## **Oral History Interviews**

## Mr. Gordon Crossen

No Photo Available

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**Biographical Information:** Mr Crossen was a general laboratory assistant for the medical

school and anatomy research labs, 1950-1984

**Summary:** Mr. Crossen describes the early teaching labs and lectures in

anatomy.

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## Interview with Mr. Gordon Crossen on February 27, 1985

**Int.:** First of all, Mr. Crossen, can you tell us something about what your position was within the Faculty of Medicine?

**G.C.:** Well, it was when 1 first started called 'dealer' but that's more or less of everything in the Department but I kind of changed that a bit and became more of a ... (pause)

**Int.:** So you did a lot of different kinds of...

**G.C.:** Yes, I helped with research because I was a researcher before. I had been researcher in the Army then I was at the University of Western Ontario for 4 years before coming out here.

**Int.:** When did you actually arrive at U.B.C.?

**G.C.:** August of 1950.

**Int.:** So right when the Faculty of Medicine was starting up?

**G.C.:** Yes, the week before. I was out here on my holidays visiting my parents and I got waylaid by a friend, Dr. Alec Wood, who insisted that I go up and meet Dr. Friedman who was head of the Department.

**Int.:** *Which Department was that?* 

**G.C.:** The Department of Anatomy and, at that time, they were getting a little desperate for somebody with some experience. So I accepted the job then and wired for my trunk and had it sent back out here. I didn't return to Western, which was a research instructor job. So I settled down here again.

**Int.:** So you were actually employed by the Department of Anatomy to be here?

G.C.: Yes.

**Int.:** *Did* you work for other departments within the faculty?

**G.C.:** No, just one department. When research first started up everybody was short of things. They didn't know a lot of little things about how to get equipment. They had put the army huts up and they only had so much space to operate so they had to keep moving things around, back and forth. Then the teaching started up shortly afterwards.

**Int.:** Were they able to start teaching Anatomy right away?

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**G.C.:** Yes, they had made arrangements six months previous, to arrange for one of the funeral homes to get subjects or cadavers and they were in storage at the university.

**Int.:** *They had places to store them?* 

**G.C.:** Yes. Not very good storage areas (Laughs).

**Int.:** What were the storage accommodations like? (Laughs).

G.C.: I don't know that I want it printed (Laughs). Actually, they were two large metal vats that were 8 feet long and 5 feet across and 6 feet deep and they had glycerine in them so that these cadavers, after they were embalmed, would be stored. And that's about when I came. I wasn't asked to help in arranging for them to go over for the first class of school, and they had lovely stainless steel tables there for them.

**Int.:** And this was all in the huts?

**G.C.:** And the huts weren't anything to rave about. Good lighting. Actually, the conditions were quite poor but we had a very good spirit in those days to try to get everything done. The hours were long and I guess it was working six days a week in those days and then the odd phone call on Sunday.

**Int.:** *Oh*, *really?* 

**G.C.:** Yes, it didn't stop. And then shortly after the first year they started a surgical anatomy course. It was given by Dr. Bobby Johnstone who ended up as a professor of surgery. So that carried on for about fifteen years or so, every Monday night. We raced back to the University and waited for people to come in to have their lecture and an hour of demonstration afterwards.

**Int.:** And would you make preparations for these?

**G.C.:** I didn't do much in the way of preparation because we were always short of any material. We never worried about it until Dr. Friedman arranged to have an Anatomy Act passed so that the University could claim bodies.

**Int.:** When was that? When was the Anatomy Act, do you recall?

**G.C.:** It was in the '50s; I imagine about '57, '58, in that area. At that time there was such a good feeling. People were starting to donate their bodies to research and that carried on, and there were very few bodies ever claimed through the Anatomy Act, only the ones that might have come from Essondale or Riverview.

**Int.:** So was it a bit of a struggle in the beginning to have enough bodies to...?

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**G.C.:** Yes, we very seldom ever had a female cadaver. Most of the class were men and it was part of the general course to know a certain amount of abdomen and pelvis and so it took quite a few years, actually... They never had too many at any time to work up a museum like they would have at McGill or Harvard or something like that where you could keep things on display.

**Int.:** Were you working along with Dr. Friedman in helping prepare for lectures, or did you give lectures yourself?

**G.C.:** No, I didn't give any lectures. Actually, I sat in on all the lectures the first year, maybe just to keep busy or sit down for an hour (Laughs). He was always running short or wanting to do something and he had to have somebody around to pass things on to. He was lecturing five afternoons a week, and that was a heavy load. He did most of the lecturing. Dr. Gibson was doing the Histology at that time.

**Int.:** *Did you work with Dr. Gibson at all?* 

**G.C.:** Not a great deal. He was a going concern (Laughs) and still is. You waved to him. He was always phoning you wanting this and that but nothing that bound you too long.

**Int.:** *Did* you work with other people besides Dr. Friedman?

**G.C.:** Well, I seemed to help everybody that came into the Department. The teaching fellows, they were always in there for a few months of research plus teaching, so they'd want animals or equipment so that they could carry on.

**Int.:** What about the supply of animals? How was that dealt with?

**G.C.:** We got those from Dr. Alec Wood at the Animal Nutrition.

**Int.:** *Whereabouts was that?* 

**G.C.:** In the Barn area.

**Int.:** *Oh, I see, out at U.B.C.* 

**G.C.:** I didn't have a car in those days. I used to take Dr. Friedman's car over and see what they had and bring them back. After a while they then tended to... Well, there were other reasons. They thought that they'd have a panel truck because it got to be quite a chore to get them transferred over in short time.

Int.: Yes, I can imagine. You say there was generally a good feeling at the beginning and there was a lot to do, so you were busy. Did you feel there was any effect on you and your co-workers from the confusion with the beginning of the Faculty of Medicine? There was, sort of, a lot of backing and filling and debating about when

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to start and that sort of thing. Did you hear about that or were you involved in it in anyway?

G.C.: I was never involved but I always felt that there was never -- we were working under poor building conditions. It was a worry all the time because they were army huts and not very good security any time that you were working with bodies and that sort of thing. You had to be assured that everything was going to be alright all night. But it never seemed to come to any trouble. We had people who would check at nights and we had ... you know, most of the university staff were very decent about coming around and doing anything. They made sure that everything was secure.

**Int.:** So there was a lot of cooperation, it sounds like.

**G.C.:** Yes, it was. Physical Plant were just wonderful in the way they used to do things.

**Int.:** Do you think everybody found it difficult working under the conditions that were available at the beginning?

**G.C.:** I think so, yes.

**Int.:** *Or do you think they just managed or...* 

**G.C.:** We didn't have the scientific firms here to get things in a short time and, when we first started up, there weren't the funds for research work. If it wasn't for Dr. Friedman being established down East and bringing all his stuff out here, he wouldn't have been able to get started right away. He brought his own technician with him and she's still at the University. She's been strictly research; she hasn't had anything to do with the Department.

**Int.:** So, did you help Dr. Friedman in ordering a lot of the materials he needed or was that his area specifically?

G.C.: Well, I think he relied on me to do a good percentage of running the Department. We could see each other quite easily and it was just a matter of getting together and deciding, this is one thing we wanted, more bones for the students... Well, I didn't have anything to do with the Histology but I had a lot of Histology experience from the war years and so I knew quite a bit about it, and they were then switching over to using human slides rather than animal slides which they had first started with; animal slides weren't the best for teaching.

**Int.:** What kind of problems did you run into, Mr. Crossen, when you were first getting the Department off the ground?

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**G.C.:** Well, instruments were hard to come by and we kind of passed that back to the students very quickly by suggesting that they would buy their own instruments and lab coats. If anybody thought that they should be looked after by the Department...

**Int.:** *It just wasn't possible.* 

**G.C.:** No. We ran on a very small staff all the years we were there. Mickey, who was in research and went South; and one other girl who did Histology and photography.

**Int.:** *There were just three of you?* 

**G.C.:** That's right.

**Int.:** *That is quite small.* 

G.C.: But it didn't change until we took a man that was partially blind on as looking after the animals. And we'd take turns at clobbering animals as they came back and forth. It was always figured that he who did research was responsible for them. I think it outgrew itself and had to have somebody to keep it moving around, to bring feed in. Then they were getting to the point where there were, subjects started to come in more often, they went and ordered a van and thought that I was going to go out and gather them up. I went out twice, once to Essondale. I had to take somebody with me to load it into the van and bring it back. Of course, the van wasn't located or fixed up to hold onto a subject to bring it back and we didn't have very good facilities even for embalming things so I think I spent half of my time cleaning up in the Department just so I could stand it.

**Int.:** *Keeping things in order?* 

**G.C.:** Right. The second time I went to some nursing home for somebody that had just expired and I had to have help to get it onto a stretcher and from the stretcher into the van. It led me to suggest that they have a driver and then they could do all these chores like taking things down to the hospital. Second year had started and they were going down to the hospital a certain amount. So I got rid of that job (laughs).

**Int.:** *They followed your advice?* 

G.C.: Yes.

**Int.:** Do you think that the Faculty of Medicine was properly prepared for students or would it have been better to have waited?

**G.C.:** Well, the students were the only ones who were really prepared. They were just fabulous, actually. They all knew what they wanted and they were all just wonderful in getting things going. They didn't gripe that much at all. I don't remember any of them griping. They were just a wonderful bunch. I think Dr.

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Friedman was well prepared. I don't think Physiology was really ready to get going. They didn't have the equipment on hand. At that time they were wanting to use it on the dogs. This sort of thing. They had trouble getting hold of dogs from the Pound. And the instructors too. They were primarily Ph.D. people and there weren't that many around. Our Department was getting ones who were going in for Orthopaedics and so they had had basic anatomy and that helped. So we were always able to get the one each year to help in the labs.

**Int.:** You mentioned the students being really quite a good group of people. Did you see much of a change in the students over; the years?

G.C.: Well, they're a wonderful group now. We've enlarged so much that you don't have a chance to know them as well. I mean, say, thirty years or so ago after a lecture they'd go into a lab and half-an-hour later they'd all come out and have a smoke and spend fifteen minutes. Then they'd all go back in again and work till 5:30. Today, they rush in or go and have coffee and they don't smoke any more so you don't have a chance to talk any more. It wasn't as relaxing in some ways.

**Int.:** *Well, I'm sure just the numbers...* 

**G.C.:** The numbers make a big difference. And I'm sure people would still like to see a smaller class.

**Int.:** Yes, I'm sure that was rather nice.

**G.C.:** Sixty students.

**Int.:** What was the role of the dean, Myron Weaver, in your Department? Did you have very much to do with him specifically?

**G.C.:** Well ... in the time I knew him, I played golf with him once and went fishing with him once. And I think they had a beach party once. Dr. Kerr put that on. He was a very likable person, but there again, you don't see the dean very much. Even Dean Webber today, the only time you see him is opening the car (door) or closing the car.

**Int.:** But again, I'm sure it was much different in the beginning; that Dean Weaver was much more prominent then than what Dean Webber would be today.

**G.C.:** Yes, I'm pretty sure... Vancouver was quite small back in 1950. It wasn't really expanding very much.

**Int.:** What was your opinion of Dean Weaver?

**G.C.:** I liked him very much.

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**Int.:** Do you think he did a good job with what he had to do?

**G.C.:** Yes, I don't think he had that much time to put it on the road. I understand that Wesbrook was supposed to have been actually the medical building and somehow politics or something went astray. It would have been nice to start the medical school in something like that. But I don't know how that came about ... why ... or just politics. You don't know, do you?

**Int.:** Do you think it bothered Dean Weaver that there weren't specific buildings ready to start with?

G.C.: I would think so, yeah, because we were expanding after about three years. We were wanting more space for teaching fellows and assistant professors. Nobody had really a desk except for the dean and assistant dean. Everybody else worked to a bench. They had a good chair, and they didn't have overhead lighting of any sort that you could sit back and relax. And they all seemed to take their cases with their research notes back home with them every night because they didn't trust the buildings. They did have the odd fire on campus; but they were all army huts until...

**Int.:** Fire, you say, so there was a worry about fire?

G.C.: Yes.

**Int.:** *Did anything happen?* 

**G.C.:** No, nothing.

**Int.:** You didn't ever have any accidents?

**G.C.:** No, not in our buildings.

**Int.:** Oh, that's good...Do you think the physical circumstances made it difficult to actually teach the students? Or do you think the teaching was accomplished in much the same way as it is today; just, it's more comfortable today?

**G.C.:** No, I thought they enjoyed their... With any more than the sixty students it would have been impossible. But sixty was just the right number to teach, to a classroom. They could all sit at blackboards. They didn't need that much in the way of aids to see things. You could pass something around quite quickly, around the room. And today you couldn't. You'd have to have closed circuit TV and colour, and this sort of thing.

**Int.:** So in some ways it sounds like it was easier then?

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**G.C.:** Yes, I'm sure he would know each student and decipher their question and answer it, or answer it later on. And then, after you had your lecture you went into the lab and could demonstrate. It always ended up by a demonstration after a lecture because it usually was taught in regions of anatomy.

**Int.:** Was there much communication between your department within the faculty and other departments?

**G.C.:** No, very little.

**Int.:** Do you think that was a good thing, or did it matter, or what's your opinion about that?

**G.C.:** The technicians knew one another and I guess the faculty did too. There wasn't much that we knew, though, about each department.

**Int.:** Would it have helped if there had been more communication just for exchange of ideas and that kind of thing?

G.C.: No. I think each one of the departments had a different research problem, and the same with the teaching of their course. One uses a lot of equipment, and the Department of Anatomy used just the same thing for the whole year of teaching. They didn't switch. They set up and there wasn't that much of changing. They didn't supply very much to the students. The students had to buy their own books and microscopes and that was it. Be prepared for the course and taught it to the end, then you had to clean up and get ready for the following year. And then Histology or Physiology were changing, setting up new labs: you spent two days setting up one lab and then tear it down to set up again.

**Int.:** Were you involved in designing or working on the designs for the buildings that were finally put up?

G.C.: Yes, but we had gone through about three sets of plans beforehand and there were some good plans laid on which would have been ideal. But they were just forgotten about, and finally people got a little tired wasting their time making drawings of what they would like and such. And those were the plans that were accepted, and they were built at a time when things were very tight, the buildings were not really up to what they could have been to make life easier and (be easier to) maintain.

**Int.:** Why do you think the plans that were better were not used?

**G.C.:** I'm sure the money that they spent on them would have looked after what they would have liked... It was something to do with architects and whatnot. At that time, architects on the campus, hired by them, by the university. They always decided who it was or wasn't going to be.

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**Int.:** What kind of input did you have?

**G.C.:** Just for the amount of space that we did need for each student. At that time I guess we had six students working on each cadaver and then we kind of broke it down to four. So we needed a bit more space and we had to have an idea how much room they needed to wander around.

**Int.:** *Did* you end up getting the space that you wanted?

**G.C.:** No, they didn't provide any extra space at all until they increased the class. Then they added to the building.

**Int.:** So there wasn't room for expansion within the plans?

**G.C.:** It could have been quite easily. Another ten feet or so would have looked after it to allow more students to sit in the lecture room. It was built for 140 and now we have 185...

**Int.:** And they are still using the same room?

**G.C.:** Umm...

**Int.:** So the move to the building doesn't sound to me as if it improved things a great deal, or did it?

**G.C.:** All it provided was more space for research. It didn't actually provide more space for teaching of the students. The lecture room was small; the dissecting rooms were small.

**Int.:** *But was it more comfortable?* 

**G.C.:** A little bit more comfortable because they put padding on the lecture chairs (laughter), the only ones on the campus. And that was Dr. Friedman, who insisted that they have pivot type chairs because he thought that the students should be given notes, and they sit back and listen to concepts on anatomy and do their own studying. Nowadays, they seem to want to copy down everything, plus have all the handouts.

**Int.:** Did you have much to do, or was it Dr. Friedman who did the actual curriculum planning for the department?

G.C.: Dr. Friedman.

**Int.:** *Did you assist him in this?* 

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G.C.: No. It seemed to be all decided after about two years, then they changed that around. Public Health used to be teaching on Saturday morning. I don't think the clinicians liked that very much so an afternoon (Thursday afternoon) was given up to Public Health. And then the students started to come in to have the extra hours on the gross lab, which just kind of took an afternoon away. We had the students and made the week longer by making them work Saturdays. They would have worked Saturday afternoon if they were able to but we didn't have the staff to allow them any more time than what they were getting. Even then, I know I did more hours than was required: somebody had to lock the door at nights.

**Int.:** So that was left to you?

**G.C.:** Yes, open up and lock up.

**Int.:** What about the next dean after Dean Weaver, I think it was John Patterson. There isn't a lot of information about him. Did you have very much to do with him?

**G.C.:** Well, I knew him quite well but I didn't have much to do with him. He was a great friend of the Friedmans and I think they made arrangements to have him come. He had a lot of good ideas which might have been the best thing for the university and the medical thing - but I don't know, there were little things, whether it was politics or not, he didn't stay or else he was offered something bigger down in the States again.

**Int.:** So he wasn't really there long enough to implement very many of his ideas?

**G.C.:** No, I mean actually in some of these things which he wanted, he would have a building and have everything fall into place. Had he been the first one to come, he might have been able to get all this. But there again it was the money. You just didn't see it, never knew how much was going to be spent at any one time

**Int.:** So it sounds like there were financial problems right from the very beginning?

**G.C.:** Right.

**Int.:** And did this really hamper progress?

**G.C.:** Oh, I think so. We worked with poor equipment a lot; there should have been more provided.

**Int.:** Who do you think this responsibility fell on – who could have remedied that situation? Or do you think it's possible to pin it down?

**G.C.:** Well, I remember us getting equipment, or we'd put in for equipment, from the Public Health Department. I had a long list of things that we would like to have in the Department and then we'd have a priority list 1, 2 and 3. We'd get maybe four

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things off the first priority. At one time they wanted a furnace for doing some heating which we needed. It probably would not have cost that much, maybe \$400. It took months to come and it didn't benefit that many. It benefited research for a 1ittle while but everybody wanted to use it. They soon changed their mind about something after they had had a little go on it.

**Int.:** So there was a lot of indecision?

**G.C.:** Yeah, I think with things.

**Int.:** *Must have caused problems?* 

**G.C.:** Well, that's my feeling. I just can't... I wasn't a politician that way; it's politician enough to keep the department running.

**Int.:** You tried to keep out of a lot of these things, did you? I suppose that was wise. Did you have very much to do with the Vancouver General Hospital - or not really?

**G.C.:** Not really. I would go down there. I knew the morgue man down there. There was another time, there was just one man down there and he was looking after bunny rabbits in the next room to the morgue, doing pregnancy tests and he would know them all.

**Int.:** What was your feeling about the relationship between the existing Science faculty and the Medical faculty. Do you think it was a good relationship from the beginning, or were there any problems?

**G.C.:** They helped a certain amount in the beginning. I don't think there were any problems that I know of.

**Int.:** *Did the Medical faculty affect the existing faculties in any way?* 

**G.C.:** I think they were very happy to see the Medical faculty started on campus. They felt it was a big thing, and I think we were all looked up to, those who worked at Medicine, even the trades people. No matter what, it seemed we couldn't do anything wrong; they would cater to us.

**Int.:** *So there was a favourable reaction, pretty well?* 

**G.C.:** I thought so. Because I usually do get along with everybody.

**Int.:** That helps! What about the reaction of the public in general to the starting of a Medical faculty?

**G.C.:** I thought it was just wonderful. We started, but there wasn't anything new. There wasn't anything down at the hospital. I had to go and look at a couple of army huts.

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Then we had Open House and we didn't show anything; we didn't have anything to show. You couldn't walk them into a hallway and then out through an office and see somebody working on a rat. The group wouldn't like that. And there was a little bit of research on dogs - that was another thing you couldn't do, or Dr. Friedman never would cater to it. He never wanted anything like that. He didn't mind a display but he just felt that you could get too much bad publicity.

**Int.:** For Open Houses and that sort of thing?

**G.C.:** Yes, that's right. He didn't want anyone wandering in the building because we just didn't have enough security that would keep things back. Physiology tended to want to display things, and we were in the same hut. They could display more than what we could.

**Int.:** Was there any problem being in the same hut with Physiology or did you manage quite well, get along with them?

**G.C.:** Yeah, we did state our facts about some things. One of the worst things in the world was their throwing dogs out into the garbage cans in summer months. We didn't have incinerators and whatnot to dispose of them properly. They were taken to the incinerator down by the President's home. I couldn't stomach it -- and I had been used to seeing a lot of bad things.

**Int.:** *So what was the conclusion?* 

**G.C.:** Well, we moved from each other. We got separate buildings. And I said, "Well, it would be very nice to have an incinerator in our building." That just went through like that.

**Int.:** *So there is one?* 

**G.C.:** But the other departments didn't get one.

**Int.:** Do they use the one in your building?

**G.C.:** No, I think finally the University put another one in and they come around on a special trip and take things away. You know, spill from that and hot materials too. A lot of the radioactive stuff has to be disposed of that way. Animal work is slow to break down. We haven't used a dog in 25 years in the Anatomy Department and Physiology doesn't do that much either.

**Int.:** Why is that?

**G.C.:** There were so many people against the use of animals they use rats and frogs and this sort of thing. Research has changed.

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**Int.:** *Techniques vary.* 

**G.C.:** For a long time they were very interested in clearances of dogs' kidneys and such, and then it just went by. The Friedmans were interested in hypertension with dogs. It was a costly experiment and so they didn't carry on with it.

**Int.:** Can you think of any little anecdotes, funny things or just things that you can recall during the opening few years?

**G.C.:** Maybe you'll come back next week. (Chuckles.)

**Int.:** *Give you time to think about it.* 

**G.C.:** That's a hard one.

**Int.:** You think about it for a minute and we'll talk about some other things for a little while. (pause.) What about the students, again. Were they well prepared, do you think?

**G.C.:** Oh, yes. Well, some of them were in the army and air force and were - what do you call them? - first aid people or worked in labs and they had made their minds up to become doctors and at that time you had to either go to Saskatchewan for two years and then from there be accepted to Toronto. So it was a costly thing for a lot of people to get into medical school.

**Int.:** *Do you think they were any more or less prepared than students at later dates?* 

**G.C.:** No, I don't think so. Of course, everybody thought that to survive you had to be working. And, I don't know, nowadays I think you could go through life without working. (both laugh).

**Int.:** *Well, I don't know about that!* 

**G.C.:** You could try.

**Int.:** *Do you think the students have changed very much from 1950 to now?* 

**G.C.:** Not really a great deal. I am certainly pleased to see all the class 50/50. You see, with the first year class we had three girls in the class. And of course that brought life to a heavy thing - veterans and whatnot. One girl came in and she'd stand there and put on her lab coat, you know, and she was nicely built and everybody just, heads would turn like that.

**Int.:** *Now there are a lot more females.* 

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**G.C.:** Yes, 50%. You know, very, very nice to see. You wonder what they are going to do; all be in family practice?

**Int.:** Work as doctors, I hope. Mmm. (pause.) What about some of the activities that the students planned, medical balls or any of their graduation banquets. Were you ever involved in that at all?

**G.C.:** Well, I went to the first two or three smokers.

**Int.:** What were they?

G.C.: It was mainly just drinking and playing dice. There wasn't anything else. There wasn't any entertainment. The first real entertainment was, oh, in the third class. There was Joe Hinkey, Herb Forward and Hancock. Some of these had quite a bit of talent. They would sing and they had musical skits or whatever. It was in the old Arts building and they all got up and sang and whatnot, and it was very enjoyable. Hancock, he's a surgeon and he'll still sing around a hospital. That's about the only... And I went to about three more smokers after that in the next 30 years, and I think that's about three times too often. They were all pretty raw; it was not really enjoyable to go to.

**Int.:** *Mmm. Not what you had expected?* 

**G.C.:** No, I think you can carry it over the deep end on a lot of things in life. I'd rather have a smile...

**Int.:** It sounds like that's what those nights were all about... Well, we're coming to the end of this tape, so thank you very much, Mr. Crossen.

(Next side of tape.)

**Int.:** *Mr. Crossen, what do you think about the quality of the teaching?* 

**G.C.:** Well, I was highly impressed by how well prepared professors were in teaching. A lot of them worried and they were just on pins and needles till the time they went down to the front of the lecture room and started. Some would take a sip of water and others just couldn't face anybody until they walked into the lecture room and as soon as they said the first few words they'd be away.

**Int.:** *And they were well prepared?* 

**G.C.:** Very well prepared, of course, up half the night reading. Of course, I guess, most of what I remember is the first few years I sat in on more of the lecturers and lately I haven't. I walk in now and stay for ten minutes or 15 minutes when something

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new is going to happen; maybe on TV or have a new lecturer. I like to sit in and listen to them and size them up. Each one of them ... well, just in teaching ...TV. It takes quite a bit of experience to slow yourself down and move articles around the monitor.

**Int.:** So you think the students got a good quality education right from the very beginning?

**G.C.:** I knew most of them: Dr. Darrach in Biochemistry; Syd Zbarsky; and Dr. Copp and Dr. Black in Physiology. And they were all, well, you know, just interested. I know Dr. Copp used to have just so many students down each week to his house so that over the year he could have everybody. That's one of his ways. And I think Dr. Black was the same way - have a few in each week.

**Int.:** So there was a lot of give and take between the faculty and the students, a lot more than there would be now?

**G.C.:** I think so. They have the student and the faculty dinner once a year now but if the student doesn't get onto it they don't have a chance to sit with one of the professors. There was only a small percentage who were able to go each year.

**Int.:** Do you think that research and academic activities were curtailed by the limitations in space - and just the accommodation - in the beginning?

**G.C.:** Sure, the Department of Anatomy was curtailed quite a bit because we had a couple of researchers that were more interested in research than their teaching. They didn't have that much at all to - even worked in the closets for one professor, with a big sink on a stress test.

**Int.:** Who was this?

G.C.: Dr. Constantinides. And then he had to go over to the Barn area to house part of his animals. And of course, that's still being done by some people who have some bigger animals or wilder animals. They all tend to like to have them next door to them. But each building's a 1ittle different. Physiology would keep all their animals in the basement area and then you went down and looked at them. The Department of Anatomy had little labs outside their office labs and then they had little animal rooms so that they were close to their animals. And then they could bring an animal in and work on it and then put it back into the animal quarters. So there was a little difference in ideas that way. Little animal rooms made it more expensive to house and look after.

**Int.:** And these designs were designed by the specific (interrupted) - in each department?

**G.C.:** Yes, Dr. Friedman always tended to have too much in his animal rooms and such. Too much in carrying things. We had carts and could go through and look after

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things. I always felt I had to have an extra man just to get all the work done in one day.

**Int.:** What would a day be like? Perhaps you could just explain to us how you would start a day and go through a day.

G.C.: Well, I would go in before eight and open up a couple of doors and check that the heating was on, the refrigeration and whatnot. And then check to see whether any subject had come in on the weekend. And if that had, then I would try and prepare it right away before I was getting busy at 9:30 when the first lecture would start. I would try and just not worry about anything else until it was prepared. After it was prepared then it could sit for a while. And then you could check later to make sure everything was alright. So from that it was usually 10 o'clock and I'd have a cup of coffee and greet everybody. Then I'd often have 1ittle notes wanting this or that and I'd try and get all that sort of thing looked after. The on-the-spot examinations: I'd try and arrange with Radiology that the plates would be ready. I was speaking to the radiologists who were commissioned to only come out two days a week to lecture to small groups of students. A certain amount of paperwork in the department. Then I'd usually go back and have another look at the subject. If that was alright, I would then sew it up and put it away and be prepared for the next one to come in. And there was always the matter of making up solutions.

**Int.:** So you always had to be prepared for the next?

**G.C.:** I always tried to keep ahead of everything. I didn't want to have anything sit around. And then in the afternoon there would be items coming in. Some of them maybe had to be handled right away, medical type of thing. They would have to be put into a freezer or fridges and notify the person that had ordered it.

**Int.:** So there was a lot of just coordinating between people, and really keeping things going?

G.C.: I spent half of my time in the hallways. I think it appeared that I didn't do very much but I seemed to make sure that it was done and ran smoothly. I think the old head of the department realized that. He didn't stop me that often to ask for anything. He knew he was being looked after. The new head was there for about four years - we didn't see eye to eye - we didn't have any bad words at all but I could just see that he wasn't clued in the same way as what the old head was.

**Int.:** *He just gave you a feeling...* 

**G.C.:** Yeah. He wanted to do everything. He never passed anything on to anybody else. I was always happy to pass work on to other people, as long as it was done. I always felt alright about it because I could do most of the jobs that were around and had done most of them. If somebody volunteered to help, well, that was their job.

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**Int.:** Did you have very much to do with the clinicians, the doctors from the hospitals who would come in?

**G.C.:** Yes, I got to know them quite well. We stopped having quite a few of the clinicians in actually in gross anatomy because they often wouldn't be able to come. And so we were then using more teaching fellows, mainly for the teaching, and they wanted to know their old anatomy for specializing. The clinicians would come in from Neuroanatomy; and then we had two that would come in for Radiology. Dr. Saul Miller set up above the set up for Radiology and marked it so the students could always pinpoint on the X-ray film and they could learn their anatomy. They would have a certain amount of teaching or questioning but they would carry on and study the radiology and they then could stand a good chance of getting a high mark. Because it was very important in knowing your Anatomy.

**Int.:** What was the relationship between the staff out at UBC and the general practitioners who came in to teach? Was it a good one, or...?

**G.C.:** I don't think it was as good in the Department of Anatomy as in other departments.

**Int.:** Why do you think that was the case?

**G.C.:** Well, I think Dr. Friedman didn't tend to have... He had some set ideas. I just can't repeat them or...

**Int.:** Well, it's alright if you'd like to.

**G.C.:** No. I don't know all the reasons, he could have the feeling that he was holding some things up and he insisted on doing things for his department. He had an idea what he wanted. And it was a good department. Nobody ever said that there was anything wrong but... Some people become experts after going through the course once.

**Int.:** *So there'd be just small difficulties?* 

**G.C.:** Yes. I don't know whether it was his wife working in the same department or not. She was more or less his private secretary and this seemed to rub some people wrong. And they kept their finances very close.

**Int.:** And I don't imagine you would be familiar with the kinds of things that happened in other departments?

**G.C.:** No.

(break in recording)

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**G.C.:** It was Kurt Hansen who was due to retire from Physiology in another year. He was a very strong individual and ... I just don't know how to say it...

**Int.:** *Did they have conflicts?* 

**G.C.:** Funny. It's hard to get mixed up. You're in research and you're in teaching. And you're in teaching for seven months and then you kind of drop it all and you try and keep research going. Everybody has to have their holidays but in those days we only had two weeks out of the year.

**Int.:** *So it was difficult juggling?* 

**G.C.:** Difficult juggling around with short staff all the time. And the head of the department would go away for two weeks at Christmas and that always seemed to be a very busy time as far as cadavers coming in. It just seemed to be twice or three times a year that you'd have a flood: spring and fall, and Christmas time.

**Int.:** How do you think the faculty actually functioned in the end, once they got their buildings?

G.C.: Having the buildings we became very isolated from the libraries and it seemed a whole day affair to go from our building which was on the outer perimeter of the campus, to go into the library. And then, many years later - ten at 1east - before they were able to get the Woodward Building up. That's when the medical books and whatnot came over there and made things nicer for the students. That seemed to help an awful lot, when they put IRC up and the lecture theatres. It was a boon for Physiology and Pathology and Pharmacology because they didn't have any lecture rooms in their buildings; they just didn't design them in at all. Anatomy was always a building that they wanted to get into but Anatomy held it for themselves because they were teaching: six periods for first year and two periods for second year. So that kind of tied the lecture room up pretty solidly. So we weren't really concerned about the IRC going up except for the coffee bar (chuckles). After you had been working in the Anatomy building any length of time you got out of the habit of eating. So there's the thing. We wandered through to go to the library but that's about all it ever is.

**Int.:** Do you think it would have been worthwhile to have built one large building rather than several smaller buildings?

**G.C.:** I think so. Yes. You would have got to know everybody; but then, you get some of these things. You start getting unions and this item. And some of the people who were on staff; they seemed to be different from some of the people who were taken on for just research work. A research worker was working for one person mainly, added on their grant money. Whether they worked very long or not. Of course, there are some people that have been out there quite a few years under one grant

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but they could be laid off at any time. A staff member, as long as they kept their nose clean, they could keep on working for 34 years.

**Int.:** Which is what you did? 34 years, that's a good long time. So when did you retire?

**G.C.:** The first of December.

Int.: 1984?

G.C.: Yes

**Int.:** So you were probably one of the longest-standing employees?

**G.C.:** Yes, there was one girl longer and she actually came from McGill, Mickey Tenaka. Her maiden name was Nakashema.

**Int.:** So you really saw a lot happen in the space of time you were there?

G.C.: Yes, definitely. And it was a great day when we moved them out of the huts to the building. So much was missing. You'd think there'd be more to it than just a chair. Of course, I was always in the centre of things. We had one secretary and I had the little glass enclosure next to it so anything that went on in the office I seemed to know and I was kind of covering for the secretary if she went down the hallway. Everybody would come to the office and they'd come to me because I seemed to know all that was going on around me.

**Int.:** *I guess people were familiar with you and knew they could get something done.* 

**G.C.:** They don't recognize me outside but they recognize me there (laughs).

**Int.:** *In the right environment they know who you are?* 

**G.C.:** Right. I need a lab coat on. (laughter.) I remember I went in last week and one of the girls, Nicky, said, I dreamed that you were back here. You were sitting down there with a lab coat on. So I said, "I just came in for a cup of coffee."

**Int.:** Well, what about John McCreary, the third dean. Did you have a chance to get to know him?

**G.C.:** No, I never did. He was a clinician and that seemed to switch the medical school down to the hospital.

**Int.:** *It did, did it?* 

**G.C.:** That's the way I felt. He came up there and let in other bits of --- into the medical thing. I mean, when we first started there were three courses and that was it. Then

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other little things came in. I think it was all good but it just seemed to come in the back door in some ways.

**Int.:** A lot of expansion.

G.C.: Yes.

**Int.:** So I suppose in some ways what that might have done was to keep people closer into their own department and what they were familiar with?

**G.C.:** When we first started we had bowling going on and we had soccer matches; and we had baseball at noon hour between the different departments.

**Int.:** How long did that last or when did that...

**G.C.:** ...peter out?

**Int.:** Yes, as all these things must.

**G.C.:** Well, about the first 4 or 5 years.

**Int.:** *Quite a good long time, really.* 

**G.C.:** Yes, Syd Zbarsky was quite a character.

**Int.:** *In what way?* 

**G.C.:** He was just one of these blithely types, always had a good story for everybody. I don't think there have been that many staff changes over the years, it's amazing.

**Int.:** It's been quite a stable faculty, it seems. People must be happy.

**G.C.:** The first secretary was Peggy Edwards and after she left, I guess it must have been 4 or 5 years, Mrs. Ewer came on. Her husband was a professor and I guess he passed away. I think she worked down in Employee Relations or something 1ike that, heard of the job and applied for it.

(gap)

I think I was due it alright but it was due the fact that I suddenly got a better raise, rather than the \$9.70 or \$9.00 we got each year I think I got about \$15 that year.

**Int.:** When did this happen? When did you get the raise?

**G.C.:** When I got married, in '54.

**Int.:** So being married changed your status?

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**G.C.:** Oh yes. And then we went into debt on this.

**Int.:** *They gave it to you?* 

**G.C.:** I didn't ask for it. It just seemed to come along and that pleased me very much. I guess we started at less than \$200 a month. \$2600 I said I wanted when I came here. I should have held out and asked for \$3000.

**Int.:** *Was that quite a good wage at the time?* 

G.C.: Yes.

**Int.:** I'd think it would have been. Ummm. So, were your expectations met when you came out here and started the job at the Faculty of Medicine?

**G.C.:** Yeah. I was quite relaxed. I could see that I was getting ahead in a lot of ways. And I think I made up my mind that I was going to stick it out, rain or shine. I didn't, in thirty years working for Dr. Friedman, I was peeved at about 3 or 4 times. And I think he was peeved at me 2 or 3 times, so we forgot things easily. I didn't carry a grudge too long. But he relied on me a lot, pass me the keys to his car and so on.

**Int.:** *It sounds like you were his right hand man, really.* 

**G.C.:** Yes. And Mrs. Friedman's left (laughter). Well, it was a family affair in a lot of ways. I could go in there and sit down and have a little chit-chat. If they drove past, they'd always stop and wave or something. I think they drive by every day to see if I'm working in the garden or something.

**Int.:** Keeping you at it. Well, thank you very much for your time, Mr. Crossen, and telling us of your experiences at U.B.C.

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