Sperling	A	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Steiner	R	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Sternberg	A.B.	NZ	1934		Practising in Wellington
Sternberg	Hans	NSW	1939		Applicant for wartime license 1942

Stoneman	G	Vic			Applicant for 1942 temporary license
Suerth	Egon	Vic	1940		Applied for temporary license 1943
Suss	Edith	Vic			Applicant for 1942 temporary license
Sutterlin	Johanna	SA		Lubbe	Applicant for wartime license 1942
Szanks	Geza	Qld	1938		Italian Credentials
Szout	M	NSW	1938		On 1939 NSW list of unregistered foreign doctors
Teichman	David	Vic	1940		Inquired about wartime license 1942
Temko-Minc	Rosa	SA			Applicant for wartime license 1942
Tesio	Fausto	Vic	1941		Applied for temporary license 1944
Trautner	Е	Vic			Applicant for 1942 temporary license
van der Berg	William	NSW	1934		Applicant for wartime license 1942
van Leent	Joseph	NSW	1942		Applicant for wartime license 1942
Verzeans	?	Qld	1940		
Wajcberg	D	NSW	1937		On 1939 NSW list of unregistered foreign doctors
Wasser	Ludwig	Vic	1940		Inquired about wartime license 1942
Wechsler	Zacharias	Qld	1941		Applicant wartime license 1942 reg in WA
Wechsler	Helen	WA		Furnberg	Applicant for wartime license 1942
Weiser	Jakob	NZ	1937		
Werner	Ilena	Vic			Applicant for 1942 temporary license
Weyman	Irving	Qld	1939		Italian Credentials
Wodak	Helen	Vic			Applicant for 1942 temporary license
Wohlfarth	Charlotte	Vic			Applicant for 1942 temporary license
Wolff	Charlotte	Vic			Applicant for wartime license 1942
Wugmeister	Leon	Qld	1940		Italian Credentials
Zeiher	Roman	Vic			Applicant for 1942 temporary license
Ziegler	Erich	NSW			On 1939 NSW list of unregistered foreign doctors
Zimmett	Jakub	NSW	1937		On 1939 NSW list of unregistered foreign doctors
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