

# The Racial Integration of Postgraduate Medical Integration in Florida

A Unique Perspective Afforded by  
the Correspondence of Dr. T.Z.  
Cason

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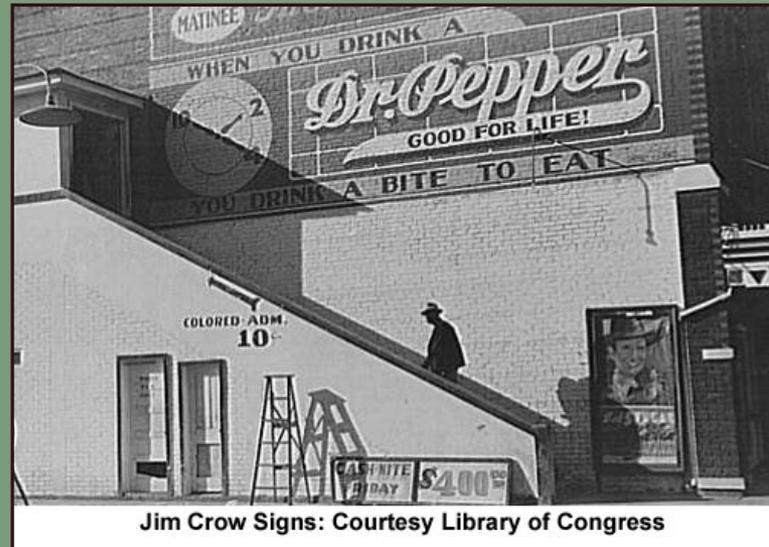


# Historical Context: the Mid-Twentieth Century South



# Racism in The Mid-Twentieth Century South

- ❏ Racism had varied manifestations
  - ❏ cross-burning clan demonstrations
  - ❏ substandard treatment of blacks by the legal, medical and education systems
  - ❏ Jim Crow segregation laws



# Segregation

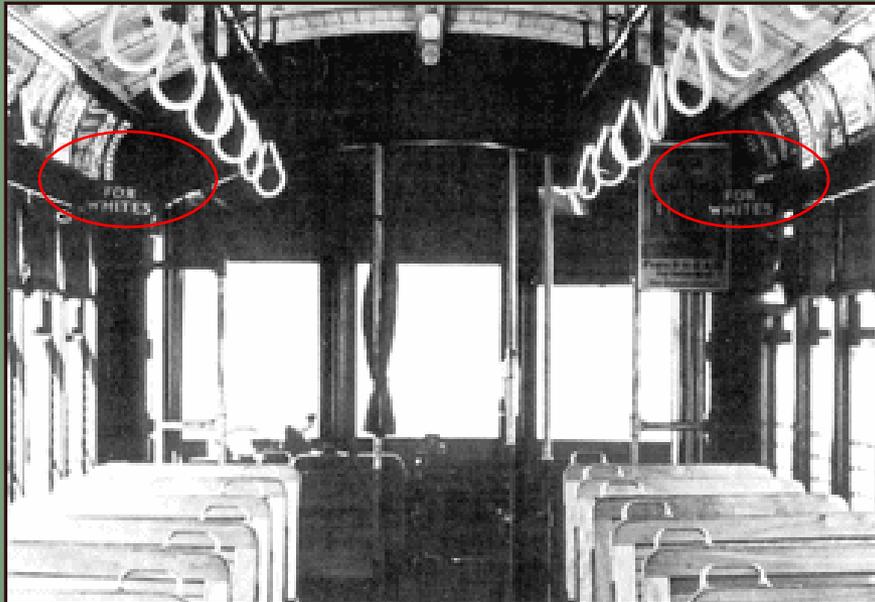
- While in popular culture Jim Crow laws may be most strongly linked to other southern states such as Alabama and Mississippi, FL enacted 19 such laws between 1865 and 1967, with some of the harshest penalties on record.
- Formal segregation laws governing, among other things, intermarriage, cohabitation, loitering, schooling at every level, and even juvenile delinquent facilities were added to the Railway Act and executed in concert with the unwritten rules of “interracial etiquette.”
  - The latter set of regulations prohibited events such as blacks and whites eating together or shaking hands and even dictated driving practices.
- These laws served as a continual reminder to all blacks, regardless of professional status, of their subordinate societal status



# Segregation

## **1865:** Railroad [Statute]

Negroes or mulattoes who intruded into any railroad car reserved for white persons would be found guilty of a misdemeanor and, upon conviction, sentenced to stand in the pillory for one hour, or to be whipped, not exceeding 39 stripes, or both, at the discretion of the jury." Whites faced the same penalty for entering a car reserved for persons of color.



# Medical Education for Blacks

Black doctors' extensive education and training provided no immunity to the ills of society, and they encountered prohibitive discrimination at every step of their careers

- ❑ medical school acceptance
- ❑ clinical experience
- ❑ Internships
- ❑ Residencies
- ❑ induction into professional organizations
- ❑ participation in postgraduate medical education



# Life for Blacks in Jax

Survey of the black community in Jax. (the short-course site) in 1946 found that

- ❑ This community looked upon law enforcement with fear and lack of confidence.
- ❑ Only one hotel of moderate size was open to blacks
- ❑ No private taxi cabs were available to blacks



# Life of Blacks in Jax

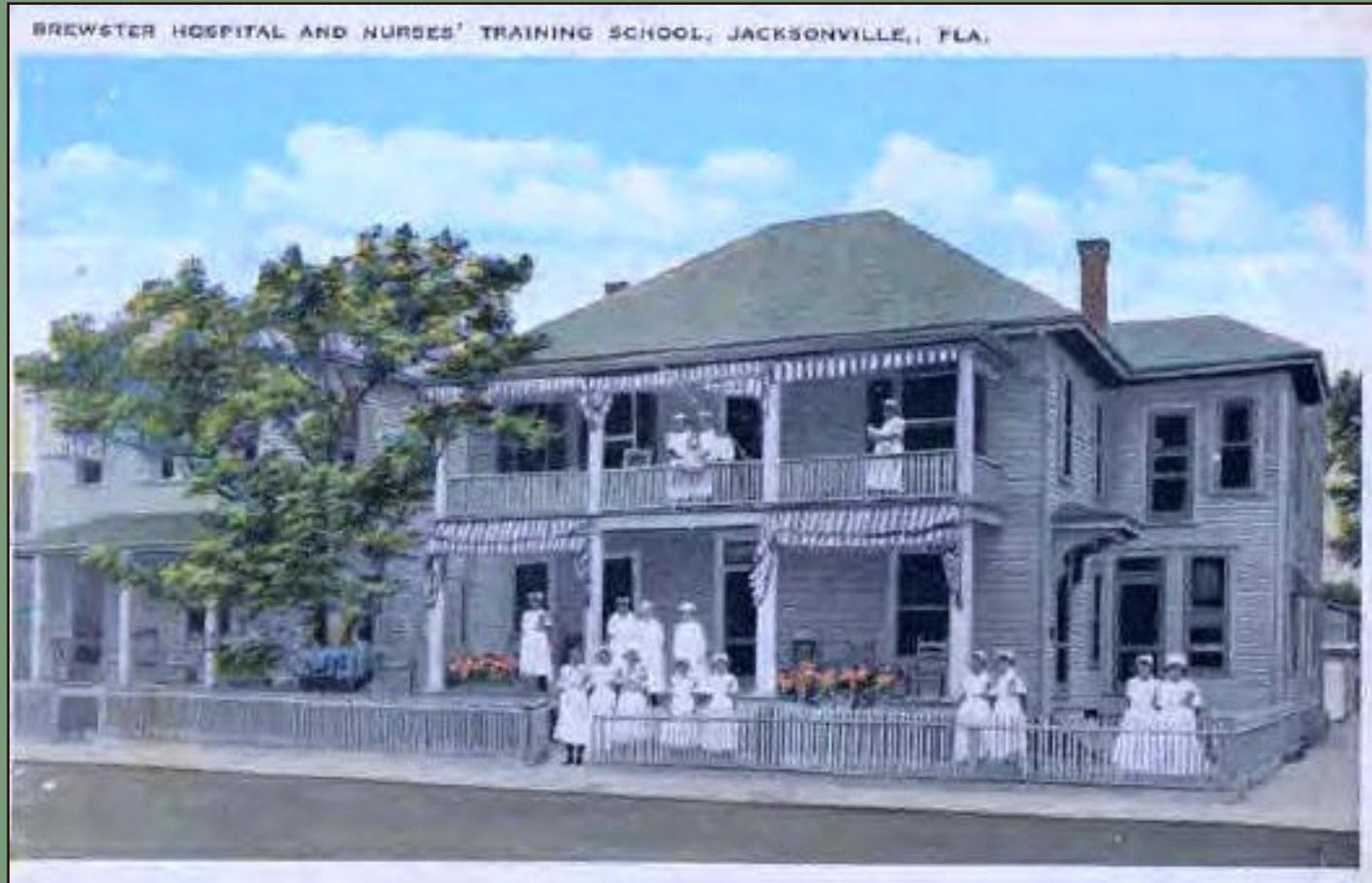
Only two of seven hospitals in the city served blacks. Brewster Hospital served only blacks, and Duval County Hospital took both blacks and whites.



*A Brewster Hospital Nurse*



# Life of Blacks in Jax



*Postcard showing Brewster Hospital, an approx. 30 bed facility that was the primary source for the inpatient care of blacks prior to integration.*



# Testimony of a Board-Certified Black Pediatrician in Louisiana on Why He Fled the South

*“Negro schools were overcrowded, percentagewise far more than white schools; their plants were inferior; their outlook grim. My children were not permitted to ride the school bus that stopped a half block from my house. They could walk hurriedly through the tax-supported City Park, but not sit down, picnic, enjoy the pony rides or other amusements so appealing to children. There were no theatres in town to which I might take my family for an evening’s entertainment. There were stores in which they were not welcome; and as soon as they were able to read, they had to learn the difference between ‘white’ and ‘colored’ on two public drinking fountains, side by side.”*



# Testimony of a Board-Certified Black Pediatrician in LA on Why He Fled the South

*“In a community that judges first by color and last by performance, I was counted out before I started. You may hate a man because he is wicked, lies, cheats, or steals, and he can hope to change; but when you hate a man because he is black, there is no hope, because he is as God made him and cannot change. . . many physicians . . . who believe they have a public duty to their community over and above collecting fees, cannot expose their families and their careers to the forms of malicious vengeance rampant in so many southern communities.”*



# Life for Black Doctors in Florida

- A 1943 survey of 80 black Florida physicians revealed a number of things about the reality of medical practice by these physicians
  - They faced isolation from professional contacts largely as a result of limited hospital access.
  - The majority of hospitals accessible to black doctors at the time were “poorly equipped and nearer to the status of nursing homes.”
  - Routine lab tests on things such as blood chemistry were rarely performed, and tools such as x-ray were rarely used
  - When young doctors were asked why they would not practice in the state, they cited the scarcity of hospital connections, poor educational opportunities for their children, and a “fear of living in the Deep South.”



# Professional Isolation of Black Physicians in the South

- ❏ Black doctors were barred from Southern local affiliates of the American Medical Association and this exclusion held many negative professional implications.
  - ❏ ineligibility to practice in many Southern white hospitals, institutions which required membership in local A.M.A.
  - ❏ little or no voice for black doctors, or their patients, with local and state health departments.
  - ❏ In the vast majority of cases, exclusion from the A.M.A. affiliates did not allow for postgraduate medical education--especially alongside white doctors.
- ❏ The A.M.A. did not condemn the discriminatory practices of its Southern affiliates, which included 17 states and the District of Columbia, until 1950 and did not prohibit their affiliates from racially discriminating until over a decade later



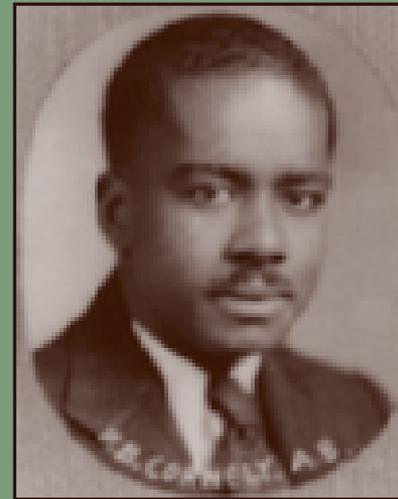
# Postgrad. Med. Ed. Opportunities for Southern Black Physicians

- Although the A.M.A., the National Board of Examiners, many medical schools as well as many medical societies displayed an interest in postgraduate medical education, a 1938 report found that only 30-40% of southern black physicians had participated in post graduate courses during the year.
- While one could attribute the poor attendance numbers to “indifference,” lack of *opportunity* to attend, especially for the 2500 black physicians in the South, could have been “one of the more important determining causes.”



# Postgrad. Med. Ed. Opportunities for Southern Black Physicians

- A study published in 1942 found that only five of the seventeen southern states offered no opportunities to black physicians for postgraduate education.
- In the twelve states that did, only four state medical societies, including Florida's, had permitted blacks' use of their facilities. The Florida Medical Association, F.M.A., in fact, received praise from Dr. Paul Cornely, the author of this study, Howard University M.D., medical researcher and political activist, who deemed the association's attitudes commendatory, and actions worthy for emulation by other southern societies.

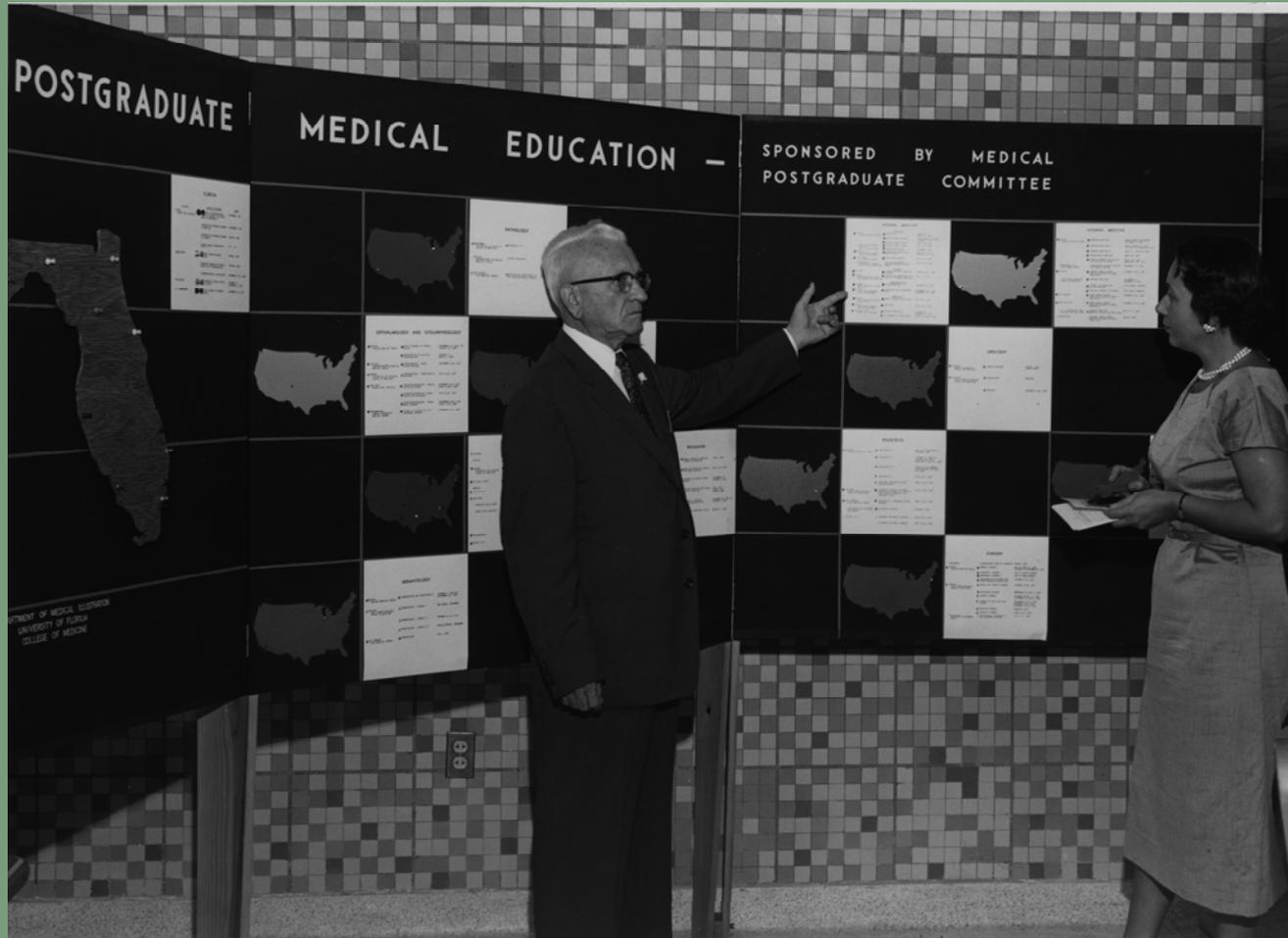


*Dr. Paul Cornely*

# The Integration of Postgraduate Medical Education in Florida



# Dr. T.Z. Cason, 25<sup>th</sup> Annual Course



# Who is Dr. T.Z. Cason?

- Dr. Turner Zeigler Cason, a Gainesville, Florida native born October 11, 1886
- B.S. from the University of Florida in 1908 and M.D. from the University of Georgia Medical Department in 1913.
- Practiced Internal Medicine in Jacksonville from 1915-1955.
- A founding member of the Riverside Hospital in 1921 and one of the founders of Hope Haven Hospital for Children in 1929
- Head of the Department of Medicine at the University of Florida Graduate School until the College of Medicine was founded in 1956.
- Served as Chairman of the Postgraduate Education Committee of the Florida Medical Association (FMA) for 27 years.



# Timeline of Postgraduate Medical Education Racial Integration

Week-long segregated course organized and executed by the F.M.A. appointed Medical Postgraduate Course Committee chaired by Dr. T. Z. Cason, M.D.

1933

Cason spearheaded a partial integration movement, in which black doctors were invited to the last three days of the course.

1940

Full integration, where black doctors were invited to participate the entire duration of the course

1941

1942

Arrangements were made to provide the participating black physicians with course credits



# Initial Steps to Integration

- In 1933, the Florida Medical Association appointed a committee, with Dr. T. Z. Cason as chairman, to organize a week-long graduate course for physicians.
- In a letter to a Virginia doctor seeking advice on integrating the course, Dr. Cason describes the short course prior to integration

*“The first three years this course was held in conjunction with the University of Florida and held at Gainesville in university buildings. The question of offering some form of graduate education for Negroes was discussed but because of our affiliation with the University of Florida and the fact that it was held at the University precluded any attempt to invite the Negroes to attend this course. After four years affiliation we mutually severed our association and since we have been cooperating with the State Board of Health.”*



# Initial Steps to Integration

- In 1940, the F.M.A. course took place from June 24-29, overlapping with the course offered to the black physicians through the Florida Tuberculosis and Health Association.
- The course for black physicians took place June 24-26 at Brewster Hospital with cooperation of the Florida, Medical, Dental and Pharmaceutical Association.
- Dr. Cason extended an invitation for the black physicians to attend the last three days of the F.M.A. course and expressed “a personal desire to try this out.” He went on to say, “If it works successfully I am in hopes that the committee will next year approve inviting the Negroes to attend the Short Course as given the white physicians and on the same terms.”



# Initial Steps to Integration

- Despite Dr. Cason's apparent genuine interest in the inclusion of blacks in this course, his remarks were tempered, pragmatically and/or prejudicially, by the social climate of the time

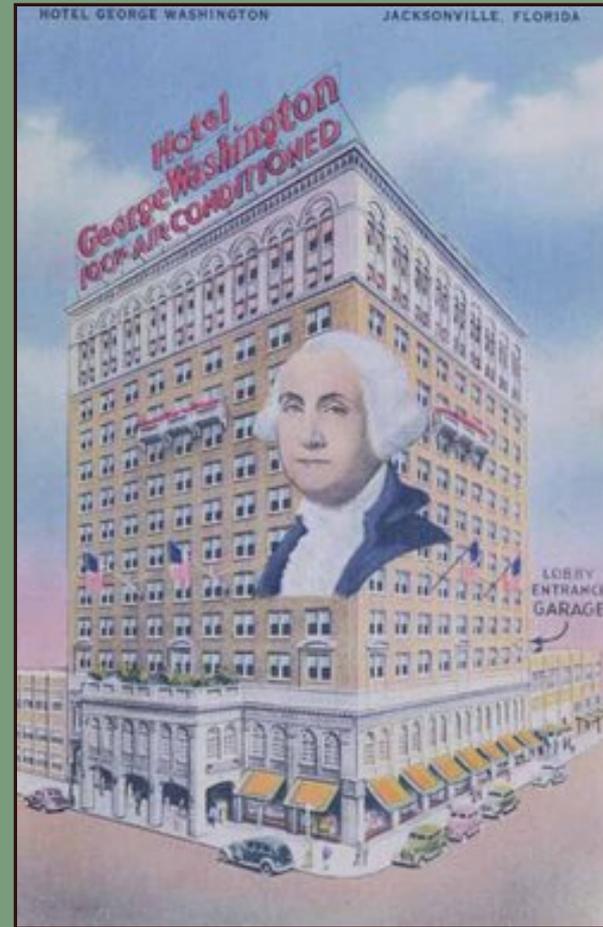
*“Obviously the Negro doctors wouldn't attend the dinners, and no other social affairs are desired during this session.”*

- He went on to list potential barriers to his arrangements for the black physician's attendance of the last three days of the course
  - the permission of the hotel to allow the Negro doctors to come and go during the sessions
  - the consent of the white physicians themselves
  - the black physicians treatment by the city police department



# Initial Steps to Integration: Cason's Requests for Polite Treatment

☞ In a letter to the president of the George Washington Hotel, the site of the short course, he communicated the need for “cooperation and assistance in handling” the black doctors. His went on to say *“It would be very much appreciated if you would ask your personnel to assist these colored physicians in arriving at the meeting rooms and seeing they are not embarrassed. . . . These are high type, outstanding men and will cause no one any difficulty. On occasion elevator operators, bell boys and others in unimportant positions in other hotels have been insulting and caused embarrassment. We would like to eliminate this possibility during the Jacksonville meeting.”*



*Postcard advertising the hotel, 1 of only 2 luxury hotels in Jax at the time*

# Initial Steps to Integration: Cason's Requests for Polite Treatment

 In a letter addressed to the Jacksonville Chief of Police, Dr. Cason stated that most of the committee's attending physicians would come by automobile and would be unfamiliar with Jacksonville traffic laws. He informed the police chief of the doctors' badges, (which he ensured were identical for blacks and whites) which would be issued the first day of the course, and requested leniency for the "white and colored" visiting physicians.



# Partial Integration a Success, Leading to Integration for the Full Length of the Course's

- Dr. Cason's efforts were rewarded by the attendance of 12 of the 39 doctors who had attended the course for black physicians at Brewster Hospital. He reported to the A.M.A. Council on Medical Education and Hospital Secretary, "There were no untoward incidents, and we were generally complimented on the stand we had taken."
- When the Medical postgraduate committee met on 13 October 1940, meeting minutes indicate that the "question of admitting Negro physicians" to the 1941 short course on the same basis as the white doctors was "discussed at length."
  - All four of the committee members present to speak on the matter approved of this admission, "provided they [the black physicians] were assigned special places to sit and no attempt was made to include them in dinners."



# 1941 Integration for the Course's Full Length a Success

- In 1941, 24 blacks attended the full length F.M.A. postgraduate medical education course. In a letter to the A.M.A. secretary, Cason referred to this integration as the committee's "most important progress" and reported that the event "went off without any unpleasantness."
- The success of the integrated course, and plans for its continued implementation, prompted the State Board of Health to stop funding a separate course for blacks, who were taking advantage of the F.M.A. course now offered them.
- In fact, with approximately 24% of black physicians in Florida attending the course, the participation rate for black physicians that year was nearly four times that of the state's white physicians.



# Credit for the Black Physicians Under a Segregated State University System

- Following successful integration in 1941 was the push for the provision of academic credits for the course.
- The process required the approval of the State Board of Control (which was then the governing body of Florida's state universities) .
- The segregated state university system also required two separate registration processes
  - at Florida Agricultural and Mechanical College, (now Florida A & M University) for black physicians
  - at the University of Florida for white physicians



# Credit for the Black Physicians Under a Segregated State University System

 In reference to the separate printing of identical programs, one under the name of Florida A. and M. and the other under the name of U.F., Cason told one of the course's speakers, "We are trying to offer the Negroes in the state equal opportunities for graduate medical education, but for the best interest of the race, it is necessary to handle it in this way."



# Continued Cason Collaboration

- Over the following years, Dr. Cason continued to elicit black and white physician participation in graduate medical education and to communicate with Florida A. & M and the Florida Medical, Dental and Pharmaceutical Association. His efforts were duly noted by many in the black medical community.
- The comments in a 1946 letter from Russell Dyett, a West Palm Beach doctor, summarized the sentiments of many

*“Of course there are others to thank too, but I am thanking you for the fine spirit you have injected in the matter. Yes, we know (using a common expression) that you have stuck your neck out and it is for that fine Christian gentlemanly spirit-act that I am thanking you, and I am sure that I voice the feeling of the entire group when I say, ‘We thank you.’”*



# Closing Thoughts

- ❏ In a social, regional, and professional climate antagonistic to the progress and equal treatment of black physicians, the work of Dr. Cason and his committee was crucial in extending much needed opportunities to black Florida physicians.
- ❏ The integration process, across all aspects of medicine, in medical education, continuing education, and medical practice, was one that required the enduring persistence of black physicians, who faced obstacle after obstacle in their mission to treat the sick.
- ❏ This 1940s collaboration by men of different races, backgrounds, and experiences, who shared the bond of medical professionalism, increased the level of patient care for underserved minority populations through cooperation and the provision of training opportunities for physicians eager to serve those populations. Indeed, this collaboration provides an example for the field of medicine in the 21st century, in which healthcare disparities persist.



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