

Eisenberg FullAudio Part1

ROSOLOWSKI: I'm Tacey Ann Rosolowski, interviewing Dr. Carola Blitzman Eisenberg. Am I saying that correctly?

EISENBERG: Mm-hmm.

ROSOLOWSKI: This interview is being conducted for the Renaissance Woman Oral History Project, run by the Foundation for the History of Women in Medicine. In 2002, Dr. Eisenberg received the foundation's Alma Dea Morani Renaissance Woman in Medicine Award. Today is June 10, 2008. It is nine fifty-five, and this interview is being conducted at Dr. Eisenberg's home in Cambridge, Massachusetts. This is disk number one. Thank you, Dr. Eisenberg, for devoting your time to this interview and to the oral history project. Now, you said you're putting yourself in my hands. (laughter)

EISENBERG: Yes.

ROSOLOWSKI: So, why don't we start with early experiences, just to take a chronological approach. I was wondering if you could tell me when and where you were born and where you grow up, where you grew up.

EISENBERG: I was born in Buenos Aires, Argentina, and to the degree, I grew up, I grew up in Argentina too, (pause) many years ago.

ROSOLOWSKI: Now you say to the extent that you grew up,
(chuckles) why do you say that?

EISENBERG: Because we continue to grow, I think, throughout
life, and much of my growing up occurred in the United
States. They are such different cultural atmospheres, and
I'm sure we'll go into more detail later on.

ROSOLOWSKI: Yeah. That will be, certainly an important topic
of discussion. But for now, if you could tell me, what
were the experiences that you had as a young person, in
your family life or experiences outside the family, that
made you know that you wanted to become a physician and
particularly a psychiatrist, because I think you came to
that decision quite early in life, if I recall.

EISENBERG: No, I did not.

ROSOLOWSKI: No? OK.

EISENBERG: Well, it depends on who you're comparing me with,
but it wasn't very early in life. I think that the
influences (water running) as I was growing up was my
parents guiding me along, I had no idea what I was going to
become and (pause) I was somewhat, and so were my sisters,
somewhat unusual, for the environment that we were growing
up, because little girls were obligatorily having to go
only through the sixth grade. And then, according to the
socioeconomic background and the parents' wishes, I suspect

at that age, if they continue their education. But a great percent of the little girls with whom I went to school, went to help their mothers that have eight or ten children. I read or heard that there were wealthier people than we were, who went to learn some language or to one of the fancy cooking schools, to become better wives. That was the object of any educational experience we've had. And just to give you an example, I'm sure we'll go into that much later on, of grammar school, where there were 40 little girls; two of us went to junior high school.

I, and my sisters as well, had to travel, and I would only have by bus, by streetcar, by walking, to get to one of two high schools in Buenos Aires. Other schools where girls that were bright could go to what they call normal schools, to become teachers, because this was another respectable vocation. We had to do the best we could, and there were two high schools, each one with 500 girls, but a population, I believe, of three million people. So, you know, it was very strange to go to high school, let alone university.

ROSOLOWSKI: Let's back up just a little bit, because you mentioned your sisters. How many sisters did you have and were there other siblings?

EISENBERG: No, we were three daughters.

ROSOLOWSKI: Are you the oldest?

EISENBERG: No, the middle one.

ROSOLOWSKI: The middle child. [00:05:00] What are your sisters' names?

EISENBERG: The older one went to law school and the younger one went to medical school. Since then she died, about ten years ago.

ROSOLOWSKI: What are your sisters' names?

EISENBERG: Perla and Sarita. Later in life, as I went to visit, we went to visit my older sister, still alive in New York, and my younger sister, we went to see her in Canada because they went -- she went to Canada. Neither one finished at the university, and I asked them how they felt about that. My older sister that was in law school, said to this day, she hated her husband, that made her stop, because he was afraid. Back then -- he was afraid back then, his friends will think he could not support her, and she quit.

My younger sister went to medical school, even when the first men that kissed them, I mean men that they were engaged to be married because that's what would happen in Buenos Aires. And with my sister in medical school, it was

the same thing, and when I asked them, my older sister, I told you, didn't have a very happy marriage and was very unhappy about having to quit school. And my younger sister said, the only thing I went to medical school, the only reason was I just wanted to have something to do until I met the man that I wanted to marry, then my only ambition was to be a wife and a mother, and I was extremely happy with my role and I never missed it. I was the rebel in the family, obviously.

ROSOLOWSKI: Yeah. But nonetheless, the family context, I mean there was something in your family, that your parents decided that they would offer you the opportunity.

EISENBERG: My parents. I talked with my older sister yesterday, as a matter of fact, because I told her I was going to speak to her daily, where the three of us are not really close. I told her that my respect for my parents' influence on us has grown by leaps and bounds, because they were very poor, they had struggled with lots of difficulties, and I'm sure I will tell you more. (chiming sound) But they respected intellectual, respected and liked and proceeded without a formal education, particularly my father, who never graduated from high school, because he had to go to work at age 14 or 15, with his father. They continued to educate themselves and their

message was very clear, with no pressures of any kind. They gave us the freedom of continuing whatever we wanted and the message was clear, as long as you don't hurt yourselves and as long as you don't hurt other people, and that you improve the world in which we live in, just go ahead.

ROSOLOWSKI: How did they go about improving themselves? I mean what did they do in their everyday lives?

EISENBERG: They worked a lot. They worked physically, my father. My mother was a housewife and had lots to do, with three children. But they continued to read. My happiest moments of my childhood, as I remember, and there were many, and there were many that were unhappy as well, but my happiest memories are when my parents' financial situation improved a little bit and we had a larger house. We moved into a larger house, and we had something that was called the daily dining room. That room was for the visitors and we were not supposed to walk in, or the living room, but the daily dining room. And they will come back from work and we will come back from school, and we would have -- I guess in England, they would call it a high tea, because our big meal was at lunch. And then, my father would sit at the head of the table and my maternal grandmother, who

moved to live with us and was the greatest influence in my childhood, a marvelous human being. [00:10:00]

ROSOLOWSKI: What was her name?

EISENBERG: [Leah?]. My maternal grandmother and my mother and the three daughters, we embroidered, because that's what girls were supposed to learn how to do. My mother and grandmother were doing the same thing and teaching us. Either my father would read the newspaper and we will talk about important events of the world, and he would read the book to us, but we would talk about mostly intellectual, challenging issues, with both of my parents. My father started that influence, mother was a socialist, and that was a great part of our lives, to try to improve the world without a revolution. And they made it clear, not communism but socialism. I'll tell you more of how that influenced later on, I'm sure it's going to come.

We had great respect for, respect and admiration, for people that fulfill what they thought were important roles in life, and it was never with pressure, it was never with why did you get a B instead of an A, or why did you -- never. But I remember it was quite clear that we wanted, and they wanted for us, to go as far... Both of my sisters would -- in Argentina, we had the same system that they had

in some European countries. So, with prolonged high school, we went to university.

And how did I -- going back to the very beginning, how did I decide to be a psychiatrist. I had no idea what I wanted to become. I found myself as quite ugly, for that, I have emotional difficulties. I have my sister, and what a reality that was. Clearly, I wasn't wrong. My sister, my older sister, Perla, (inaudible), was a stunning, beautiful young -- and she had all of the things I wished, poor middle child. You know, had beautiful eyes and wavy hair, a beautiful smile and was, as we grew up, of normal stature. I was too tall for my age. I had an internal strabismus that was corrected at least.

ROSOLOWSKI: I'm sorry, I didn't understand what that is?

EISENBERG: Cross-eyed.

ROSOLOWSKI: Oh, I see.

EISENBERG: Internal strabismus, that my parents did not know how to correct, now that could have been. I felt handicapped by that because the children in school would call me cross-eyed or four eyes or whatever, the ones that didn't like me, and they were envious because I was a better student. Anyway, there were kind of difficulties in my growing up years.

ROSOLOWSKI: Where did --

EISENBERG: And I didn't know, but I was sure nobody will want to marry me, because I felt ugly. And much later in adolescence, at 16 or 17, I felt that wasn't the only thing a woman can have, physical beauty and so forth, and I began to have relationships with young men and with other ones that were not so young. But I thought I might literally -- for a while, I had a fantasy that my only future, nobody would want to marry me, would be working in a circus, because somebody told me that one kept on growing up until one was 21, and I was, at 11, as tall as -- I was at my height, five-eleven.

ROSOLOWSKI: Oh my goodness.

EISENBERG: So that was a real problem to deal with.

ROSOLOWSKI: Right. And it wasn't fashionable at all, for women to be taller than men by any means.

EISENBERG: Not only that, but in Argentina there were no tall women and very few tall men. But I didn't know the circus was -- I'll tell you how I eventually evolved in becoming a physician. I'm talking too long to one simple question that you gave me.

ROSOLOWSKI: No, well we can come back to it. I wanted to pick up a couple of details. One is what did your father do, what was his profession?

EISENBERG: My father worked for his father, who was then making soda bottles, that you pushed the lever to get the soda, with the bobbars. So my father lifted -- my father was powerful and strong physically. [00:15:00] People thought that he looked like Jack Dempsey, but you will not know who that was. He was a handsome man, as was my mother, a very beautiful woman. He started doing that and then he began to branch out from his father's, I don't know whether influence or that the business was not as good or whatever, and he began to work in something that then became his lifelong job. He would buy hides from the cows in Buenos Aires. The cows were sent for meat, to England, and to the United States, and he would sort those cows in big piles and then he would sell them usually to foreign countries, to be used for shoes or bags or whatnot, and that was his job.

ROSOLOWSKI: I wanted to ask you too, how did your family come to be in Argentina?

EISENBERG: Well, there are two different stories for both of my parents. We grew up thinking that my father was born in Argentina. Not until recently, I learned, through this identity card, that he was born in Russia, and he must have gone as a very young baby, to Argentina. He, himself,

thought that he was born in Argentina, until I guess he got his papers.

My mother's father was in the Ukraine, and he was the second son of a large family. They lived in a very Jewish ghetto in the Ukraine, and he didn't want to go into the army and he would have because the only one that was exempted was the first sibling, grown sibling. So he decided to come to the United States, and he did what all of the immigrants did that didn't have money. He went, you know, at the bottom of the ship, and it took three and a half months to go from the Ukraine to New York. And in Ellis Island, they didn't let him come in, because they thought he had trachoma. He never did have trachoma, he had conjunctivitis, because everyone was living in such miserable conditions in that boat. He would tell us those stories too.

So, he didn't know what to do. He had no money and he had no idea where to go. The only other name he had heard was Argentina. They gave him a little map and he had heard that Jewish people go to a colony called the Hirsch Colonies. So he must have borrowed money or they gave him money, I don't remember that. So, he went to Argentina and

his stories were rather pathetic really. When he had enough money, he bought a horse and then he went just selling things from place to place, and he and the horse lived in the same room without a window. The same stories of many poor immigrants. Then, he saved enough money to send for my mother and her sister and a child that was born four months after he left. And my grandmother repeated that thing, but went directly to Argentina. So that's how they happened to be in Argentina, which they loved and they were very, very happy that they ended up there.

Later on, I'll tell you how my odyssey was in the opposite direction, because I don't want to take too much time. Ask me questions, because each story, -- I told my sister, this is like an intensive psychoanalysis for two days, you know, reviewing so many parts of my life, some of them quite painful and some gloriously happy. So, you ask me questions.

ROSOLOWSKI: OK, I will do that. You said you were a rebel and you explained how you felt like an outsider because of your appearance and some other issues. I'm wondering, how did you experience, or how did you express that rebel nature in school, because that, you felt, was the one place where you could.

EISENBERG: I never express it in school. I was an obedient little girl.

ROSOLOWSKI: Well, I guess I meant more in an intellectual way, I mean not disobeying, but did you study?

EISENBERG: I didn't feel that different. Well, yes and no. I was usually with older girls because some of them had repeated the same grade; [00:20:00] they were not very bright or not motivated. And my mother sent me earlier than the legal age. I don't know whether she thought I was bright or it was easier to take care of one girl instead of three, and my older sister was already in school. So, I did everything the teacher asked me to and I didn't excel, but I was curious, I was immensely curious.

ROSOLOWSKI: What kinds of things captured your curiosity?

EISENBERG: I'm sorry?

ROSOLOWSKI: What kinds of things captured your curiosity at the time?

EISENBERG: The first thing that I remember... And a grandchild whom I told that I was going to be interviewed for this, "Please tell her, please tell her your story when you were in first grade." The only thing she asked me, (laughs) and the story that she asked me to tell, which now I can tell laughing, but then it was...

I didn't think I was very bright, I knew I wasn't very beautiful and in fact, the teacher sent for my parents or my mother, through my older sister; she should come to the school. I was sure that the teacher had sent for my mother because maybe I was retarded and they were sending me to a special school, because I couldn't understand the system. I couldn't understand what they were asking for. I didn't have a single friend in the class, only in the house. So, the first week of school, and feeling strange and different, I heard lots of screaming from men. So, I heard this, particularly, and I couldn't understand why they were screaming in pain. And then I began to realize that the school was on the second floor and it was something on the first floor. And it's sort of an open atrium between the first and the second school, and that the screams from the men were coming from there. So I was very curious. And then, as an ordinance I guess, we had a wall that separated, a short wall that separated us from falling down I guess, or because they looked bit and they had -- we call them balustrades, like columns. So, I went to see, during recreation, I went to see what was downstairs and put my head in to see, and I discovered what it was, but then I couldn't get my head out and they had to call the fire department.

That's the story that Nadia wanted me to tell, so I have a responsibility toward the family. I learned then, that the police department had a small branch on the first floor, and on Sunday nights, the people, the men mostly, although some women too, went to the soccer games that we used to call football, with knives and things, and they would get very drunk during those games, and they were so drunk that they were taken to the police station to --

ROSOLOWSKI: Sleep it off.

EISENBERG: To sleep it out. And then on Monday they would let them go home or to work or whatever it was. So, that was one of the first memories of how I felt differently and why I was curious. There were many other incidents, of course I can give you, that made my curiosity, propel myself into areas. And how I became a rebel, I really didn't -- I wasn't any -- I wasn't a rebel neither, in school, never in school. I was an obedient little girl. But then in adolescence, by then my older sister was married. I think she married at 18 or 19. My mother and grandmother, every woman in the family, my aunts, everyone, had been married early in life, and there I was, feeling different at some level, and I don't know if this is my imagination, because I never talked with my parents about

my older sister's social marriage, but I guess they learn from experimenting with the older daughter that was so beautiful, they were protective, they were afraid.

[00:25:00] People would turn on the street to look at her face. She was gorgeous. I guess they felt they hadn't been -- so they gave me more freedom than my first older sister had. So I had boyfriends. They would ask me when I was going to come back at night, which I always did, because I was -- you know, whatever I did, it was my decision, but I always behaved like they expected me to behave. But I became a rebel then, in adolescence and in that way, and I did things like most of the girls that were brought up properly were not doing. I belonged to an organization, that we fixed layettes for single mothers, and I will go the streets with the layettes. Not with the layettes, asking people for money.

ROSOLOWSKI: I don't -- what's the word, layettes?

EISENBERG: It's a basket for a baby, new babies.

ROSOLOWSKI: Oh, yeah, a layette, that's what I thought.

EISENBERG: Yeah. I would go to the streets selling tickets, so we could buy the layettes, and I would go to the main street. My parents would not have let me do that, because once in a while somebody said to me, "Well, if you let me make a baby with you, then I'll give you the money." That

wasn't my intention. I was still not only virginal, but shy. So I did several little things of that sort, but always with a cause, yeah, always with a cause which I considered important.

ROSOLOWSKI: You mentioned that your grandmother was very, very important to you, your grandmother, Leah. How was she important to you?

EISENBERG: She loved me, no restrictions. She thought I was the most wonderful thing that ever existed, and she had six or eight grandchildren. She was the only religious member of the family. No, not even religious, but semi-religious. In the High Holidays, she -- we lived in a very poor neighborhood and there were no Jewish families. That was part of the difficulties to how I felt different, because -- and this will come later on I'm sure. But I will go and pick her up during the High Holidays, with other grandchildren I guess, certainly with my sisters, and she will introduce me to all the old ladies and the older men that were in that circle from synagogue, which was a furniture store, but they make a covenant for the High Holidays. And she would say, "She's my favorite grandchild." (laughs) And then I just felt wonderful because, you know, a middle child and a beautiful older sister, and a very protected and loving and lovable young

girl. And I was getting the leftovers, the older sister's clothes, they were a little bit too short. The younger one would get the new clothes because by then they were ratty. You know, there were problems, the problems of poverty, nothing else, that we all faced. More than poverty, we always had enough to eat, I think. Yes, I know we did, but it was uncertainty more than poverty.

ROSOLOWSKI: What do you think your grandmother saw in you?
 What created the bond between you?

EISENBERG: I don't know. I don't know, but she was the first one that explained sex to me. I used to share... For a while, when we moved to the bigger house and a beautiful house, when my father began to make more money, I shared the bedroom with her and we would have long talks and I was very open with her. She explained sex to me. I was eight or nine years old. She said when you grow up, not early, but when you grow up, you will know what it's like to awake in the morning after you've been fulfilled and you fulfill the needs of a man you love. You cannot understand that but you -- eight or nine or ten, whatever I was at that age, that was just straightforward. She did not know how to read or write when she came to Argentina, and learned two languages and learned how to read the papers voraciously, talking about not being educated.

ROSOLOWSKI: So she respected a mind as well.

EISENBERG: Oh, very definitely, and she was the proudest of my accomplishments in school. [00:30:00] She would -- well, they all were happy and proud of that, both my parents as well. But when I had my first child for instance, in the United States, made it to North America, I couldn't wait to go back to Argentina and to put that baby on her lap. It was such a joyous moment. That was the person I gravitated. Maybe she -- I don't know what she saw in me. Maybe she realized that I was a middle child and I needed extra something. I don't know. She was a very intuitive woman and she must have felt something special. She was wonderful to my other sisters as well but I felt special.

ROSOLOWSKI: Yeah. It's wonderful to have a special bond with a grandparent.

EISENBERG: Of course, of course.

ROSOLOWSKI: I don't know anything about the educational system in Argentina. Did your parents have to -- did you have to pass an entrance exam to get into the girls school, did your parents have to pay?

EISENBERG: No. One good thing about Argentina is education was free. I don't know what it's like now, but it was free. We did have to have shoes and a uniform with

initials, white uniforms, and my mother proudly embroidered those things. But it was free and so was the public school. They were private schools, when I mentioned only two high schools, those were the free high schools.

ROSOLOWSKI: I see.

EISENBERG: I don't think we had to -- they had to look at the grades from grammar school but maybe they had more applicants than space, as I suspect. But I don't remember any entrance examination. We had to pass it to get to university, as well as the grades. But what is different is that we have sixth grade in primary school, sixth grade. No kindergarten. We started in first grade, through sixth, and then we went to what here would be junior high school and high school, and then you have a choice of subjects, too many subjects. It was all superficial learning, because we took ten subjects. How do you learn ten subjects? And we were classified and given out a grade for each one of ten subjects, of which one had to be a language.

ROSOLOWSKI: Were there women teachers, were there male teachers?

EISENBERG: All women.

ROSOLOWSKI: All women.

EISENBERG: All women in grammar school and there were some men and women in the high school, but the high school was also all girls and all boys, separate schools.

ROSOLOWSKI: And what subjects did you feel you excelled in, or did you?

EISENBERG: Why don't you ask me which one I flunked, which is more fun.

ROSOLOWSKI: Which ones did you flunk?

EISENBERG: Domestic sciences. (laughter)

ROSOLOWSKI: Let's applaud, let's applaud.

EISENBERG: Really. I saw recently, the grades, and I couldn't get over it, I flunked that. I had to go to summer school.

ROSOLOWSKI: Oh, my gosh. How did you react to flunking domestic science at the time?

EISENBERG: I don't remember. I don't remember. I don't remember. But I did very well in mathematics and physics, or whatever it was, sciences. The teacher was so poor, as I look back, of people learn here and how the system was and when they complain, I think they don't know what bad is like. The closest thing, for instance, there were so few schools that you had to take either morning or afternoon classes, and we were in the morning classes. We were home

by twelve-thirty or one in the afternoon, as I remember now, then we could go to night school if we wanted to go.

ROSOLOWSKI: At what age was this?

EISENBERG: Six to twelve.

ROSOLOWSKI: Really? And there was night school for children that young?

EISENBERG: Well, night school was learning how to cut dresses in my class, because we were all girls. I was the only so-called Jewish girl [00:35:00] in the class.

ROSOLOWSKI: Why don't we talk a little bit about that now, just how that contributed.

EISENBERG: My parents made a religion out of not being religious, and we heard about Marx and the helping of the people, and we were very proud of our freedom of choice. I think interesting, another free association, when I was 12 or 13, I was already in high school, maybe 14, I decided on my own, to investigate what the religions were all about. I visited five or six Quaker meetings and Russian Orthodox. I still remember the singing, and (inaudible). I guess because of my mother's Russian ancestry. I just wanted to learn on my own, whether I was religious or not, and I became even more anti-religious than I was before.

ROSOLOWSKI: Why?

EISENBERG: I feel very Jewish, but culturally Jewish. One of my sons, he says gastronomic Jewish, because he liked Jewish pickles. But I never felt particularly, a need for religion, except one time, when I wish I would have had something that will give me a strong belief, one time in my life, and I'm sure we'll get to that. I wish I could and I couldn't. I couldn't believe in much it, religious. And we never went -- we didn't live in a Jewish neighborhood because we lived across the street from the slaughtering houses, like in Chicago, that they used to have, and it was a non-Jewish neighborhood. There were two other families that were Jewish, and I didn't happen to know them because they were like ten blocks away, and the little girls were all very Catholic. At one point, I wanted to be Catholic, because they took First Communion and they bought beautiful white dresses, and I wish I could be that, but it lasted for that period only.

So, neither of my parents or neither one of my sisters or I, ever particularly identified in the synagogues, where, until I went to high school and to save money to buy books, we had to walk from the subway, like 30 blocks, and our parents would give us money for the streetcar and the subway and the bus if we wanted. Then I learned, going to

high school, where the synagogues were, and I would walk by the Jewish neighborhoods and the people that sold and the people that bought things were very orthodox. I didn't feel I identified with them, neither did I feel I identified with the people in the neighborhood that were very Catholic. I couldn't identify myself with any religious group, and to me that was a sign of strength at some level, but it was another difference in the environment where I grew up.

ROSOLOWSKI: Was that reinforced by other people's reactions to you? Did other people identify you as a Jewish individual?

EISENBERG: Not particularly, not particularly. The only time I felt awkward -- that was a very poor school. All of the schools, free schools, were very poor in Buenos Aires at that time, but some came from better neighborhoods, so I'm sure their parents contributed. I don't know about that, I never visited any other schools, but when I was in grammar school, once during the sixth grade, they took us for an excursion, because when I see the kids going to visit a museum and other things in here, I said lucky you, isn't this wonderful. But this one time, they took us. They rented buses and it was a great excitement in the class, and the whole school went. So, they took us to a

place that was an hour, hour and a half away, and maybe it was my first trip into the countryside. Maybe it was, I don't know, I don't remember that, but it was a place called *La Virgen de Lujan*, [00:40:00] which was a miraculous, like Lourdes in France.

ROSOLOWSKI: Could you repeat the name?

EISENBERG: *La Virgen*, the virgin. *La Virgen*, V-I-R-G-E-N, and then a separate word *de*, of, D-E, and then the last word was the name of the little place where the church was, it's L-U-J-A-N, with the accent at the end, *La Virgen de Lujan*. Everyone went and they brought candles and the incense was outside and all those other things, and then we walked into the church and for an obedient, submissive, passive little girl, I saw everyone kneeling down, and I feel I couldn't do it. I really felt that I was upsetting my parents and I couldn't do it. Not because I was Jewish, but I didn't believe in religion, and I stood up. This was my first and only act of rebellion, but I don't remember repercussions afterwards. I would imagine they thought that's peculiar... Caroline, as I was known in those days in the school. But I never was affected by anti-Semitism, I guess, because I didn't feel all that Jewish or Catholic or anything else.

ROSOLOWSKI: Just a little bit of change in subject here.

EISENBERG: Yes.

ROSOLOWSKI: I read, in an interview that you did, I think --

EISENBERG: In a what?

ROSOLOWSKI: In an interview, that you described, when you were around the age of 12, you visited a psychiatric facility?

EISENBERG: I was older.

ROSOLOWSKI: Maybe you could talk about that.

EISENBERG: That was an enormously important event in my life. I was in high school, so I know it was in the junior year, so I must have been 15 or 16. My parents, on Sundays, because the little girls in the neighborhood would go to church and they didn't know what to do with us, we had no school, and because they believed in the problems that the socialist party, the social party, was called Luz, light, L-U-Z... And my parents read *La Vanguardia*, the socialist newspaper that they produced, so we followed whatever they organized for Sunday mornings, for people that wanted to get exposed to a different sort of culture. So therefore, we went to the Catholic museums, to places, to conferences in the morning on Sundays.

ROSOLOWSKI: So this was organized by Luz, the socialist party.

EISENBERG: Yes.

ROSOLOWSKI: I just wanted to clarify that.

EISENBERG: Yes. And one of the visits was to a psychiatric hospital. I don't know how to describe that place. I was impressionable of course, and I was full of, serve your community and be helpful to other people, and full of idealism. I walked through that place. I think that my sisters were not there at that visit, and I don't remember my mother either, so maybe it was just my father and I. We walked with a group of people and to start describing that -- in what year was that? It must have been 1930, -- it was Dante's Inferno. I learned subsequently, there were two thousand patients and three doctors, and they were chained to beds, and they were in the most spotless, incredibly clean tile floors, and there were like 80, 100 patients in one long room. They didn't show us the most disturbed wards, but some that were not the most disturbed wards. [00:45:00] We were horrified, we were horrified. I was just -- and then, they took us to a lecture and the director of the hospital, later on the full professor of psychiatry at the university, gave a lecture and brought a patient. And there were maybe, at that lecture, other people from other organizations that wanted to visit, and so maybe there were a hundred people at the lecture, or 80. I don't remember, I'm not good at guessing numbers.

I remember the patient he brought. I remember what he described, [FABESK?] I still remember. It doesn't make -- it's an acronym, and he put them vertically, and for each one there was a description of mental illness. He was a very charismatic speaker and the patient he brought, [Capitan Peregarite?], I still remember, because this was one of the most potent memories of my adolescence, he was completely bald. In Argentina, that wasn't the case. He had two kinks of hair here. He was a manic patient and somebody asked him why would he have that and he said, because everyone wears a moustache and I want to be original and different. He had the whole --

ROSOLOWSKI: So he had the moustache on top of his --

EISENBERG: -- crowd bursting with laughter of course, but he was a marvelous patient to present of course, because as manic patients, of course, the flight of ideas was enormous. He was intelligent and well spoken, very short, and then the professor of psychiatry was very tall, so they made a funny combination. Anyway, the lecture was fabulous and the impression of the hospital, I was -- I was so upset about what I saw.

ROSOLOWSKI: What was the atmosphere? I mean, you said when you went in, it was indescribable. I'm trying to put

myself there. What can you kind of latch onto, to kind of give a sense of the atmosphere?

EISENBERG: They were eating breakfast or lunch, and they were -- I never saw since then, breakfast like those ones, except ones in China. But there were some fluids, the food was uneatable. The clothing they were wearing were ragged and the people looked very thin and malnourished. It was clean and the people that were taking care of the patients were not interested in anything but their job, which I'm sure they needed. There were people with postures and the metallurgical eczemas and things that I knew were not taken care of. They were touching when they could, when they were free, touching each other. There were patients with tuberculosis and I don't know whether they were getting medication. In those days, there wasn't much cure for tuberculosis. But they were mixed with all those patients. There were some wards that did not see the sun forever, and the walls were, in some not all, the walls were peeling off. It was just the most depressing sight. They were of course separated by sex. We never saw the women. They took us only to the men. There were men that were naked walking around. Dante's Inferno, that's what I use, and it was a movie that somebody made, that I saw, where they described some of the things like that, I've seen recently.

Anyway, that's what I saw. But at the end of that conference, a small group of people went to talk with the director of the hospital, and I was an ignorant, 15, 16 year old girl, shy, thin, tall, feeling oh, this poor thing. So I listened to the adults. There were no other kids my age, they were all adults, and even then, I knew they were asking stupid questions. The one I remember is, and you sleep in the hospital, is insanity contagious? Where did you get the courage to sleep among all these patients? Aren't you afraid they are going to kill you?

[00:50:00] I knew that they were asking stupid questions, and I don't know where I got the strength, I really don't know, except I was so impressed by the speaker. He was tall and handsome and he spoke well and was devoted to the patients and didn't have the money to do things he would have liked to have done. Out of nowhere, when they asked all of the questions, I said to him, "Is there anything I can do?" I don't know where I got the courage. And he looked at me like, you know, he wasn't offensive, but he looked, *When you finish growing up, girl, come back.* That was his look. But he said, "Well I just came back from the United States and a trip, and they have something called psychiatric social workers." I would like to study that

but I don't have the money, I don't have the personnel, I don't have anything to get -- "Where are you in school?" So, I said, I am in high school. "When you finish high school, come back and talk with me." He must have sensed my enormous empathy for the patients or who knows what.

I went to my high school, we were 40, and I talked to the class about what I had seen, during what we called recreation time. I said, if anybody wants to see what we can do about it, come with me, I am going to go before we graduate. Maybe it was senior, high school. It must have been senior because of what they wore. So a group of us went the following week, to this physician, and here we are, we would like to start now, why wait, all these patients are suffering. And he said, "Well, do you have the time, do you have energy? Do you have a compassion?" He asked all of the right questions and everyone said yes. So, I started the first psychiatric social workers, and what we did was to go on weekends, Saturdays and Sundays, and we were giving lectures, and then when we finished high school, I took one year and worked full-time there. I became the first graduate of the school for psychiatric social workers. I had no idea what it was still.

Later on, my older sister came to the school. I became the non-paid secretary of course, and I arranged for the lectures and I became the administrator for the school, and was the first one to graduate. I am proud of that, because I don't know where I got the strength. Not the strength, but in order to get there, to the hospital, I had to take what they called the Colectivo, which is a private little bus, with about 12, 15, because by bus it would have taken the whole morning. We had to go by an infectious hospital and I had to sit next to people with leprosy, without faces. I was exposed to the worst of medicine at the same time. Can we take one minute break?

ROSOLOWSKI: Certainly.

EISENBERG: I have to go to the bathroom.

[PAUSE IN RECORDING]

ROSOLOWSKI: All right, we're back after a short break and I wanted to ask if you would expand a bit, on this school of psychiatric social work that you founded.

EISENBERG: It's related to a question you asked me earlier, who were my influences. I began to work as a psychiatric social worker, and it became quite clear to me, and it was the first time I really thought of medicine, that I

couldn't do as a psychiatric social worker, what I would have loved to do at that time, and that I had to go into medicine to be able to do more than just give tickets at Christmas time, for the families to have a turkey.

ROSOLOWSKI: I wanted to ask you what your roles were as a psychiatric social worker.

EISENBERG: Well, there were several. One was I became the director of a school for retarded children, which is what it was called then, called Sanchez [Picarro?], and I slept in that little unit.

ROSOLOWSKI: How old were you at the time? [00:55:00]

EISENBERG: Twenty-four, maybe. No, maybe it's 22, 23, and I was a medical student at that time, but I took a year off in medical school and I did that work, and that's mostly what I did as a psychiatric social worker. There were 25 little boys, some of them were older, and they had a little school and I looked at the illness maybe that they would have, and they had one little room in the corner. That's mostly what I did do.

ROSOLOWSKI: And so what did you find yourself wanting to do, that propelled you?

EISENBERG: To go into medicine to do more psychiatry, which is what I ended up doing. You asked me what made me want to do it. I didn't know any woman physician. I knew, as I

was growing up, only the physician that was the family physician that took care of us, and only during acute illnesses. When I went to medical school, I never, never, never, met a woman physician. There was one faculty member. I still remember her name but I never got to meet her. She was an assistant professor of ophthalmology.

ROSOLOWSKI: What was her name?

EISENBERG: [Pavlovski?].

ROSOLOWSKI: Pavlovski.

EISENBERG: I wanted to meet her but we didn't have the time, all the girls. Anyway, my only influence to go into medicine was wanting to help psychiatric patients. I didn't know whether women were being admitted. We had no college room. I lived at home throughout graduation of medical school. There were no dormitories. It was like an outpatient clinic. And we can go into that if you want to. You asked earlier, whether I was discriminated as a woman or as a Jewish person. We were so few and they were so sure we were not going to make it, that I never experienced discrimination. Sometimes, when I talk to women's groups, they either don't believe my story or believe that I am insensitive to discrimination, and that's not the case, because I encountered that later on. But when I was a student... Maybe a little bit more as a Jewish person, but

as a woman, and you know, it was a different medical school than the ones I've learned since coming here. There were 800 students. They were theoretical classes, most of them. I had a year and a half of nothing but anatomy. There were eight years of medical school, because after high school, we had to decide what university we went to.

I loved anatomy. Some professor of surgery wanted me to go into surgery. I got the highest grade in anatomy. Why? Because I just marveled, the structure of the human body. I couldn't get over how things fitted into each other and how the lung-thratic heart and how they both have these arteries that knew where to go. And I volunteered at that psychiatric hospital because there were many, many, many men who died, who either didn't have a family or their family had abandoned them for 40 or 50 years in that hospital. So, I helped a man that was just an ordinary man that had learned how to do autopsies, because by law, in Argentina, they had to have that. [01:00:00] And I helped him, doing autopsies and I would go every Saturday and do autopsies all Saturday long. And then the surgeon came once for one of his ex-patients and wanted me to be a surgeon, but I was clear headed that I wanted to do psychiatry.

What was interesting, out of 800 people, I don't know, maybe there were 25 girls, as we called each other in those days, and we were girls, you know, they were much younger. And the prediction from the faculty members were that between second and third year, they will flunk out or stop going because they would get married, and they were right. They met other students, they got married, they began to have children.

ROSOLOWSKI: How many from your class continued? How many did --

EISENBERG: I don't remember. When I graduated, there were two or three of us. But I graduated irregularly, because I took a year off, because I didn't have money for the tuition. We had to pay an entrance each year and I didn't want my parents to have to pay for any of my medical education. I felt that they did everything they could and it was time for them to begin saving for old age and the usual thing. So, that year I worked full-time, and not as a psychiatric social worker, because I couldn't get a job, but I worked in an institute, the Radiologia. I'll tell it in English. It was like the Dana Farber. Well, you don't know the Dana Farber, because -- it was like a cancer research institute, and I became an assistant to a

pathology professor and did all of those things during that year.

ROSOLOWSKI: Could I just pick up a couple of details, because I just want to make sure that all of this (chiming noise) information is correct. (laughs)

EISENBERG: This will come every hour.

ROSOLOWSKI: That's a lovely chime. So, you graduated from high school, which was Liceo Nacional de Señoritas.

EISENBERG: De Señoritas.

ROSOLOWSKI: And that was in 1933.

EISENBERG: Mm-hmm. Yes.

ROSOLOWSKI: (laughs) And, now did you have a degree, because it says a BA there or...?

EISENBERG: Well, when they asked me to put my CV together at Hopkins, I didn't know how to. Yes, my degree was bachillerato, bachelor's degree.

ROSOLOWSKI: A baccalaureate, yeah.

EISENBERG: Yes. And there were more years than what it states here, so that's what it was.

ROSOLOWSKI: OK, so how many years total were you in that Liceo?

EISENBERG: Five.

ROSOLOWSKI: Five years, OK. And so then, just prior to graduating from there, you helped established the school of

psychiatric social work at the Hospicio de Las Mercedes.

And so you got your MA in '35.

EISENBERG: Right.

ROSOLOWSKI: Then, you said you took a year off.

EISENBERG: No, but during medical school.

ROSOLOWSKI: During medical school. And so it was after '35 that you began your medical training at the University of Buenos Aires.

EISENBERG: Right. I think I took it between the third and fourth year, but I may be wrong. Did I take a year off between? Maybe that was the year that I worked in the school for the retarded children. I don't know what I have. I haven't looked at my CV for so long.

ROSOLOWSKI: Well, we can go back and check that. I just wanted to make sure that I had that sequence correct. And also, I mean this is going back just a little bit, if you'll excuse me, you know, the school of psychiatric social work just started from nothing, literally. So, who were the faculty people?

EISENBERG: They don't resident at the psychiatric hospital, and some that did. This director of the hospital who was then a social professor of psychiatry, and became a full professor, will bring from the medical school.

ROSOLOWSKI: So they were all ready to get this started. They just kind of --

EISENBERG: No, no, they were not. They never thought that they could really. So, it was sporadic and sometimes we did practical work and sometimes we did classes, depending on who could we get when.

ROSOLOWSKI: I see. So it was really pretty informally run then.

EISENBERG: Oh, yes. (chuckles) How could I do it formally, for I am not a formal person. And second, we have no -- we have not even the programs that they had in the United States. We tried to imitate them. At that time, [01:05:00] and I apologize for the present Argentinians, because I'm sure many of those things have changed, everything was informal. It was no way of doing anything that formalized, and the politics changed and the governments changed, and everything changed from one time to another.

ROSOLOWSKI: You mentioned a little bit about the attitude in medical school, that you didn't experience sexism because you were kind of ignored. What was the situation like in the school of psychiatric social work?

EISENBERG: We were all women.

ROSOLOWSKI: You were all women. And so how did -- what kind of atmosphere was that like?

EISENBERG: That was free, you know, they looked at us like strange birds that want to do something, and they tried to help us. I had no problems. And the classes in the medical school were mostly, at least until we began to do clinical work, the first four years that were just pre-clinical; anatomy, pathology, physiology. They were very large classes and very little laboratory work, and so they did not notice us, they really didn't. In clinical work, maybe in the hospital, "Hey, nurse," they would call us you know, and that, I guess, for somebody else unhappy about that. At times, I wonder whether I was too obtuse, or whether I just put one foot in front of another and just went, you know. If they call me, "Hey nurse," I smile to them. During the year I took off, I was giving enemas in the X-ray department, and they called me nurse and I wore a nurse thing on the head.

ROSOLOWSKI: A nurse's cap.

EISENBERG: Yeah, a cap, and white uniforms, and to me, that was not offensive, to be called a nurse. Maybe I just didn't pay attention and maybe other women that were more sensitized to those things, rightly so, began to complain or began to notice. There were no women professors. I

never met -- I wanted to meet a woman, so I could talk with her, and I had questions, but I never met one.

ROSOLOWSKI: What questions did you have? What would you have asked?

EISENBERG: Can I be a doctor and can I have a family. The same questions that students ask me at Harvard Medical School for 20 years or whatever number. Can I be a normal woman with a husband that loves me and whom I love, or am I supposed to be just a hundred percent. I would have loved to ask those questions but I couldn't. I met good friends for the first time in my life, in medical school, some in high school as well, because before I was either too shy or the kids were too different. I felt very lonely, (pause) yeah, very lonely in grammar school and at the beginning of junior high school, well there was just one. But then I made good friends in high school and even better ones in medical school, men and women, and then I could talk freely about all those things with them. That was a different life, yes.

ROSOLOWSKI: So you talked with male students about some of these issues.

EISENBERG: Oh, yes, yes. We were a very close-knit group of six, eight, maybe ten people. We went to vacations together. We talked about -- a couple of them became

boyfriends for a little while. There were more men in that group than women, and we would go on weekends to -- none of us had money, so we went for long walks in the countryside, or to concerts. We became, all of us, and that's something that has continued throughout my life, my love for music.

I never mentioned that my mother sent us to learn piano, the three of us, before we started school. It was difficult for them financially, because they had to pay, because they had to buy a piano later on and we didn't have one. And because we had to go through the slaughtering houses to get to the one teacher, and that was a scary experience [01:10:00] and they knew it. But she sent us at her expenditure and she made us go that far, to that piano teacher. Her experience was, her explanation was clear, that's an international language. Wherever you will end up, you can play the piano and people would sympathize and will identify. You will be able to talk about the composers. And we continued that until I was 14 or 15.

ROSOLOWSKI: Well, what's kind of interesting to me is that your mother said wherever you end up, like you would need to have an international language. That's wonderful.

EISENBERG: Oh, of course, of course, and because what she had experienced. My mother was very bright, as was my

father, but they -- she suffered a lot when she went to Argentina.

Just a quick side story. They met, I don't know how, maybe it was arranged by somebody. They were handsome. I have a picture of their wedding if you want to see it afterwards.

ROSOLOWSKI: I would love to.

EISENBERG: They were both stunning people. And my mother, shortly after my mother arrived in Argentina, my father was of course, an all Argentinean, and my mother couldn't speak any Spanish, my father couldn't speak any Russian, neither one knew any Yiddish, and they had an intense relationship that lasted for as long as my father lived.

ROSOLOWSKI: Oh, my goodness.

EISENBERG: They were amazing people. But the piano was important in our lives and when I entered high school, I would go to high school in the afternoon and the piano was to go to the conservatory, and we couldn't go back home for lunch. So I had one peso to buy a cup of coffee and a croissant at a coffee shop, and then you would go to the high school. It did seem hard at that time. When I tell you all those stories, they sound like out of who knows when, but at that time it was the normal life for us. There were times when we were tired of practicing, and my

mother had bought two little busts made out of plastic, of Beethoven and Schubert, and I remember, you know, those two face, something. You were deaf and you could escape, why do I have to keep on practicing? But my mother was there and she made us practice, until she realized that we couldn't. My sister Perla and I, went to high school, and we had to play at the function in the school and my mother made red dresses for both of us, which we hate, and we played with four hands. We just enchanting sisters in the high school. Anyway, my parents were wonderful people.

ROSOLOWSKI: What were their names?

EISENBERG: My mother was called Tanya, and her name was -- in Spanish, they called her Theodora. My father was Bernardo. They were such amazing people. Look where they got us, it's amazing, of where they started. They were just, I mean incredible. The thing they taught us, that my mother taught me, because for her it was more of an adjustment. My mother lived in a little shtetl for Jewish people, and she wanted to go to high school, and they wouldn't let her go to live with an aunt that lived near Kiev. She lived in Kiev, making hats, because girls didn't go to school of course. They didn't know how to read or write in the shtetl, and my mother wanted to. So she had to get a card as a prostitute, to be allowed to go to Kiev,

to go to high school. She finished. I have a picture of her class in high school, the gymnasium, which was amazing. And she used to go to the concerts, you know, standing up, as I did when I was in high school, and news was terribly important. But she was a cultural person and so was my father. My father was a very voracious reader and they would encourage us. I read more literature between 12 and 17, that I read since then. Now that I am semi-retired, [01:15:00] I am reading fiction again. But they were amazing people, they were amazing people. I owe them a lot of gratitude and love and I have it for their memory. Not without faults, of course, like I am not without faults, but amazing people.

ROSOLOWSKI: How did they feel about your accomplishments?

EISENBERG: They were very proud. They were very, very proud. And they were going to -- they made a room, because we lived in a beautiful home later on. Earlier, my father had a factory and a three room house in the same place, and it was full of flies and the urine of the horses coming in, and they had to share those three rooms with a family. But then, as he began to make more money, we moved when I was seven or eight, to a beautiful house, and when I went into medical school, my parents made for me, what would be an attic now, but it had one of those...

ROSOLOWSKI: Oh, a spiral staircase?

EISENBERG: A spiral staircase, and it was just me, growing up, all the way up, and I had my study and my bedroom in there. They were very proud, they really were very proud.

ROSOLOWSKI: And they knew what you needed in order to succeed too.

EISENBERG: Yes, yes.

ROSOLOWSKI: I mean, I've spoken to people who were --

EISENBERG: Not without complications.

ROSOLOWSKI: Yeah.

EISENBERG: Not without complications. We had a maid called Manuela, and she lived with us for seven or eight years, and I loved Manuela. What the Argentineans did in those days, was to go to the port on a Sunday afternoon, and the boats had come during the week, and they will go and pick up some maid for a house, room and board, and a very small salary. They will have a maid in the house and that's how Manuela came to us. She never wanted to go and see Buenos Aires. She was very short. She had her -- she tied a scarf, and on Sunday afternoon, she would live it up and go to the front of the house and look at the buses and the cars going back and forth. We had lots of animals in that house and two big patios, and my little -- I had a little monkey called [Pituko?], and she will stand with Pituko on

her shoulder, and that was Sunday, until Pituko will get tired and we come and play with the dog or whatever. And I taught her how to read and write, because she came from the countryside. She came from Galicia, in Spain, and what these women would do will be to come and work for about five years or three years, save all their money and then go back, and have a husband, because then they could buy a parcel of land and they will have money to buy the parcel of land, and the men will come after the women. Manuela was hoping to do the same thing.

I taught her how to read and write because I loved her and she loved me, and we had long conversations. I was fascinated by her life stories and we will sit in the evenings, after the dishes were done, and she would tell me stories about Galicia. One day, Manuela announced that she was leaving, period. No one could get a reason, she seemed happy. She was paid what the other maids were being paid, she was treated with respect. Our family was her family, she ate with us, I think. I don't remember whether she did or not. I imagine she did but I don't know. I don't remember. Yes, she did eat with us. Anyway, with a socialist household, of course.

Anyway, she cooked for us, another long story. She was wonderful. One day she just quit. She had her trunk ready to go and no one could get the story of why she was leaving. She wouldn't explain. She was crying, she was unhappy, when was the first boat back to Spain, and she couldn't call on the telephone, they didn't understand her Spanish and will I call. So I sat with her for about three or four hours and I couldn't get an answer. I said, "Well stay overnight, [01:20:00] you cannot leave at nighttime." I had come back from the medical school and I had to go to class. Stay overnight and then we'll talk tomorrow night. She stayed but crying, she did her work, and we had a date, Manuela and I, to talk in the evening and finally squeezed it out of her.

She had gone to clean my room in the attic, the only -- it wasn't an attic, it was whatever you call that. She had cleaned and she had cleaned under the bed and she had found a box with 230 or 215 bones, and she finally said, "Is that what you do to Christians? I want to get out before somebody kills me." And that's why she wanted to leave. So, I explained to her that those bones were a present that somebody had given me. It was a completely whole body, a model, bones of the nose, and I needed them to study

anatomy, and they were from a man who had already died. Some of them maybe were plastic, because they couldn't -- and she stayed for another two years. So that room had problems, because that was the room where I took boyfriends, where I had little parties, where I studied, but that was a problem that almost ended in a catastrophe. But I saved Manuela and I.

Then, one time, I went to Spain and I went to Galicia, hoping to reencounter. This was 15 years ago. I so much wanted to meet her again and to know, and I didn't know the little countryside where she lived. She never could remember or not, or whatever it was, and I didn't have that. I never could meet her again. She was important in my house, in my life.

I have a tendency to go all over the place. Make me focus in questions you have, please.

ROSOLOWSKI: Well, why don't we go back to your experiences in medical school. What was the balance between the theoretical courses, as you've described them, and your clinical training?

EISENBERG: Well, four years of pre-clinical work that were exhausting and memorizing, and not particularly -- we had

one good professor, who in fact got the Nobel Prize in Physiology, Professor Houssay, and he gave excellent lectures. One of my ex-boyfriends managed to get to him, and when I came to North America, he went to Cambridge, England, with a fantastic fellowship, because he had worked with Professor Houssay. The rest was mostly memorizing and long hours of tedious, boring. In some ways, not very different, now that I think about it, of the Johns Hopkins and Harvard Medical School, where many students wondered, why did I come to medical school, it's like getting a PhD in anatomy or physiology or chemistry. So in that way it wasn't all that different.

My experience was work, work, work, work. On weekends, if we had not an exam, meet with friends, go and listen to concerts. There were a couple of our peers, political, and I was in the rebellious group, and I remember saying they're scared to death because the police was coming and mounting big horses. I was in one of the demonstrations and I was afraid the horse was going to knock me down.

ROSOLOWSKI: What was the demonstration about?

EISENBERG: I don't even remember, you know? It was a political demonstration but I don't remember what the cause was, but I was in that group. I felt supported by good

friends. I felt understood by them. I felt I was making progress. They were very intelligent and caring people, either that selected me or we selected each other. We were politically along the same lines and musically interested, literature. When I finished any course, I treated myself and read one more of a famous author that my father kept pushing on the three of us. But it was not a bad experience. It was exhausting, it was physically exhausting and, you know, [01:25:00] it was a long way from our home, because when we moved to the better house, it was still in Mataderos and it was still, either walking to the subway or taking the bus. Sometimes, we would leave, at most days, six-thirty in the morning, and we were not home -- when we had music, we were not home until around six o'clock in the evening, with no breaks, and the breaks were not breaks in Argentina.

In grammar school, I forgot to tell you two things about the grammar school, that I ought to tell you, in addition to my head in the banisters. We were told, the first day of classes, that when the recreation, when the bell rings, it means that we have to leave the classroom and go to a patch that was all covered, and just walk back and forth, because the building was so old that the walls would

collapse. So that's what we did. We hear the bell and then we would walk through a corridor and the banisters, and go to that thing.

The other thing, talking about being Jewish. The other thing that happened to me in the fourth or fifth grade, fourth I believe, there was one couple, he cleaned the classrooms and she helped with the cleaning room. There was one recreation time where the children with money would buy a little bun, or we would bring from home and we bring a sandwich from home. One day the woman of this couple came to talk with me and took me aside, and took me to the coatroom. And of course, I always thought I did something wrong, because I was the obedient little girl that was not there to open her mouth. She hold me against the coats and she did not do what sometimes women do when they take a little girl to a coatroom. No, she told me she had heard I was Jewish and I was going to burn in hell unless I became a Christian, and she would be happy to take me to the church to be converted, without telling my parents.

ROSOLOWSKI: Oh, my gosh.

EISENBERG: This was before we went to *La Virgen de Lujan*.

And then she said that if I did that, she would let me ring the bell, which no child was ever allowed to do. Can you

imagine that temptation? I would have made it, the biggest girl in the school, and I was so isolated as a child, that I just would have loved to be able to. But I stood my ground and I said, I cannot not tell my parents, I cannot do it, because then I will burn in hell. I thought that that was marvelous for other reasons; because I liked my parents.

ROSOLOWSKI: Did you tell them what happened?

EISENBERG: I don't remember. I don't remember. I don't know, because if I would have told him, I suspect my father would have, or my mother would have come to complain. I don't know whether I had enough intelligence not to tell them, but I felt I had to. Anyway, where were we?

ROSOLOWSKI: Well, we were talking about --

EISENBERG: Oh, one experience where -- yes, in the hospital.

ROSOLOWSKI: I think you were talking about how you felt very connected with everyone and I'm wondering, in what way do you feel your presence as a woman, had an influence on that group? I mean, you were one of the first women to go into medical school, so what was happening?

EISENBERG: I wasn't the first one to go to medical school. In fact, Buenos Aires, I learned that since coming, had a woman that went in 1898.

ROSOLOWSKI: Wow.

EISENBERG: Yeah. And then there were occasional women later on, very seldom. Did I have an influence? I don't think very much, but it must have had an influence, both positive and negative, on me, because when I came to this country I did a lot of things to encourage women. So it must have had an influence. I didn't acknowledge them then, because as I told you earlier, I continued to do the right thing and not to rebel certainly. I have such respect for learning, to this day, and for academics, that I could not disavow whatever system they have. I could have [01:30:00] noticed, not to say anything, that's possible. And when I go to the clinical years, yes of course. All of the big names and all of the professors and all of the residents were men. I must have noticed.

ROSOLOWSKI: Because I'm wondering, you know, the fact that you were unusual in that you did finish, you were really driven to have a career. That must have done something.

EISENBERG: There were a couple of women that later on, I understood were lesbians, that were my friends, that finished with me, intelligent women. One became a psychiatrist and the other became a surgeon, and they were friends as well. There were other women, two other women that were first cousins, that were in my group of friends, that were also a cousin of one of the men that was in my

group. One came to the United States and what became later on, an associate professor in Argentina. It was the men that became, as I told you, a fellow in Cambridge, England, and got here, for the Academy of Arts and Sciences, one of the biggest awards. It was a group of very intelligent people, men and women, and yes, we talked about some of those things, but we were more interested in literature, in music, in politics, and it wasn't the main theme. Not even for the two lesbian women, both of whom got married and had children and maintained that relationship as lesbian, as I learned later on. At the time, I didn't realize they were lesbians. They maintained a proper behavior in classrooms, when we all went on vacations. I noticed more, but I was never terribly upset, as I became more upset later on, when what I felt was a more civilized country, and I still understood, some of it for the first time, because when I came here, I found myself very liberated and very accepted and very welcome. How much was my different background as children of Jewish socialist, intelligent but not cultured, people, how much was the poverty?

I experienced -- my sister things, one of them particularly, that I fabricated a poverty in my head, that we were never poor, and I felt we were at that time. I

remember my father giving money to go and buy bread, and I said don't drop the money because we won't be able to buy other breads. I still remember that and I took it for granted, and my sister said look, we are all fat people, we ate like horses there. So maybe it was my fantasy world, who knows? And when I came here for the first time, I felt -- that's another long story, of how I came here, but I felt fear, to speak about what I wanted to express, feelings, even if they were not popular. I felt more restricted in Argentina. How much was my psychological makeup, how much was the different background? I had a psychoanalysis later on, in the United States. I understood my defensive mechanisms better. How much was a very happy first marriage and my fulfillment, both as a physician and as a wife and as a mother, I finally got it all together, it's hard to tell, but I'm sure I'll tell you more about those.

Guide with me with questions, because I have the tendency to speak too long about some of these incidents. But to answer briefly, the question, I didn't feel the discrimination all that acutely, I noticed. I continued to work and work hard and did well, and I was respected for

that, the people that noticed. We would just get grades, that's all, and we had no contact with faculty members.

ROSOLOWSKI: When you got into your psychiatric specialization, [01:35:00] when you were in medical school, what was that like? Was it what you expected?

EISENBERG: I did very little of what they call here internship, because I was given credit by my master's degree. But whatever I did, it was a little bit different but not all that much. I began really learning and understanding psychiatry as I wanted when I came to the United States with a fellowship.

ROSOLOWSKI: I see.

EISENBERG: Which I got in Argentina. It wasn't very different than the medical school, and the medical school, not all that different than high school, and the high school, not all that different, except that I began to make friends. That was my shyness or being different and who knows.

ROSOLOWSKI: Well, let's finish up with the medical school experience and then kind of move on to how you got to the States. I wanted to ask you why you chose to write your dissertation on Tay-Sachs Disease.

EISENBERG: Because I had to make a dissertation to graduate from medical school and because I saw the autopsy of a

child that died with Tay-Sachs, and I didn't know the first thing about Tay-Sachs, so I decided to learn. I was able to get the slides of the autopsy and I still have it floating around. It was a marvelous dissertation, the first one ever in that place on Tay-Sachs Disease.

ROSOLOWSKI: Oh, really? Just for the record, could you just briefly define what Tay-Sachs Disease is.

EISENBERG: It's mostly a disease that affects Jewish people and it has to do with the genes of one of the parents. They have discovered, in some other groups later on, that it can happen to other isolated groups. There is a great deal. Number one, the gene has been discovered. Number two, there is a great deal of enlightenment among Jewish communities, and some of the rabbis have become very learned about that. Now, I think in some of the Jewish synagogues, they are asked to have a test for Tay-Sachs Disease. So, the number of Tay-Sachs patients is decreasing very rapidly. So that's a brief summary.

ROSOLOWSKI: It's a neurological disorder isn't it?

EISENBERG: Well, it's a combination of psychiatric and neurological. It's a tragic, tragic illness, and it affects sometimes two or three children in a family. It used to, not any more.

ROSOLOWSKI: And it's very young children too.

EISENBERG: Very young children, yes.

ROSOLOWSKI: Very young children. So, how did you come across this autopsy report?

EISENBERG: Because I became a friend of the -- as I told you, I was doing autopsies through most of my medical school and I heard about this child and I thought it was very unusual, to have children in the psychiatric hospital. So I discovered that in that way.

ROSOLOWSKI: So your choice, did your choice to work on Tay-Sachs, did that have anything to do with the fact that the disease is common amongst Jewish populations?

EISENBERG: Not really, it was any child. I began being a pediatric psychiatrist and each child just pulled the strings of my heart. I learned subsequently that it affects, and that apparently it was only Jewish children.

ROSOLOWSKI: I noticed, when I was looking over your list of publications, that that is the only kind of lab-based study that you've done. Could you just explain the reason for that?

EISENBERG: I never wanted to be a researcher. My love was, is, and forever will be clinical work, and particularly in the last 20 years, how the social environment affects young people. I wasn't interested. In fact, I suspect I might have slept through some of the labs. I respect the people

that do it, I admire them, but it was never an interest of mine. That I had to do, because in order to graduate, I needed -- of course, they were not taking any psychological studies. It was quite a bit of -- I never mentioned that in this interview -- [01:40:00] quite a bit of stigma connected to psychiatric patients and psychiatrists.

ROSOLOWSKI: Oh, really?

EISENBERG: Yeah. If they would hear that I wanted to go in. I kept it quiet, because they would hear that, then they will think that -- as I heard some people in here say, "Oh, you are too bright to be a psychiatrist."

ROSOLOWSKI: What was the stigma, where did that come from?

EISENBERG: That bright people don't go into psychiatry, go into those fields. You don't make as much money. I've heard it in here as well. You cannot help the patients. Well, we can talk about psychiatry, lots that I can tell you about that, but in answer to your question, I lost interest. I really never had it that strongly, but whatever I had, because I admire and respect and I read the scientific literature. To this day, I read the *New England Journal*, and if I see something in an area that's interesting, I read it voraciously. But for me to do it, I would have considered it a waste of time. I also think that whatever weaknesses I have, but there were times, I

have erred in the direction of relating to human beings. It comes so easy and naturally. Why make the effort in an area where I don't know whether I will succeed, I suspect that that's part, in addition to other reasons of course.

ROSOLOWSKI: When did you start to realize what your talents and strengths were?

EISENBERG: Hmm. I guess (pause) when I was 35, 40. I gave myself credit for the heavier things, but natural talents, they just came like breathing in and breathing out, and even later, in the early forties, because it's not unusual. I don't think to have what happened to, I don't know, because I never asked that question of anyone. But I think that what is happening to other psychiatrists I have talked to is that early in life, they identify and admire and respect a professor of psychiatry, as I did. So you try to imitate their behavior and you learn the questions and you know how to conduct an interview and you know how to do the psychological tests, because it is repeating the behavior that you have learned from. And then later on, at least for me and I don't know what's happening to other people, I felt very comfortable with myself. And I know I have weaknesses and I know I have talents, and what I realized is that I think basically, I am a healthy person and what

comes naturally, plus the training I had, would allow me just to interact with another human being and be myself.

There are some things, of course I will obey, the rules of the practice. No intimacy, no touching, no kissing. Even those, occasionally, I have broken up, later on. If I meet them on the street and I haven't heard from them in ten years and I see them with their children that were infantile, my immediate reaction is, so nice to see you and tell me about the baby. If they hear that, the union of psychiatry, maybe they'll kick me out, but I felt then, much more myself, and I think that patients have respected me and patients have liked me, as human beings to human beings, because they know they get that reciprocity. So I think that this is a strength, that I love people, I really do, whether they are patients or whether they are physicians or whether they are the woman who comes to clean the apartment. I can tell you more about her life, I'm sure, that than other people she works for in this apartment house, because I am fascinated by her life. I am fascinated by human beings, how they get to be whoever they are and for what reason, [01:45:00] as I feel the frustration of people that could not get what they wanted to be, and I think that people respect that, and they

respect that in myself. The patients know that I don't lie. They know that I don't follow something because it's the route to follow because it's the fashion at this particular time in the psychiatric history. They know what I think. They know most of how I feel, except the people that are borderline, where I have to set limits, and I do it automatically. I'm from later history, so I guess that's what I consider my type, in the field I am in, and why I did not do research as well. So I guess that's one of my weaknesses, that I wasn't interested. (both chuckle) I wasn't interested in doing research.

ROSOLOWSKI: When you were talking about your experience of going to that first psychiatric hospital and seeing all the patients who were treated so badly, those were pretty much adult patients. And I'm wondering when the shift came to you, that you decided you were going to focus on pediatric psychiatry.

EISENBERG: I loved children all of my life, since I was 17 or 18. I so much wanted to have children, that was my inner force. So I guess because I loved children and because it gives you hope for the future. If you know you intervene at that age, you might have more of a chance than when rigid defenses are established and when illnesses have progressed. When did I decide to go into pediatrics?

Well, it's another long story that sounds at the beginning, like if it is marginal, but it's not.

When I finished medical school, I wanted to do child psychiatry. This was my goal, because between the time I worked with the retarded children and the few patients I have seen as children, when I did pediatrics, I knew that's what I wanted. There was nobody to train me in Argentina, except one doctor. I still remember her name and last month, I learned that they have built a building that has the name, Dr. Tobar Garcia, whom I knew at a distance and liked.

ROSOLOWSKI: Could you repeat her name?

EISENBERG: T, like in Thomas, O, B, like in boy, A-R. And the other name is Garcia, G-A-R-C-I-A. I had worked with children enough to know that I would like to do that, and she could train me, but she was then working for the school department in Buenos Aires, doing psychometrics in order to send the child to the next grade or to keep him in the same grade. That's as it was described. I don't even know whether I met her or not.

ROSOLOWSKI: Now, does this reflect the fact that child psychiatry was a new field?

EISENBERG: Both. There were no child psychiatrists when I trained, so I decided, that was combined with my enormous desire to travel. I very much wanted to see other places other than Argentina, and we didn't travel very much when I was -- well, I didn't travel anywhere but the mountains or the seashore in the summer, when we became more, this, financially, and we had lovely vacations, the family did. But my parents have never been outside of the United States (sic), except my mother, and didn't know anybody who had been outside. One cousin had come to the United States. So, I decided to apply for fellowships to travel. My first fantasy that I will be the doctor for a ship, going from Argentina to the United States. And in those days, it took like a month, six weeks, and then I thought oh my God, if I am the only doctor [01:50:00] and the patient has appendicitis, I don't know enough surgery to be the only doctor. So I got scared and ended up never applied for that. I have enough sense to know that I shouldn't apply for that. I so much wanted to be in a boat, in a big boat. Anyway, so I looked around and the combination of wanting to travel and desperately wanting to learn child psychiatry, made me apply for fellowships. I guess the two names I knew were Anna Freud, the daughter of the famous

Sigmund, who was a child psychiatrist, and the other name I learned, but much less, was somebody named Leo Kanner, K-A-N-N-E-R. How did I learn that? Because in reading the literature, the year before, he had described for the first time and used the word for the first time, infantile autism. So I applied to Anna Freud, because I'd rather go to the England than to the United States, I thought to myself. Then, she had more of a name and I had read all of her papers and it sounded very glamorous. So I applied and I sent my grades and my doctoral thesis and why I wanted to learn child psychiatry. I wish I would have kept a copy of that one. Lo and behold, she accepted me in her program and doing the short circuit that my grandfather had done when he wasn't accepted, I wasn't accepted going back to England, by the consulate in Buenos Aires. Why? Because it was shortly after the Second World War and they didn't have enough housing or food. So, I could go if I wanted, but I will suffer a lot, and they couldn't get any housing.

So I decided not to go to work with Anna Freud, and I sent a note explaining why, and I applied to Leo Kanner, where I had the fantasies in Baltimore, it's going to be nicer, because I had a little map, like my grandfather. I saw a little dot and I thought that's good. I'll work at the --

John, I used to call him, John Hopkins, until five o'clock, and then I'll go for a swim in the ocean, and then I'll go to my one little room and read the books and do what I had to do. I had lots to learn. So I applied to Johns Hopkins and they accepted me, and they opened the doors for me. I never regret not having gone anywhere else. For the first time, I felt accepted as a colleague. I felt different because they knew many things that I did not know. A long story about my acceptance there.

ROSOLOWSKI: Well, tell me about it.

EISENBERG: Well, several things were important that happened in my life. I realized that medical student is more than what I knew about medicine, that they have a rigid way of presenting cases. In Latin America, like in France and like in Spain, and I have that habit and my husband says, "Get to the point." And you will experience that. I go through all around it and then I get to the point. Sometimes, I've got to bear in mind that, but that's part of the spontaneous. I said to my husband that I have to create *la mise-en-scène* and then get to the plain. I don't know how much is the culture in which I grew up, how much is my personality, but anyway, going back to Hopkins, the students all looked the same and dressed the same, and they started the same way, with the self-confidence I wish I had

in those days, and presenting a 21 year-old black male, da-da-da-da, and they went through the list and (bangs table) finished in ten minutes, and they... And there I was, struggling to adjust to a very different way. I was miserable in those days.

Do you want to hear about the miserable part or the funny part? I can tell you either one.

ROSOLOWSKI: Maybe start with the misery, it is culture shock after all.

EISENBERG: It was a culture shock. [01:55:00] First of all, I got a fellowship and through an Argentinean, something that I was connected with the international fund for education. That's not the name. Connected in the United States. So, as part of the obligations we had, we had to live for a month in a North American city, to become Americanized, which rubbed me the wrong way. I was from America too, I kept thinking, but I didn't protest. So for a month, I had to settle in a city. So I called that cousin that had been in the United States, an engineer, and I said, they asked me. I don't know any of the cities, I don't know what you're doing. He said three things that I remember. Number one, don't go to New York, it's overwhelming to a person that comes from Buenos Aires.

Number two, don't go to a hotel, decent women don't go to the hotels in North America. Number three, get used to it, because it's after the war and there's scarcity. So get used to the idea that you won't be able to get this or that. So with that, I decided to go become North Americanized, and I did two things. One was, I had to enroll in one of the schools, public schools, where we had to go for a month, from nine until three o'clock, with either other people that had been admitted to the same program. I was the only woman, I was the only physician. There were some men that were accepted to the school of mines in Western North America. They don't know how to speak English or Spanish, as far as I could tell. It was a very mixed group.

The teacher was lovely, but it became quite clear that she wanted to learn Spanish because her husband was going to Venezuela, and she had volunteered to teach. I thought I knew English, but when I was in the class, I didn't know if they were speaking Chinese or English. One word connected to the other. I had studied English by a professor from England, and you know, she made pauses once in a while, na-na-na-na-na. I couldn't understand a word. The others understood even less. But we were given papers to

memorize, so we spoke Spanish for the six hours. This was the process of Americanization. Then we had to memorize, and I did, being the docile person I am, and one was the National Anthem. I could understand, we had to stand up and sing. I could understand that, that was a courtesy sort of, because mind you, I came only for a year. I would never stay here.

The second one was, "I came from Alabama with a banjo on my knee." To this day, I didn't have the courage to ask the teacher, why do we have to sing that at the end of the day? The National Anthem was at the beginning and this was at the end. And then I walked the parks in Washington crying. I was so depressed, oh, and I had left that relationship. This was the second reason why I left Argentina and I don't want to go into those details. I had a relationship that was not going anywhere, and I had to get out of it. The main reason was I did want to learn child psychiatry, but this was in addition. He kept on calling, you know, calling from Argentina. It wasn't very easy, there were no cell phones. So after the end of the week, anyway, "If you are that unhappy, why don't you come back?" Which is what he wanted me to do of course.

Anyway, after one week of that school or two weeks of that school, I don't remember, I hired an interpreter and I went on a Saturday, to Johns Hopkins, and Dr. Kanner wasn't there, because on Saturdays in the clinics, they don't work there. I did not know, but somebody was kind enough to phone him and he came from home. And like an Argentinean, I stood up and said, "Professor Kanner..." I memorized that, "... it's such an honor to meet you." And he looked at me, like he thought I was some weird person, and said, "You are Dr. Blitzman and I am Dr. Kanner, sit down!" In Argentina, we got all up. Professors were... [02:00:00]

Anyway, I explained the situation to him. I said, "I want to learn English here, listening to patients, please let me come in two weeks before I am supposed to." So I went back and I packed my bags. The other thing I did, because I couldn't go to a hotel, was to stay at the YWCA, which was a collection of psychopathology among women like I've never met since or before, since or since then. Was that strange. I had psychiatric patients, and they wanted to practice their Spanish. One was going to Argentina and in fact was sort of adopted by my father. She was a nice teacher, from Indiana, and we had dinners together, and she heard I was from Buenos Aires, she read. So she wanted to

practice her Spanish and I sent her. She took my bedroom and my mother's affection and everything else.

So, I began to work at Johns Hopkins. I had \$200 a month as a fellowship, which was lots of money in those days. I looked for a place to live and somebody had told me, send me to a professor at Hopkins, it was the only time I suffered, through that present, he couldn't understand me and I didn't like him or understood him. He was a professor of pathology, I still remember his name, Dr. Rich, Professor Rich. So I said, "Where do I find housing?" And he told me that next to the hospital there were two blocks, in Broadway Street, where one could rent a room. So I did, rented a room from Mrs. [Warsky?], who had the most gorgeous moustache I've ever seen on a woman. (chiming) Big, big, big, (inaudible), but have a whole downtown, like brown?

ROSOLOWSKI: Brownstone?

EISENBERG: Brownstone house. And she was renting to medical students. So, I looked at one room she had. First I went to another one, she had no rooms, where the professor had sent me, but she told me that the next door, Mrs. Warsky, had a room. So I went there and it was a nice room, maybe from here to -- it was enough for a double bed and a little

-- and I didn't want very much. It was a nice room and I rented it for \$100 a month. So, it left me \$100 to eat and whatever I needed. I wanted to go to concerts, to the Baltimore Symphony, that was out of the question. Later on, I began to go.

I got sick three weeks after I arrived. I found a social workers, Ms. Ashenden, who was an elderly, New England, single woman, who had a heart of gold, and she was the psychiatric social worker to whom Dr. Kanner referred me.

ROSOLOWSKI: Her name again, Ms. Ashenden?

EISENBERG: Ashenden, D-E-N. She was lovely and she took me under her wing, because Dr. Kanner said, you have any need call her. She lives by herself, she's a nice woman. I got to know her very well.

ROSOLOWSKI: So this was all during that period of two weeks before your fellowship actually -- or before the training started.

EISENBERG: No, when the fellowship started. I came right away and it started two weeks earlier. That's another long story. But anyway, I rented the room, I got oriented to the neighborhood. I met Ms. Ashenden, and then I got sick, about a month later; two weeks after the official fellowship, but sick as a dog. I had a thermometer with me

and I had 103. I was feeling sick all over, I couldn't get up. I knew I had to go to the hospital and my thought was my God, I'm going to die here and Mrs. Warsky find out I am dead by the smell. How am I going to survive? So, Ms. Warsky came upstairs to complain because I had opened the window. I was flying with fever and I had opened the window. She came in screaming [02:05:00] that her heating bill will be more expensive and I didn't have the right and I was supposed to keep the... And she said why are you in bed now, it's ten o'clock, or whenever it was, I don't know. I said, "I feel sick, could I please have a cup of tea? I could go downstairs and heat some." But then she said, "Your rental is without cooking facilities," and she wouldn't let me have a cup of tea. She was miserable. And then I learned subsequently, when I moved, that she was charging the other students \$50 and charging me \$100. Anyway, I survived the first few months but it wasn't easy. I would leave at three, four o'clock in the afternoon, when there were no more patients, and I would go to a movie theater. That was in the black neighborhood of Baltimore, but it didn't make any difference in my life. But they still have all the villas, and they were speaking English, and we didn't have television of course, and the radio, I couldn't understand. I'm not sure I had a radio. So it

was to practice, and I remember leaving the movie at six or seven o'clock in the evening with a little jacket, because I didn't bring a winter jacket. Whenever it was, I was so cold, and the wind coming through. It was miserable and it was miserable in Washington.

Then, Ms. Ashenden began to introduce me to her friends, and I spent the first Thanksgiving with her friends; a group of women that were social workers or nurses, whose husbands were still connected with the after war period, and they told me where I could buy stockings. They will feed me once in a while, which was welcome, because with \$50 or \$100 left, which I felt some of it I had to send home, there wasn't all that much that I could do. But I had a wonderful time with them and then I learned English, I began to see patients, and then three months later, guess what? (claps hands) Dr. Kanner invited me to his home, he and his wife. And I went and talked with him, when I was depressed, I talked to Dr. Kanner, and Dr. Kanner was a rotund Austrian man that smoked cigars. He's greatest accomplishment, very modest and incredibly good. He would send smoke through round circles, all the way to the ceiling, and he heard my crying, I am so depressed, I don't know whether I can make it. Mrs. Warsky and my boyfriend

calls and I miss my family and I don't have friends, I left everything behind. I don't know whether I have the talent. So after a while he said, "You are sort of sad but that happens to all the people that come to this country. Come and spend a weekend with my wife and with me." They gave me a guest room they have and she put the blanket all around me and they fixed me three meals a day. After the weekend, I began to feel better, and I was forever thankful to them for that kind... Ms. Ashenden then started. But that was different. This was a home and they had children in college. That was different. The women were a little more together because their husbands were in the war. Ms. Ashenden never married.

ROSOLOWSKI: Tell me about the fellowship program that you were part of. What did you do and how was it organized?

EISENBERG: It was poorly organized. I feel disloyal talking about those things. I learned a lot. I learned a lot and I was very good and I went on time and worked long hours. The long hours, they were not as long as I had worked other times in my life, but it exposed me to two groups; the attritions group, the pediatrics department, and the psychiatric department, and they were wonderful departments. They were wonderful departments and they accepted me so openly. That was the difference. In

Argentina, they ignored me. In here, they welcomed me. They answered questions, they would give me papers to read. [02:10:00] What happened when I did only my own, and later on with the support of my friends, emotional support of my friends in medical school. In here, they opened their arms to me.

ROSOLOWSKI: Why do you think there was so much of a difference? What do you attribute it to?

EISENBERG: Cultural and programs that are different, better teaching. I was also more mature I guess. Of course I had to assume responsibility, but I loved it. I loved it.

ROSOLOWSKI: It's really interesting to hear your response to that, because I mean that was an interesting time for women in this country, when you came, because it was 1945 that you came for your fellowship.

EISENBERG: Yes, right.

ROSOLOWSKI: There were so many women in the workforce, because of the Second World War, and then afterwards of course, there was the push to get women back in the home. So I was wondering how your experience might have been connected, since the country as a whole was seeing --

EISENBERG: I'm sure it was. Oh, I am sure it was. I should have mentioned that first. Educational programs were much better, all of the programs were much better, but they were

respecting women, of course, for the first time. They had to, because they didn't have enough men to do some of the job. As the women said, medical education, a little bit earlier at Johns Hopkins, and later on because they didn't have enough male applicants. You must have read something in the papers. Here, they couldn't have any other reason, but nevertheless, the warmth of Dr. Kanner and his wife. And then the next thing that happened, I may as well tell you, is that they gave a dinner party and they invited me, a buffet dinner with about 25 people, with little tables for four people. They invited me and I wore my very best dress because it was a big occasion. I've never been invited to -- but anyway, I went, very happily, to the dinner, and there were one couple and me and an empty seat, and the woman, who was the wife of a dentist, and a singer, very artistic and very dramatic and red hair, and dressed in a very exotic way, began to adopt me and said to me, "Where are you from?" I had gotten so tired of telling that story, what 60 years, 65 years, whatever number of years. Where are you from and how did you come? And so she began to ask me a lot. My English was, after two weeks, I came in September, and this dinner was -- no.

The dinner was at the beginning of November. By then, I stopped crying, by then I was learning, I was beginning to speak English. I decided that I was not going to go back to Argentina, to the boyfriend, and that was recommended, what I did, the only reasonable thing to do. But I was now adjusted and happy to be here, not exultantly happiness yet, but I was all right. I learned not to go to the movie theater if I was too cold. Maybe I even bought -- the jacket I brought belonged to a cousin and the sleeves were coming to here. It was so cold. Maybe I even bought a jacket. I don't remember.

Anyway, the woman said to me, "Dr. Blitzman, what's your name?" Carola. The man that we are waiting is going to be late. He told the host and hostesses that he will be late because he's coming from the Navy-Army game in Philadelphia and he cannot arrive on time. But don't pay any attention to him, he's wonderful to the women when he meets them and terrible after they get married to him. And that man became my second husband, my first husband, excuse me.

(Tacey laughs) He was the most incredible, wonderful man, and from then on, every time I met this woman she would run across the street. But anyway, that's the way I met Manfred.

ROSOLOWSKI: What was his name?

EISENBERG: Manfred Guttmacher. I met him on November 1st, [02:15:00] G-U-T-T-M-A-C-H-E-R, and my life turned into a just glorious time. He had been married before. He had two sons that were adolescents. He was older than I was and I loved him passionately and devotedly and respect him. He was also a psychiatrist and quite famous, handsome, as I saw him. Madly in love with me. Madly in love with me. And I had a fellowship. I had to go back to Argentina, a boyfriend, ex-boyfriend, I felt guilty about dropping of course. I had my grandmother and my mother. My father had died. I had to go and explain and I had my friends and my life there. I had to go back. He was still out -- I met him in a uniform. He was coming out of the service. He was in Washington at the end of the war, as a psychiatrist in the United States Army, in the main center for psychiatrists. I don't remember the title.

So we started a marvelous romance that was gorgeous, and I had a wonderful time with him. I was, by then adjusted, from then on. In fact, I was sending letters to home quite often and my mother decided she was going to come and visit me. And later on she told me, when I began to talk, to write letters, when I wasn't sad, life was wonderful and I

was going to the countryside and snow was the most beautiful thing. And I was staying at Mrs. Warsky and Manfred asked me on a date. December was snowing. I saw him a day of entrance, with an umbrella, and I thought my God, this man is crazy, why is he wearing an umbrella? I never had seen snow in my life, because I thought they were white clouds that sort of come down. I didn't realize they were wet.

Anyway, and then December 31st, just to give you an example, he invited me to go to a series of dinners, because he had lots of very good friends, that became my friends obviously, in Baltimore, where he was born and raised. And he sent me a corsage and Mrs. Warsky saw it and she put her nose into the corsage, because I had to open the door ahead of time, because he sent it during the day. She looked at the flower and said, "Huh! He bought them wholesale because his sister is a florist." (laughs) Anyway, but because Dr. Guttmacher was coming to wait for me, he had to wait, she will dust the chair and sit him in the kitchen and treat me with a respect I had not seen before.

And then my mother announced she was coming, because she was worried. I was marrying a divorced man. I never had seen a divorced person in my life, with two children that were almost teenagers, that was older. She was petrified that I have gone crazy with the adjustment. She came and met him and loved him, loved him. He was wonderful, just wonderful, and the two children lived with us through the week, and I was so happy to have stepchildren, because it was a building family, and then we began to have our own, which we'll talk of course.

I went back to Argentina for a month, to do all those things I had to do. He had promised his sons that when he came out of the Army, he was going to go to ranch in Maine with them, because that's where they had gone over the summer, and he didn't want to break that promise. So during that month, with a clear understanding when I came back, we were going to get married. So I had some difficult times in Argentina but I came back and we got married in October, shortly after I came. We had 20 marvelous years, just 20 marvelous years, and two children, that are my pride and joy, and when I start talking about them, stop me. [02:20:00]

ROSOLOWSKI: All right. Well, tell me their names.

EISENBERG: Larry and Alan.

ROSOLOWSKI: A-L-L-A-N?

EISENBERG: No, A-L-A-N. Named after his uncle that was identical twin brother of my husband, who was not only one of my best friends, but also my obstetrician. He had daughters and my husband had sons, so when we had Alan, it would have been the first son, we named him after his identical twin brother. They were very close, both physicians, were very famous on that community. His identical twin brother went to New York shortly afterwards and there is an institute called Alan Guttmacher Institute, named after him. My son is Alan Guttmacher, obviously.

In a happy note, for the time being, I think we ought to stop, because I have to go again, to the bathroom.

[PAUSE IN RECORDING]

ROSOLOWSKI: We're back after a not so brief lunch break, and it is two thirty-five. I wanted to resume our conversation about your fellowship and focus on what your educational experience was there, because you said it was really when

you came to the U.S., that you began to understand what the practice of psychiatry was all about.

EISENBERG: Yes. I learned a lot of child psychiatry and pediatrics and other psychiatry. I learned a lot about the patients, and they taught me a lot about not only about their psychopathology but about the daily problems of daily life that they were experiencing. It was really the first time I really worked in an outpatient department, with the intensity that we worked in those days.

ROSOLOWSKI: Now, was this -- you worked in the outpatient department while you were a fellow.

EISENBERG: Yes. It was just outpatient. The department occasionally, we had children patients that were hospitalized in the pediatric service, but it was the exception.

ROSOLOWSKI: What are some of the most memorable cases that you can recall from that time, some real intense learning experiences?

EISENBERG: One little girl that couldn't talk. She was completely mute and the school referred her, and the mother was very willing to give us any information. The child was going to school but they never heard her voice. I was relatively new in that service and the mother said that at home she spoke. And I don't know whether the school

believed or didn't believe. I suspect they didn't believe, and the mother kept saying that she's perfectly all right but she doesn't talk in school and I don't know what to do. I talked with her and she seemed reasonable. I saw her, I don't remember, a couple of times. She did the intelligence test, we used to the Binet-Simon in those days, and everything that was nonverbal, she scored in the normal or relatively about normal level. But then, she didn't give verbal responses and I didn't know what to do with her, I really didn't. One day, I arrived to the hospital and the newspapers were full of a horrendous case, of either a rape or a murder, I forgot. The newspapers were full and even the people in the hospital were talking about it, because in the service, because it was something very horrendous. And I said to her one day, that day, this morning, what everyone is doing, because I kept on talking, hoping that she would respond. Maybe it was the second or third time. I don't know what they are -- so I said, I don't understand that word, do you know what rape means or do you know what murder, or do you know what that word, whatever the word was, that was -- and she explained it to me, and she spoke to me. I present myself as the reality. I just came from another country and I don't understand [02:25:00] the language. I had to explain with my hands

and my voice, and I don't know English, and would you please teach me, what is it, so upset. And she spoke that day. I don't know why that case, I haven't thought about her in 60 years, but it jumped into my head.

There were also medical, a few cases when I went into practice, with ulcerative colitis, that were very upsetting. There were many cases of children of professional colleagues, later on, once I made my name and people got to know me a little bit. The mothers would bring their children. The mothers were depressed and the children were either acting out in school or not progressing in school, or having problems with they were anuretic or encopretic, or they couldn't sleep at nighttime, or whatever the problems were. I realized that with those people, and they were all faculty members' wives, the problem was quite common. Their fathers were moving up and up in their careers and they didn't come home until much too late and the children were asleep and the wife had a martini at the door and how was your day, dear. The children were not getting any fathering and the mothers were getting no companionship. These were colleagues' children, that will meet in the corridors.

What cases? I don't remember specific cases. That one was very dramatic. But I learned, I learned a lot, about the sacrifice of some parents that didn't have money for the carfare, to bring their children, if they needed to come back, and I learned about the different classes; the children of the professional people and the children from the single mothers, that had to be at the factory early and couldn't miss a day of work. I learned about the American way of life, that to me was important to learn and understand. I don't remember any drama. I'm sure that there were dramatic cases. I don't know why I remember that one.

ROSOLOWSKI: You're mentioning a lot, you were mentioning actual clinical cases when you spoke. What was the balance between coursework or kind of mentorship with colleagues, during your fellowship, versus clinical experience?

EISENBERG: I made friends quickly and they were mostly people in the other psychiatric service that was completely different. They would invite me to special lectures, they would invite me to special evenings. One time they asked me to go to the fifth floor, where they used to have a gymnasium, and I thought the strangest thing I ever have seen in my life, doctors with the white uniforms. Most of them I did not know, because they were dancing, but it was

obviously where patients. I remember one doctor, a woman dressed like an Indian, with a feather sticking out, and I couldn't stand whether this was a new way of treatment that I never have heard of. It was so strange and I couldn't ask the people what is this. At the end I understood, because somebody was kind enough to -- they were celebrating Halloween and we never had Halloween in South America. And for once, they were allowed not to dance with their own doctors, but to dance with some of the other people.

I had a strange experience. The first time I had to make a presentation in front of the pediatric service, and I was impressed by the fact that they had selected me. By then, I learned a little bit of English and I had a case that was very interesting, but it was the historical place from Johns Hopkins Hospital, where they discovered something, I forgot what, but it's something terribly important, that changed the treatment of what they were doing, forever, in eighteen hundred and something, even before I was born.

[02:30:00] They explained to me that the system they had was that I was to make a presentation that I wouldn't see ahead of time, but they would bring me the record of the patient and then they would read the patient. So you

didn't know what you were going to get. I did not know either. So I began to read, and all of the doctors were in this, very silent. This was this young woman from Argentina, making her first presentation.

I began to read and then I asked the people in the first couple of rows, "What's SOB?" And everyone burst into laughter. I couldn't understand, what did I ask that was so funny? The patient was there and were they disrespectful of her or me or what? They told me it was short of breath. (laughter) And of course when I asked, I didn't think of short of breath. So I said, "Then why if you are laughing if the patient is short of breath?" So the patient fortunately began to talk. They were strange experiences, but I learned a lot. I learned a lot of psychiatry and yet, when those two years finished, I think there were two years, I felt somewhat unfulfilled as a child psychiatrist. I felt a need to learn more. I was getting a lot about the social causes of instances of unhappiness. I was learning a lot about school systems and how children adjusted or didn't adjust, about parents' contribution to the illnesses, or lack of parents contribution of the illness. Dr. Kanner was especially, and my future husband, were doing follow-up studies of

infantile autism, and Dr. Kanner used to talk, in those days, about the refrigerator mother, because there were mothers that couldn't give affection, emotional support to their children.

Then, I felt I had to do something else, so I decided to do what I noticed, the most intelligent of the fellows and residents were doing. They went into their own analysis, what they called in those days, a didactic analysis. Dr. Kanner was very much against psychoanalysis. So was the second in command that later in years turned out to be my husband. They had their reasons, but I felt I had to do it. I wanted to clarify my own past and my own personal experiences, so at the beginning, I just went to learn, and it was quite clear to me that two or three weeks later, I have personal issues. I had to find solutions and understand my own reactions, as they would affect patients as well my own. I was by then happily married, I had the two children I so much wanted, and I needed to search for more. So I entered into analysis. I finished all the theoretical courses and a good psychiatrist, psychiatry, and then I decided to put the finishing touches and go to a famous psychoanalyst in Bethesda, that had studied with

Freud and had a lot of credentials and was a child psychiatrist. So I went for training to her.

ROSOLOWSKI: What was her name?

EISENBERG: [Valder Holl?]. I think it was Jenny Valder Holl, I don't remember.

ROSOLOWSKI: V-A-L?

EISENBERG: I don't even know how to spell it. V-A-L-D-E-R, Valder. I think she met a doctor, a Mr. Holl, H-O-L-L. I think it was Jenny Valder before, and she was of the old school of Freudian analysis, analysts, and I learned a lot. But in treating me was not only the symptomatology that the patient was bringing, the psychopathology or lack of it, in the family background, but why did it affect some children and not other ones, and how some of the kids [02:35:00] had so much resilience, that managed to do very well. And in fact, it's a question that continued to plague me as I was the dean of students at Harvard Medical School. I can tell you experiences I had then, with some of the students, I couldn't understand how they made it. I was so impressed by the stick to it-ness to what they wanted to become and what they wanted to do. So I couldn't understand fully, the difference and Dr. Valder Holl taught me a lot, what was underneath all those outward behaviors. I would either present a continuous case or I will present new cases that

were challenging to me, and I will pay my visit like if I was a patient, but we never talked about personal issues.

ROSOLOWSKI: Mm-hmm.

EISENBERG: I guess in the initial interview, I guess she wanted to know a little bit. We became good friends and I learned a lot from her.

ROSOLOWSKI: Was she a kind of mentor to you, being another woman clinician?

EISENBERG: Not really.

ROSOLOWSKI: Because I'm wondering how that fits in. She's the first significant woman that you've mentioned in this, as a professional equal.

EISENBERG: There were others once at Hopkins, but remember two women, one that was a chief resident, I had such an admiration for her. She used to meet in the presentations when she didn't have to present and I thought, how marvelous. She does what she wants and she's listening, she doesn't have to interpret anything. So I admired her at a distance and it was the second woman that I admired enormously. There were other few, very few, to make sure. I can think of only those two. Then there was another one in our -- those were other psychiatrists, but one in our service, that she was above me because she had been there for three or four years. She was in fact from New York

State, and she had to come for training, and I admired her enormously. I don't know whatever happened to her. But I always would sort of look for women who have made it, not for the personal relationship but to give me courage that other women were making it. I think that was mostly what I was looking for. And if they became friends, of course it was even better.

ROSOLOWSKI: So were you -- you said at first you didn't talk to Jenny Vander Holl about personal issues, but did you become supportive of each other when you became friends?

EISENBERG: No. She was a very older woman. She must have been like 55 or 60, but since I was only with her, I was 32 or 33, she seemed older, and I just came for that purpose and we didn't become close friends. Yes, we saw each other two or three times at meetings later on.

ROSOLOWSKI: OK. I misunderstood.

EISENBERG: And she was -- no, the ones I did mention, some friends that were residents at the other psychiatric service.

ROSOLOWSKI: I see.

EISENBERG: No, she was very methodical and very well organized, and must have been older than what I said, because I would pick one of the children at school and then I would drive to them to Bethesda, and then we'd stop on

the way back. I loved those rides because we'd stop at the Howard Johnson or whatever it was, and they could order whatever they wanted, and it was my chance to talk to one of them alone. Then I began to travel to Washington by train, that was quite an ordeal, to go to the second elite meetings, where we discussed cases. It was more of a profession. They were all men and I would go with a couple of them from Baltimore.

ROSOLOWSKI: So you were the only woman there?

EISENBERG: Yes.

ROSOLOWSKI: How was that? What was that like?

EISENBERG: It was like going to classes. (laughs) I did feel that they didn't ask me as many questions as this woman was telling me, and if I talked a little bit too long, that there were changes in the general, oh not her again. A little bit of that, but I don't know how much was me and how much it was because I was a woman. I had good friends. I traveled by train with them, but then I decided not -- which I thought earlier, I will want to become a child analyst. [02:40:00] And then I decided not to. It's one time that I quit something that I felt I wanted to do, and decided clearly for two or three reasons. I have a young family. The involved an enormous commitment of extra time. I felt competent enough to do child psychiatry,

(coughs) but mostly, I did not want to spend my professional time treating five or six children that came from a well to do family, could afford the analysis. That was the main reason. I just wanted to treat (coughs) a variety of kids in the hospital. I ended up working half-time at the hospital, in the outpatient department, with mostly socioeconomic groups, and then some private practice in the afternoon where the parents could afford insurance and whatever they could pay was fine with me. By then, maybe the children were in school, I had passed the national boards, and my life was very good that way. I really felt I was doing both things.

ROSOLOWSKI: So your fellowship in psychiatry ended in '47, and so at that point you began to have private patients.

EISENBERG: No. In '47, I had my first child, and in '49, I had my second child, and in both cases I stopped working altogether.

ROSOLOWSKI: For how long?

EISENBERG: Until they went to nursery school, kindergarten, and then I worked for two or three hours, when they were in school, and as they increased their number of hours, I increased the amount of work I was doing.

ROSOLOWSKI: Because I was just going to ask you, how did marriage have an impact on your career.

EISENBERG: A great impact.

ROSOLOWSKI: So here's a place where --

EISENBERG: A great impact. Can you stop for a minute? I need some water.

ROSOLOWSKI: Certainly.

[PAUSE IN RECORDING]

ROSOLOWSKI: Start it up again. OK, so you were talking about how marriage had an impact on your career path.

EISENBERG: I had to take national boards, because I wasn't acknowledged as a North American physician. I was married and I was to have my first child, and I was very lucky in that my first husband was willing to let me do whatever I wanted, and I wanted very definitely to spend the first few years with my children, so I stopped working altogether, until they went to school. Then, when they began to go to school, I began to study for the boards, and I asked the dean of Johns Hopkins, whether he would allow me to follow the fourth year students through the whole hospital, and so I did that first, to prepare for the theoretical knowledge one needed to know in medicine, to be approved in the United States. That was a disaster of a preparation of a year. It was so very hard. I'd been doing psychiatry most

of my life, I have forgotten. I took not the national boards but some boards, other boards, in those days one could choose, and it was the whole reviewing of the medical school in one week, in a 95, 100 degree temperature, in a non-air-conditioned place. Each question, for instance, in internal medicine, they will have obstetrics, they have dermatology, they would have sur-- not surgery, but others. So each question was a whole entire...

But I took a year off, or two years, to prepare for those boards, and before I took it, to be with the babies. I had the most wonderful time of my life. I was living in the country and grew string beans coming out of my ears, and I embroidered and I, you know, I was a wife and a mother and that was just lovely for then. I loved being with those kids, and we had somebody that came and helped out, so if I had to go, I had that freedom too. She lived with us for 20 years. [02:45:00]

ROSOLOWSKI: Did it ever occur to you not to go back to work?

EISENBERG: No. No, and there were many reasons. I wanted to, was number one. I felt they needed me. At one point, I was, I think, if I'm remembering correctly, the only child psychiatrist in private practice.

ROSOLOWSKI: Wow.

EISENBERG: So I always had more requests than I had available. I have a skill that took me a long time to acquire, but it was a lot. But there were very happy years and I did not do anything but to be a housewife and a hostess and a lover and a mother and all those things combined. Manfred, when I said I wanted to go back to work he said of course. He loved medicine and he loved me and he loved the fact that I could contribute to society. So he was very, very supportive. (chiming)

ROSOLOWSKI: We'll wait for the -- there we go. Was he unusual in his time, for a husband to be supportive in that way?

EISENBERG: No. What was unusual was to be married to a woman that was a physician. In our social group in the hospital, there were couples already. Very few, but there were couples where both of them were well-known, but it was very unusual. Yes, it was somewhat unusual in the circle of friends he had, in the same way he grew up. His mother had been a social worker, that's another long story, so he was used to a woman working. He was extraordinarily supportive. In fact, when the students at the medical school kept asking me, when I began to give seminars, what should we do, I said find a love that's supportive of your status, because if you have all the stresses one has, plus

somebody that comes home and says where is my stew, or something, you're not going to make it, either in the marriage or in the career. I've been very lucky. I could have been married to anybody that didn't like what I was doing or respect or help for me when something was needed.

ROSOLOWSKI: Before I go on and ask you about what happened after you passed your boards, I wanted to just pause for a moment and ask you to reflect back and do a little bit of a comparison between the experiences that you had in training in the U.S., versus the experiences you had in Argentina.

[02:45:00] I'm wondering, was there something -- and obviously you brought a different perspective because you came from outside the country. Now, as you analyze what you went through, were there certain things that were positive, that you brought from your training in Argentina, some things that were negative, and vice versa; some things that were negative in the training in the U.S.

EISENBERG: Whatever I brought as an individual, strong or weak, I cannot think of many things from Argentina that I was bringing to the United States. I was bringing myself, with all of the good and bad points, I think. Maybe there is something, maybe in the way people relate to each other, that I had to learn and it was difficult. Like for instance, in Argentina, when we see somebody and we meet

them, or in my days, I don't know what they do now, we said hello and kissed on both cheeks. In Argentina, the first few times, they say hi, and that was it, and then I didn't know what to do. And then I realized some of the people say hello and will shake hands. Then, when I would put my hand to shake hands, the other people didn't respond until a couple of seconds later. Some had their hands in their pockets. So maybe there were, when I grew up, I mean the family I grew up and with the friends I had, because this is obviously not true to everyone in Argentina, so everything I tell you is not true for everyone in America.

[02:50:00] I was accustomed to more openness and more expression of feelings, positive or negative. For women, they were usually more negative than positive, they always cry because their hair wasn't cut the right way or the purse that their husband bought them were not the size they want.

ROSOLOWSKI: (laughs)

EISENBERG: You know, there were problems. And the friends that I had, I am just making a caricature of all of it.

ROSOLOWSKI: But I'm wondering if --

EISENBERG: I don't know what I brought from Argentina except what I am as a human being, and I think that's true for anyone that goes into any other country. I have had luck,

a great deal of good luck in many ways, but characteristics from Argentina, I cannot think of any. Maybe there are and I just didn't notice.

ROSOLOWSKI: What about pros and cons in your experience in your fellowship at Johns Hopkins? What were things that you got that were really great? You mentioned all of the learning experience that you had in the practice of psychiatry. Was there anything negative about that experience as you reflect on it?

EISENBERG: I wanted to learn more about the underlying problems and that's what I wrote at that time, but maybe I was trying to understand myself and that's what I was trying to do. I don't know, but they would come, my friends, and were frustrated because they would all get a case at the conference time, and that time we visit social worker, Ms. Ashenden, would say in a case that broke your heart, because the child had an alcoholic father or a mother that was a prostitute and they had no money, no food on the table, and the child was not doing well in school. So, Ms. Ashenden would say, maybe he ought to go to camp, for instance, for summer camp, to get good food, three meals a day, learn how to swim. On another hand, she would say it's depriving him of the only thing he or she knows, so maybe he shouldn't go to camp. And, you know, there

were conference after conference, where we were going over all of the social and psychiatric problems that the children were having, but I felt I wanted to learn more than that.

Now, my present husband, and we have to talk about him too, trained in the same place, and in fact he became chief of service when Dr. Kanner retired. He had a totally different experience. Dr. Kanner adored him and he wrote and writes beautifully. Dr. Kanner would interview a child and then would write the record. So for him it was wonderful. He would ask the questions he wanted. So for him it was completely different, and so I don't know how much was the second or how much it was me, or how much my adjustment, because I was doing all kind of other things.

ROSOLOWSKI: Right. And learning English at the same time.

EISENBERG: And learning English and being married for the first time and having two stepsons and two small -- well, I didn't have the small children when I did the fellowship. I wasn't married, in fact, when I did the fellowship, but I had loads of new adjustments to make so maybe it was me.

ROSOLOWSKI: What year did you get married?

EISENBERG: Nineteen forty-six.

ROSOLOWSKI: Forty-six, OK. And you began to work at Johns Hopkins Hospital, in the outpatient department, I have 1947. That's not correct though. You said you took the two years off.

EISENBERG: Yeah, I did take the two years off. Why do you have '47? Well, because I came directly and I arrived to this country in '45, so I arrived to Hopkins from '45 to '47. And when I was pregnant, I worked until one week before Larry was born, so it was at the end of November in '47. So I worked from '45 to '47.

ROSOLOWSKI: OK, '45 to '47. So that was when you were working at the outpatient department? And were you also working in private practice in the city?

EISENBERG: No, I was not working anywhere, [02:55:00] because I didn't take the boards until later on.

ROSOLOWSKI: The boards, OK, I'm sorry. And what year did you take the boards? That was 1954, the Maryland license?

EISENBERG: It was 1954, yes, which let's see, '49, Alan was born, to '54. Yes, five years later, I took the boards, and I took one year to follow the fourth year medical students.

ROSOLOWSKI: I'm just trying to match up some dates.

EISENBERG: I'll tell you, some of those things are incorrect, I noticed after I looked quickly, because a

variety of reasons, the educational systems between Argentina and here were different, number one. Number two, much of information I guess, comes from who is who in America, and then I just filled it in quickly and I didn't pay any attention to the correctness. I noticed there were a couple of discrepancies as I read them.

ROSOLOWSKI: Just for the record, we're talking about the dates that are on Dr. Eisenberg's CV. So that explains that, why there's a little bit of confusion on my part there. Could you talk about your experiences, once you got your license and you began private practice, and I also have that you were an instructor at the University of Maryland.

EISENBERG: Yes, yes.

ROSOLOWSKI: And you were also working for the Department of Education?

EISENBERG: Yes, as a consultant. This was part-time work, in the Department of Education, and the one at University of Maryland, it was, I think for a year, to work in child psychiatry.

ROSOLOWSKI: So maybe you could talk a little about those experiences. Were there other women on staff, or you were the -- yeah, OK, so you were --

EISENBERG: I don't remember any, maybe there were. In pediatrics, there were not, both at Hopkins and at University of Maryland.

ROSOLOWSKI: Why do you think there were more women in pediatrics?

EISENBERG: There still are many more. I don't know why.

ROSOLOWSKI: Is it sort of -- I don't know. The immediate explanation that comes to mind is sort of a "natural linkage" between women and children, or was it more?

EISENBERG: For each person, I guess it's a different one, but in the old days women, first of all, they didn't allow women to go into any of the surgical specialties, and pediatrics was open. Gynecology and obstetrics was open to women. So to start in the past, the choices were not as many. Second, they might have liked that better.

ROSOLOWSKI: Can I ask why did they not let women into surgical specialties?

EISENBERG: Because they are sexists, or the surgeons for the most part are, were, some of them will be. Things are much better now but, you know, they will make fun of the women that wanted to go into surgery, they will scream at them like they scream at the women nurses. Lots have been written about that, it's well known. Some specialties, like ophthalmology or surgical neurology or orthopedics,

women were nonexistent. So most of the women, because they were easily accepted and because they felt not welcome, they will go to pediatrics, OB/GYN, psychiatry. Those were the most common ones. Also, because they felt that, or at least I felt, whenever I will have children, that one can set our more regular hours. If you are on an emergency system, where you had to leave a baby. If you are alone, God forbid, and it's three o'clock in the morning, what do you do? In some of the specialties, emergency medicine, there are several other ones, where one works from this time to this time and from this time to this time; so that could have been a factor as well.

ROSOLOWSKI: I'm trying to figure out how to ask this question the right way. Maybe I'll start with an analogy. I've read, as there are certain professions, such as nursing, today, which in the past 20 years or so have attracted a lot more men, whereas it used to be, really a pink-collared type job. And I was reading an article somewhere that said that whenever men get attracted to a specialty which has been considered lesser, it rises in status, whereas whenever a specialty attracts a great many women, it kind of diminishes in status. So I'm wondering if a similar kind of hierarchy was applying at the time [03:00:00] you're describing, or were the specialties that were really

closed and reserved only for men considered higher in status than gynecology and obstetrics, psychology, psychiatry, and you had mentioned one other which I can't remember. Pediatrics. I mean is that the case or is it really off base?

EISENBERG: No, it's not off base, first because the women were not accepted as equal, number one. Number two, because -- and therefore, they didn't feel welcome. Second, because they will go through questions and interviews when they wouldn't have the courage to apply, that were absolutely the most offensive. I can tell you of cases that I have heard and I knew where they will sit a woman in front of seven or eight men for an interview. I had personally, that experience, coming to North America, and the questions were just abominable, and I'll tell you why at another time. But, women were discouraged and yes, I think that because women were paid less, when the men come, the level rises, and because they are the minority. And yet, in some situations where the men have to do things that women have more difficulty at doing, then the level, they raise their level. In Russia, for instance, an inordinately large number of women doctors, but no one had made it to the academy, which is honorific position, and the salaries were the same one that the women that were

cleaning the streets at one point. I'm sure that that has changed now. But of course there is a big difference. More income, it raises the status of whatever it is, the organization, whatever it is. Yes, of course. Yeah. It's still present, much less but still present.

ROSOLOWSKI: You were saying that your husband, Dr. Guttmacher, was very, very supportive of you. I did hear, however, that he was very anti-psychoanalytic, and you decided to go into analysis. I'm wondering, did you spar or have professional disagreements about --

EISENBERG: We did have professional disagreements. They were never of any intensity, they were just discussions. In fact, when I told him I wanted to do it and when I decided who was the analyst, and for some reason I was busy with the babies or something, he phoned my analyst and said would you consider taking Carola as a patient. And then he said, I remember his words, "Don't change her a lot, I love her the way she is." And he never objected. He, himself, have had to also do analysis, so it wasn't that he was opposed. That one that's opposed is my present husband.

ROSOLOWSKI: OK, I misunderstand. What was it like having that two profession household, where your professions overlapped? Was there a synergy there? How much was work a part of the electricity between you?

EISENBERG: Well, we talk occasionally about cases at dinnertime, with the children, they were curious, which I loved the work Manfred was doing, because he would come back from the jail, and he had a marvelous sense of humor, as well as a great deal of dedication to his job. He would find, during the day, something that happened that was funny with one of the people in the jail. So it was some discussion. I was worried at one point, that he was talking about murderers and, you know, will that influence my children too. This is a pathology, plus, plus, plus, in most cases, not all of course, but it didn't seem to have much. And if I had an interest. We didn't talk a lot about patients. We might talk about the challenges in psychology. We would have guests, our colleagues that came from other towns. No, I don't think that it was the center of our conversation, particularly when the family was together. Then, when we were alone, occasionally, we talked more about those things.

ROSOLOWSKI: When did you move to Boston? [03:05:00]

EISENBERG: In 1967.

ROSOLOWSKI: And how did that come about?

EISENBERG: My first husband died.

ROSOLOWSKI: What year was that?

EISENBERG: The year before. He died of a very short illness. This man, that was one of my closest friends; we drove together, to work, and we did talk about cases. He and his family and my family were good friends, the two couples and their children, and we went to the same swimming places, and we had picnics together. And Leon and I would drive together to work.

ROSOLOWSKI: This is Leon Eisenberg you're talking about.

EISENBERG: Mm-hmm. We would drive together to work because his house was on my way to Johns Hopkins. By then, I was fully involved in practice and my children were in high school and out of the house for the whole entire day. We had personal conversations about patients. I liked being with him and vice versa. I also liked driving him to work because he was the professor of the child psychiatry and the director of the service, and therefore, he has a parking space and I didn't have one. (laughter) So if I picked him up and park in his place; otherwise, I will have to be looking for an hour and pay a fortune. So I liked driving with him and sometimes, we will drive his children to school on the way over. His wife was also a physician, also at Hopkins, but she had other schedules.

Then, as we were very, very good friends and Manfred died, and that was very traumatic and the most desperately unhappy period of my life. When I was telling you about being a child and not being beautiful and not feeling beautiful, it was nothing in comparison with my collapse when Manfred died. But before that time, I learned, from Leon, that he and his wife then, were having great difficulties, and she wanted a divorce and he did not give her a divorce because he was and is a devoted father of two children that were 12, 14, at that time. I never knew the details, because although we were friends, he was respectful of the privacy I guess, and there were all kind of nasty things, which I heard only from him and not from her, so I don't know what those were.

So, he moved out of the house about a year before Manfred got sick and rented a house two blocks from the children and saw a lot of them. He was miserably unhappy. He was so depressed that he will come to all of the friends' houses for dinner and he will come to our house for dinner, to see what a happy family was like. We joked with my children, that loved him, liked him, and he just was miserable. Anyway, he was living in this apartment and looking for the weekends, when he had the children. His

separated wife yanked the children, once he moved out, and took them to Puerto Rico, so he couldn't see them more than once a month and he was even more depressed. It was very, very hard for him.

Then, when my first husband died, a few months later, he began to talk with me and said for the first time, he could see me as a woman. We were close friends, he had no romantic or sexual fantasies about me or I didn't have them about him. It took me as a complete surprise, but I liked him a lot and he was a good friend and my children adored him. In fact, when we invited him for dinner, when he was still with his wife, my children said, [03:10:00] couldn't we have Leon and not have Ruth, she's a pill. We couldn't do that and I didn't want to because she was pathetic, but she wasn't a bad person. Very bright.

Anyway, Leon began to talk to me and to fall in love and to this and that. So, I had a serious problem then; I was in love with two men. I was falling in love with the one that had been in love with another woman, and I was feeling alone. My younger child was accepted here at Harvard and was going to be leaving for college. I had a big house. I

had lots of good friends and lots of -- but the prospect of the future was very frightening to me, so we go together.

ROSOLOWSKI: What about the prospect of the future was frightening?

EISENBERG: Being alone. Being alone. I was 46, 47 years old. I always had somebody near me or a husband and before, lovers, and I was frightened and I couldn't face it. Anyway, I began to fall in love with him and at that time, he had been offered many jobs. He's very accomplished and very bright and very successful. He had turned all the jobs down, because he didn't want to go to Stanford and lecture the same old stories, and many other jobs. And then they offered him to be a professor at Harvard and to be the chief of psychiatry at Mass General Hospital, that was by then, the best job anyone could get. I felt he had to take it. I really felt that it would be - - he'd done all of the climbing up at Johns Hopkins he could. He was ready to do something else.

ROSOLOWSKI: Did you discuss the decision? Was it a joint decision in a sense?

EISENBERG: Oh, yes, very much, though he discussed it more than I. He wanted very much for us to be together and by then, I wanted to be with him too, very definitely, oh yes. He was worried because I had to leave my license, I had to

sell the house, I had to leave my friends; a life that had been for 20 magnificent years. My first husband, Manfred, and Leon, were close friends as well. There were differences, social and economic and intellectual, but they respected each other and they liked each other. And so it was a very hard decision and he was more apt to stay at Hopkins so I wouldn't lose all those other things, and it was a challenge for him, because he was to be the whole chief of psychiatry, not just of child psychiatry. It was a big administrative job. So, he decided that he will take it, and that's why I moved to Boston, with him, the day after we got married. We decided to get married because we didn't want to live together because it will be a bad example for the children. (both laugh) Early adolescence and yes, in those days, that would have been a bad thing for them, to make commitments they were not ready for. So, we got married on a Saturday and on Monday, we moved to Boston.

ROSOLOWSKI: And what was the position you took up when you moved?

EISENBERG: That he took up?

ROSOLOWSKI: That you took up.

EISENBERG: I didn't have a position.

ROSOLOWSKI: Oh, you didn't.

EISENBERG: That was the only time in my life ever, ever, ever, I applied for a job. I was peddling my wares, going from place to place, please give me a job.

ROSOLOWSKI: So tell me what that was like.

EISENBERG: Terrible.

ROSOLOWSKI: And it was 1967.

EISENBERG: And it was terrible, just terrible. I only know that, talking about schools, I wanted to work with college students, for a variety of reasons, I don't have to go into that.

ROSOLOWSKI: Would you mind going into it?

EISENBERG: No. I can go into anything you want. I just don't know whether it will take too much time.

ROSOLOWSKI: Well, I'm curious.

EISENBERG: I have seen many students in my private practice that were Johns Hopkins [03:15:00] or Goucher College students, and I realized that when they were very bright and were motivated, the job was much easier. By then, I was tired of seeing small children and crawling all over the playroom and trying to get fears. I just like more of the verbal, intelligent, well-motivated patient.

ROSOLOWSKI: Well, I was curious of just dotting that I, because earlier you had said that you had decided that you

didn't want to do real pediatric psychiatry, and we never got to some of your reasons for leaving that.

EISENBERG: My children are the ones who tease me, my sons. I shouldn't be talking about children any more. My sons said that I was curious about them, so I started in pediatrics, then I went into adolescent psychiatry, then to an adult psychiatry, and they say when are you going to geriatric psychiatry, because they said that part of my -- and it was that interest. I knew that era and the group of friends, and I was very connected with all of that. For some reason it was easier, but I wanted to. I didn't want to start with -- but I couldn't get a job. I couldn't get a job because I didn't have a license in Massachusetts, and when my new husband, Leon, came to ask for a reciprocity, they practically dusted his chairs because he's the chief of psychiatry at Mass General Hospital, and a famous man, and here comes Carola, new Eisenberg, and she doesn't have a license here. So, I thought I could go and do some testing or something. So I went first, to the chief of service, an anonymous college that should remain unnamed, and he greeted me, when he saw me, because he had known me, and began to tell me how sorry he was about Manfred's death. He had me in tears in the middle of the interview, and I was going to go and apply for a job. It was just

awful and at the end he said to me, there are too many psychiatrists in Boston. I think you ought to take a new residency and go for something else, like pediatrics or OB/GYN. I said, thank you for the advice. I cleaned my tears, wiped my tears, and when I went home, I said to Leon, "I'd rather sell clothes in Filene's Basement than take the boards again." That would have been the third time; in Argentina, in Maryland. I just couldn't do it. I didn't want to do it. And then I visited all the colleges. They offered me a job at the place I'm talking about, eight men and one woman. That man was a terrible man, the chief of service. They were offering me a fantastic office, I don't know what floor, overlooking the Charles River and beautiful, and windows, and a great salary, which we needed; we have four kids to put through college. And an interesting job with college students. But he wanted to know, how did I come to Boston, so I told him the truth, what I just told you. I just married my husband and I moved to Boston. "And who's your husband?" So I told him my new husband's name, and then he began to talk, and does he have children and do you have children? Yes, he has two children, yes, I have two children. "What happened to his wife?" I said, they were divorced. And then, "What

happened to your husband?" By then, I've had it up to here and I said, "He died a natural death, I didn't kill him."

I was so angry at him because he took me all the way to there. And I am making it brief to you because he asked me. The other man kept saying, you already asked Dr. Eisenberg that question. He wanted to get at the dirt of what happened to Leon's marriage. I was not about to tell him, it wasn't my role. Anyway, I had a miserable time. But then I went to MIT and a man that has remained my friend ever since and now lives two blocks away from here, and he and his wife I adore, he offered me a cup of coffee. I never get the job, I never get anything from anybody, except my new husband. He offered me a part-time job.

ROSOLOWSKI: And what's his name?

EISENBERG: Snyder, Ben Snyder. He was wonderful and he gave me a part-time job, because this was when the students were revolting, with the Vietnam War and all the other things. He offered me a half-time job. [03:20:00] At the end of the month he said, "Everyone likes you and you're doing a wonderful job, would you like a full-time job?" I said, would I want a full-time job? I need one. So he gave me a full-time job and I stayed, as chief of psychiatry there. Not chief, excuse me. As a psychiatrist, for three years,

but I couldn't write a prescription because I didn't have a license. So I had to go and ask a colleague, do you mind? I felt so diminished and so upset and it seemed so unfair. I was an assistant professor there, about to move up to who knows what.

ROSOLOWSKI: This was at Johns Hopkins.

EISENBERG: At Johns Hopkins. I had to ask somebody else. Anyway, but they were very nice to me and I had a wonderful -- so, that's how I came to Boston, to follow my beloved, now 40 years ago.

ROSOLOWSKI: What was the composition of the staff at MIT in the service where you worked? What were the proportions of men and women and how were you treated as a woman?

EISENBERG: Among the staff, there were fewer women of course, than men, but again, they treated me very well. But I realized among the students, it was 6 percent of women students and they were going through difficult times. I was the dean of students. I had to walk for half a block to find the ladies room.

ROSOLOWSKI: Oh, really?

EISENBERG: Imagine the students.

ROSOLOWSKI: Can you talk more about that atmosphere at MIT?

EISENBERG: I loved and I continue to love MIT, but it was not a place where women were coming. To start with, they

don't do as well in math and science, you know that, and they didn't have the grades and they didn't apply because they were afraid, and they didn't want to be one of the few, and who knows what else. As far as I know, it was not discrimination between the applicant pool and the accepted students, but women and minorities were such a scarcity that the other students will turn around to look when one went in the corridor. So, I started then, my feminist activism, because I realized the women students, and I was the dean of students, they needed -- I started sex discussion groups with men and women. I have done some group practicing at Hopkins and I love the group interaction.

ROSOLOWSKI: I'm sorry, I didn't realize that you had done some of that at Hopkins as well. Could we backtrack just a bit and talk about that?

EISENBERG: Just, I learned from a man that started group therapy at Johns Hopkins, named Jerome Frank, who wrote a fabulous book about his experiences in psychiatry. He invited me and so, I'd watch him doing it with one-way mirrors, and then one day he said, "Well, are you ready to do your group therapy?" I said, mm, I don't know whether I can, and he said, "How do you think I started the first group?" I said, I guess you are right, so I started doing

some group therapy. And then I did a lot of one-way mirror interviews of patients, with students on the other side of the mirror. So that's when I got started, but I feel very comfortable in dealing with groups, so I started at MIT, group discussions.

ROSOLOWSKI: You mentioned the dean of students position.

EISENBERG: I crossed out affairs in CV entirely, because MIT was dean of students.

ROSOLOWSKI: Dean of students, OK, because I didn't want to not get on the record that you were the first woman dean of students at MIT, and you were appointed to that position in, let's see...

EISENBERG: Seventy-one.

ROSOLOWSKI: In '72 I have, is that correct?

EISENBERG: Seventy-two. Yes, I'm sure it's '72.

ROSOLOWSKI: So it was '72 to '78. OK, now how was it that you were selected for that particular position?

EISENBERG: You know, all throughout this interview, I have a feeling that I am very comfortable talking to you and so happy that whatever comes to mind, I don't put the brakes, which is very much my way of interacting with people. But in addition, that I am being both lighthearted and humorous about situations that deserved another kind of things, [03:25:00] and I mostly, I felt all the way up to these

questions that you know, this is for the women's oral history, and I don't sound like a defender of women's rights and I was, as I hear myself speaking, but that's because either I was insensitive or because I just wanted to get to one goal and another goal and another goal, and I didn't pay attention. I just felt like explaining that. How was I -- yes, to be the dean of students. I was so happy working at -- first of all, I was very happy that I was working, because I needed to work, because I felt like I had the strengths and the abilities to do good work. Because I was used to making as much money as I wanted, at Johns Hopkins, and there I was, a dependent wife, because I didn't have a job. I hated that. We needed the money. As I said, we have four teenagers, all screwed up at the time with the Vietnam War and with this and the other, and with their adolescence, and the divorce of their parents in Leon's case, with the death of their father in my case. There were problems.

I sold my house, one of them, to a colleague in Maryland. I gave it away. I think I will show you the picture of that house. But I just had to get out, I had to be with Leon and I wanted to be with Leon, and we had to come. It was closing the door to my previous life. So, I came and I

worked as a psychiatrist and I loved it. It was the first time I was in a group practice. I was on call, I don't remember how often, maybe four weeks or maybe every two weeks, at nighttime, and they would call me at three o'clock in the morning. Not all of them. Some of the kids were in serious drug reactions and they were smoking and inhaling and doing, you know, what the kids were doing. And they were protesting and they were taking over one office and another office, and some were very sincere in their commitment, some did not want to go to Vietnam and they had to hold on to their status as students, but they didn't want to be students. There were lots of problems. But I loved, the colleagues were wonderful. You wanted to ask me a question.

ROSOLOWSKI: I wanted to ask you two questions and one of them was about your working relationship with your colleagues.

EISENBERG: Wonderful. I loved it. At the beginning, I used to call one of them, that became my friend, if I didn't know something, because I was new to the institution and new to the anti-Vietnam movement and new in Boston and new, new, new, new. I would call him and he was very supportive and very nice. I had a very good relationship with all of them. I'm trying to think whether there were women in the service. Yes, later on. One was there, she's

a psychologist, she's still one of my closest friends, and she used to leave for her little girls. Now, a professor of something, and the other one. And I used to be meeting her in direct conference time and we would look at each other. I had lunch with her last week in fact, she's wonderful.

ROSOLOWSKI: If you don't mind, I'd love to just ask you about that, because --

EISENBERG: Why did I do it.

ROSOLOWSKI: Yeah. And let me tell you why, because having spent my own bit of a stint in academic situations, I've been in faculty meetings and, you know, professional ensembles of people, where if a woman brings up the issue of her family life, it's like someone has flooded the room with cold water. And so, I was just trying to visualize a woman in the 1960s or the 1970s, doing this very feminine activity in a room which is largely populated by men. How did people respond to this and why did you do it?

EISENBERG: Well, I did do it because it was my equivalent of smoking, you know, and I didn't smoke. I had my hands busy. But mostly because some meetings are terribly boring. Sitting down in the same position for six or eight hours is hard, and that was -- what was the reaction is interesting, because they liked the feminine aspect of me,

all those men, and at the same time they thought -- and I thought [03:30:00] they would think this was not very professional, because the few women they had known, the ones that didn't act or behave in feminine ways. Here was this strange Jewish girl from the pampas embroidering, in a position of power, who is she? So, I don't know how they felt. I have only one exception and I'll tell you later, when I knew how he felt, but that was the exception. Two exceptions. But most of the time they never said anything. The first time I went to academic council, because as dean of students, I was the first women in the academy, because they had a temporary librarian that preceded me, but she was temporary, and until they named the librarian. We would meet once a week and they will send the night before, volumes of study papers and things I had to read and learn quickly.

I'll tell you the story of what it was like being -- we will meet from eight o'clock in the morning, with the provost, on regular appointments of faculty. Me, deciding whether that person deserved or not, a full professorship. And then we would meet in academic council from nine to three-thirty or four. It was all these hours sitting down

in the same place and I had to do something, so I did and nobody objected.

How did I become a dean? After three years of glorious work and happiness, my professional role opened vistas for -- new vistas.

ROSOLOWSKI: How?

EISENBERG: I was working in a group practice. It wasn't just my decision. I was hearing colleagues. The other ones were conferences and they were important, but in here, it was a sense of unity and wonderful, particularly at the beginning. Then it sort of changed a little bit, because he moved up into something else. But it was a nice job and I was in the midst of a university, as a central part of the university, because we were seeing not only students but faculty members and workers. They were mostly students. I loved working there and I loved being in Boston, and of course I loved Leon and being with him. We rented a little house because we didn't have money to buy a house here, because we didn't know the difference between Baltimore and Boston. When I first heard the numbers, because I came ahead of time to look for a house to buy, when I heard the numbers, I still have a handicap in my brain, that with numbers and with spelling, I have to spell

it back into Spanish when I hear, and then back into English. I thought that was me hearing the numbers and I wasn't. So we couldn't buy a house, so we rented a little converted garage, lots of stories about that house. The children were all at the universities, mine, and Leon's were with their mother in Wisconsin. She became a professor at Wisconsin when she left Puerto Rico.

ROSOLOWSKI: And was working with older people and the issues that presented themselves at that particular time --

EISENBERG: Who?

ROSOLOWSKI: When you were working with patients who were college students and adults, was that everything that you expected in terms of changing the way you were practicing psychiatry at the time?

EISENBERG: Not particularly. The big change was that that was in a group practice, and I wasn't working with patients alone, and that I was working mostly with adults and not with children. I felt very comfortable and I think I did a very good job.

ROSOLOWSKI: I read a quotation that you enhanced the students well-being, and it was in fact that affect that you had on the student population that you came in contact with, that led to you --

EISENBERG: This is what I felt when I became a dean, but in answering your question half an hour ago, why did I become a dean. Well, the president of the university called me at his office at five o'clock, after a day's work, and on the way over, I wondered why he was calling me, because I couldn't figure it out. I had seen him at a distance, respect him, [03:35:00] I liked him, and I thought he was doing a marvelous job as president of the university. Up to then, talking about differences, I became intrigued by where the seat of power was within a university. Who said what to whom? Because I used to go to the dean of student's office, and it was a large group of counselors, many of them with PhDs in counseling, and we will discuss patients that we had in psychiatric department that were having some difficulties, and they had gone to the counseling services; academic difficulties mostly. They became very intrigued by that, I mean became very intrigued by the role of women in there and I started this group of discussion of women.

So when the president called me, that I liked so much, I couldn't figure out why he was calling me. I thought maybe he's going to tell me I parked in his parking space. I have problems with parking, you see, because we were in the

same parking area. I'm going to tell him I had a patient that was an emergency and I had to park there. So I had the thing figured out and when I arrived, he greeted me. This office, I've never been, an enormous office full of incredible diplomas and things. He said, "Won't you sit down, Dr. Eisenberg." And then of course, I was happy to sit down. I waited and he told me what he was going -- he said, without much preamble, "Would you like to be the dean of students?" And I looked and I turned around and said, "Who, me? Why do you pick on me?" I am so happy in the psychiatric department and my image, professional image, is of a physician. You don't want me as a dean of students. I said, "I don't even balance my checkbook. I don't know anything about administration." And he said, "Well, you will learn fast, from what I've heard about you. Think about it." I said, "How much time do you give me?" Literally asked him that question. I couldn't say no right away. He said, "Take as much time as you want." The president doesn't know he's on his way out. I said, "Well answer my first question, why do you pick on me?" And he said, "I think you can help to humanize this place and I need you." How do you say no to a man like him when he tells you that?

ROSOLOWSKI: What was his name?

EISENBERG: Jerome Wiesner. He had been special assistant to president somebody, in science. He was a very famous man, a pacifist, activist, a kind of marvelous man, that became one of my best friends, he and his wife.

ROSOLOWSKI: When he said he wanted you to humanize the place, what did you think he meant by that?

EISENBERG: Be less rigid and a little bit more humane and not expect of the students. It was an extraordinary effort, to go to that school and graduate from that school. There were no sights where the students could do other things that would have been distracting or pleasurable. Men that wanted to -- other men, young men, to be like them. That was what I thought, and some of it I have heard during the three years in the psychiatric department, the ones that were having trouble because they decided to take a semester off because different reasons. Their advisors wouldn't give them the time of day, let alone giving them permission. That's what I've heard.

ROSOLOWSKI: So how long did you take for that decision?

EISENBERG: I want to tell you something else but I want you to disconnect the machine.

[PAUSE IN RECORDING]

EISENBERG: I took two or three weeks or a month or whatever, to decide that I will take it, but I was very ambivalent. I did ask Dr. Wiesner, as I used to call him then, "Will I be able to continue seeing patients, because this is my real love, clinical work." He said, "Of course, if you can do your job as a dean and you want to see patients. You cannot leave them in the middle because you have taken another job." [03:40:00] So I did do that. I would see patients early in the morning, before my office opened and the secretary is there. And in the late afternoon or evening, I would see patients. I decided to try it, but I didn't know whether I could do it. I really had serious questions, because I've never been an administrator. I knew I would be part of academic council that was making decisions as whether to open a new section, and I will sit with all these men, every one of them, at meetings once a week; the president, the provost, the chancellor, to whom I reported, and all of the deans of the different schools. We were about 20, 25 people, and yours truly.

The first or second time, they sent those pages with all those numbers, and I didn't open my mouth of course. I just opened my bag of embroidering, or knitting on the floor, and then the second session, I put it on my lap, and

the third I thought well, if they don't like it too bad, and I began to -- but I was looking at the numbers the night before and then I heard the discussion, and I knew what they were going to pay me, because they told me about my salary. So I figured out about how much all of that cost around the table, and they were discussing something that was \$500,000, and I thought 25 people and the salaries they are making, we are wasting a whole day discussing an issue. And not until I went home, I didn't open my mouth, I looked at what the president was voting for and then I voted like him, which I didn't like to, but I couldn't understand why such a long discussion; pros and cons. Then I realized that I did not notice that (inaudible) said, omitted, three zeroes. So it wasn't \$500,000, but there were three zeroes more.

ROSOLOWSKI: Yeah.

EISENBERG: It was a fortune they were discussing. So the following week, I had to be honest and I told the chancellor what happened and he said to me, "Well, maybe you ought to learn something more about these things, would you like to go to Harvard Business School? We'll pay you, for the summer, we'll give you a leave of absence, we'll pay the tuition. Think about it, don't say yes or no, but you will learn." They had a special program for presidents

and deans of universities. So, I went to that school and what was strange was that I had to live in the dorm, and not with my husband. We were 20 blocks away, but they would not let me join the school. So I did do it for six weeks and on Saturdays, Leon will come and take me on a date. I had flowers in the house and ordered dinners in a restaurant. (laughs) It was like reliving romance in the old fashioned way. Once, I went there, I understood why they had to have that, because you were in groups, and we started five-thirty or six o'clock in the morning, reading the cases they were going to present, and then general discussions until dinnertime. I learned a lot and by the time I went back, I felt more competent about the decisions I was making.

But in one of those first -- going back to your question of how did the men feel when I was knitting or embroidering. There are two things I have to tell you. One is that I was sitting next to the then dean of the business school. A very nice man whom I was sitting next to just accidentally, or maybe we had assigned -- we had assigned places and little cards, yeah, and I was sitting next to him. Quietly, in the middle of a presentation, somebody was making -- he said to me, "You dropped a stitch." And I

turned to him and I said, "How do you know that?" He said, "Shh, nobody knows, here I am, embroidering in the closet at home, I embroider, I made a -- I don't know what it was. Only at home in the evenings, because if I did it here, that I do that. He didn't tell me more [03:45:00] but I knew what would happen. Is he straight or is he...? And he actually had a lovely wife that I got to know very well afterwards. He happened to like it, he found it very relaxing. That was one story.

The other one was that I embroidered (chiming) at MIT first, and then at Harvard Medical School, two enormous seals, with a background and with banjara stitches, with little holes and beautiful colors. I embroidered that and I put it in my office, but I decided -- you don't know the seal of MIT, but they had two men, whenever they started MIT, putting their elbows in two columns; one looking in that direction and the other one and it's *mens et manus* that says big, *mens et manus*. And I thought that in more than a hundred years, they ought to be talking to each other, so I reversed the men and put them looking at each other, and embroidered and put it. Nobody complained. The newspaper, they had an article on that, what I dared to do, and then one student came and said, "I embroidered the seal

too, but I did it the old way, would you like to see it?" So he came and showed me his and I was so pleased, I said, "I am so glad because it's only women embroidering and I'm glad you are doing it." And then he said to me, "But I am not straight, I am a homosexual and I love all of the women's things." So of course I didn't tell that and the article didn't mention, but they had the two of our pictures at MIT, with our two seals. Mine was larger than this other one. Those were interesting years, interesting years, at MIT.

ROSOLOWSKI: I wanted to talk to you about the climate and the gender issue, about the dean's position. Were there other women deans at the time?

EISENBERG: No.

ROSOLOWSKI: You were the first dean, period.

EISENBERG: Yeah.

ROSOLOWSKI: At MIT.

EISENBERG: And remained the only one. I think the person that succeeded me after seven years became of course, a dean too, and she not only was a woman, but she was an African American woman; very able and I met subsequent, several times in Washington. She had left MIT. A very impressive woman. I don't think there were other women while I was there.

ROSOLOWSKI: What do you think was the larger significance of selecting you and selecting a woman at that particular time?

EISENBERG: I think that to me it was very clear, Wiesner was a magnificent human being and he wanted to promote women, very definitely, and I learned that in the years subsequent to my appointment. It was, at the time, after the war, where women were given a chance. And his wife told me afterwards that the day before, the woman that was an associate dean, at Yale or at Princeton, had been made a full dean, and that Wiesner was furious, because by one day she beat me, or Yale or Princeton beat him, because he wanted to be the first one to do that. He was very much in favor of women. He really wanted to bring more women and more African Americans and more of the people that had been excluded for important positions, and so was the chancellor. A marvelous man. I got to see a lot and work with wonderful men.

ROSOLOWSKI: So what was your role and what was your mission as dean of students?

EISENBERG: I was to create new programs for the students. I was to name all of the housemasters for the different houses. I was to supervise the fraternities. I was chief of the counseling service. I was to go to academic

council, I was to go to faculty meetings. [03:50:00] I was to get the sense of where the students were at and try to divert them in directions that I felt that could be helpful to them. I was to create programs that were distracting to their main goal and reminding them that that was the main goal. I was to supervise the athletic department, and that created laughter at my home, with my own kids and my husband, because I didn't know the difference between one thing from another. But I had a marvelous director of athletics that reported to me. So I knew about their budgets and their needs. Many people reported to me and therefore, I knew what was happening in student life and I could try to correct or help, or to increase the availability of problems that I felt would be helpful to them. And I had not only the responsibility for the undergraduate school, but in somewhere, to the graduate school, although there was an associate that was quite good, that was doing the graduate work. There were like 8,000 students all together.

ROSOLOWSKI: That's amazing. So what was your personal agenda as you took on this role? Were there particular problems at MIT that you felt you really wanted to attack as a dean?

EISENBERG: There were problems that were created while I was a dean and I tried to solve and I helped solving. There

were no particular problems, but I kept like a goal that Wiesner gave me in that interview when he said, I want you to help humanize this place. It was the school of engineers and all of the other schools, many others, for the arts, for business school, for many other schools, it's known, and the people that apply have the engineer's mentality. It's a gruesome experience from that point of view. Medicine is too. You have to work terribly hard in order to succeed. But MIT had the reputation of being that way, so the people that applied were the science winners for the whole state and the valedictorians of their class and the inventors that had done this work and that work. It's just amazing, what the school is like. But there were also many disturbed students, and I don't know whether the fact that I was a psychiatrist was a factor in Wiesner selecting me or not. I don't think so.

ROSOLOWSKI: I wanted to ask about that idea of the temperament, because you see a connection between the temperament at MIT, in the engineering school, and the physician's temperament. And I think some of it you've already talked about, but I'm wondering if you can add to that. Some of the things you said before is that there's this idea of rigidity, and an idea that you're not supposed to take any time off, like you're on a very

regimented path, that you shouldn't really take any pleasure, in a sense, like you have to feel guilty all the time. I mean, I'm adding to what you said here but this is what I heard you say, that if you take any pleasurable time, then you ought to feel guilty about it, because it's really all about work. I'm wondering if what I'm hearing is correct, and also if you had anything else to add to that idea of that scientist mentality that was dehumanizing in a certain way.

EISENBERG: I don't know how much is temperament or how much is a mentality or how much the expectations of the professions, that made the people that want desperately to become whatever it is, a scientist or an engineer or whatever, has to adjust to those demands, and they are in some ways quite similar. I'm hoping that in medicine, there is also an element of human compassion, although like in all careers, it depends on the individuals that go into engineering or medicine or something else. I think there are the demands that are being made [03:55:00] on these people that to start hardworking and obviously very bright, and expectations are enormous. Not to even talk about the financial obligations that parents or the students have to make in order to be able to graduate. So they have to -- if they are not studying for an exam, they have to look for

jobs somewhere else. That was also at MIT and it's true in the medical school, although there is no time for jobs there really. The number of loans that the students can take become gigantic. For some families, the parents, in their whole life, had not made as much as one of these students will have to pay for one year. Yeah.

I don't know how much is the temperament, that's part of it, of an ambitious, intellectually honest and hardworking person, they're desperately ambitious or not, wants to excel in whatever he or she does. That becomes an enormous stress for students.

ROSOLOWSKI: What were some of the things that you did during your tenure as dean, to help ease that situation for the students?

EISENBERG: First of all, I selected kind, educated people that love young people, and I put them as housemasters, and they will select immediate tutors and the people underneath. But I was really careful how I selected, because if somebody was smoking marijuana, then one might decide to take something else, they will have known that student and they would have been more supportive before something dreadful happened. I knew the faculty well enough, that I knew he -- they were all men. We didn't

have enough women faculty at that time. Later on yes, I appointed one for the women's dormitory. That was very important, because then, I would have a meeting at our house, a dinner meeting with all of the housemasters, and we would talk about the common problems. Just common problems, not individual students. And they would have dinner meetings with the students once a week, and the students that wanted could come, the ones that did not want to, they didn't have to go. And, if there was one that was too seclusive in the room, they will try to connect with them. That problem existed, I didn't make it, but I think that I was good at picking out the good housemasters. Some stayed for 20 years, they were so very good.

ROSOLOWSKI: Wow.

EISENBERG: Yeah. Sacrificing a lot of their freedom and a lot of their time, and some had very comfortable physical apartments and some were not. They have a stipend for food but it wasn't all that large. It was a very time consuming job. In fact at one point, Leon was considering to become a housemaster at Harvard College. That's another story and I'll tell you the sequence to it, but in continuing with the question you asked me, for what did I do, I started groups, discussion groups, with women and men, and I

started with sex discussions with one group and then those were enlarged.

ROSOLOWSKI: Can I ask you how did those work, those sex discussions?

EISENBERG: They were very good. They were very good.

ROSOLOWSKI: Were they about sex, meaning sexual relationships, and not just gender?

EISENBERG: Whatever they wanted to talk about.

ROSOLOWSKI: I see.

EISENBERG: And whatever questions they had. I started a series of lectures that became so oversubscribed, that we had to move them to the student center with another woman, and loudspeakers in another room, because the students were so busy succeeding that sex was something that was in their head but they didn't have time for.

ROSOLOWSKI: So is this a series of lectures on sex, on sexuality?

EISENBERG: On sex, yeah. [04:00:00] Interesting enough, I got big names to come.

ROSOLOWSKI: Who were some of the people who came?

EISENBERG: The students.

ROSOLOWSKI: No, I mean the lecturers.

EISENBERG: If I can remember. Well, one, I asked my brother in-law, ex-brother in-law, because he was the Director of

International Planned Parenthood, and he had worked very heavily with Planned Parenthood and with an institute where they were doing all kinds of research on sex. He was a magnificent speaker.

ROSOLOWSKI: What's his name?

EISENBERG: Alan Guttmacher.

ROSOLOWSKI: OK, you mentioned him earlier.

EISENBERG: Then I got Margaret Mead to come and talk about them, anthropological studies. I brought a professor from Yale that was wonderful and very interested in college education, of sex, and he gave a magnificent lecture. There were two more. I don't remember who they were but they were very well-known and very successful speakers. With the program that I got with the group of students, the sixth one on interpersonal relations among couples.

ROSOLOWSKI: Why did sex become such an interest for you, that you wanted to make it public like that?

EISENBERG: Because I realized that the students did not know, and because they were exposed -- let me just finish about the sixth lecture and then I'll go back to that.

ROSOLOWSKI: Sure.

EISENBERG: I couldn't get the speaker to talk about that, I absolutely couldn't. I don't know how many people I tried. So, I had a group of students, secondly, because everything

I did was with a community of students, and one of them said, "Why don't you bring a writer from California, you know, they make movies about sex, they write about sex." All these famous writers, a famous writer will bring a large number of students. So I called him and I'm sorry to tell you, I don't remember who that was, because I would tell you otherwise. I called I'm and I described what I just described to you and he said, "Are you kidding me? I am in my ninth marriage, (laughs) of course I cannot talk about it." So we never had that lecture. I called psychiatrists, I called...

The students organized one the following year and I don't remember who they got. Why was it so important? Not only that the students were so busy achieving, achieving, achieving, to make it there, but there were some people that were exposed, living in a double room, to sexual activities of a roommate, where they haven't even heard the word sex. They were upset and they were worried that their parents would -- and one of the dormitories had showers for men and women, bathrooms that became coeducational, during my time. And of course some of the parents got terribly upset and they will call their kids. I thought it was time for people to talk openly about something that most

everyone that's lucky does, and then talk a little bit -- to talk openly about it and not to make it a taboo subject. These kids were, you know, people that came from little towns, in Baptist churches, and all of a sudden they were on their own for the first time. I don't mean to pick on Baptist churches, erase that please, because there are plenty of people that feel that same way among Jewish and Catholics and everyone else.

ROSOLOWSKI: Well, I think every religious tradition has people who can be sheltered.

EISENBERG: That's right, but I didn't mean to pick on Baptists. Anyway, I felt that was needed, so I did do that. I had times that were very upsetting as a dean and it's connected with sex. For instance, one incident, I came to work on a Monday morning, after a relatively quiet weekend, I was the dean of students, and everyone was buzzing around my office. The secretary... I supervised 25 or 30 people with PhDs, with master's degrees, and everyone had a job and everyone had an office and everyone was doing their own work, and this time everyone was in an uproar. So, I asked what happened and then they showed me, there was a student newspaper that [04:05:00] was called, not *Tech Talk*, which is the official newspaper of MIT, also run by students, but it was very -- I don't know how to

describe. I don't remember the name. I cannot believe I forgot but I don't remember.

Anyway, it was an offbeat newspaper and in the front page of the newspaper it was a big square with two names of two women students, and then 20 subdivisions, like a parallelogram, with the names of 20 lovers they have had. And then they had from that, after the names of the lovers, they were all MIT students, from there on, they had like a measuring, from one to zero, things like deserves a zero, being the worst. There were a few tens of course, but there were zero and one and two and the divisions of how they did perform, and the names of the two students, two women students. So I called them in right away, because I thought this is some male chauvinist pig that's abusing those women. So they're working with a man, a very short little man, and one was like Peter Rabbit, with all... Anyway, there were three physically pathetic characters. Maybe I should cut this or not describe these three people. But my first question was, "Did you do it?" Yes, they did do it. "And how did you do it?", I asked them. Well, we were smoking marijuana, the two of us roommates, and we began to talk about John or Peter, and we discovered we had had very many lovers in common. So, with the marijuana,

feeling very happy, they began to say what they were like as physical lovers, and we were having a marvelous time. We were laughing away, smoking more pot, and then we began to do that, and then this man drawing, (laughs) the little drawing. You'll have to modify all of this, please. He came in and we showed it to him. He was the one that got a zero, and he laughed his head off. He said you were right, at the time I couldn't because... whatever he said.

So they laughed more and he smoked more pot with them. The following morning, the women were ready to go to class and he came in, in a rush and said, you know, I didn't see it very well last night because of the pot, could you give me a copy of it? And they said sure. They were good friends. They gave him the copy and he took it to the newspaper. I was so furious at him. I was so angry at him and they were so pathetic, and the reaction of the two of them, I had to do something. I was getting calls, one from Florence, from a father who said, I was ready to send my daughter to MIT, if this is the kind of house you run, I am not going to let her go. That's a house of prostitution. I'm the alumni, would stop contributing to the alumni fund, because is that what the new woman dean is allowing the students to do. Of

course it was happening before but they did not notice, it wasn't because I had --

I had to send them to committee on discipline, because I could not do anything else, because the fathers, oh. One father came all the way from wherever it was, crying, and he said, it was my son's first sexual experience, he'll be ruined for life. And I felt so sorry for that kid. He wouldn't be ruined for life, but he will have something to overcome. How often a young man gets so frightened that doesn't have an erection. So I had to explain to -- but I had like parents, I had alumni on the telephone. I had the president, my good friend, at the meeting -- no. No, no, no. I went to a meeting in Canada, of the American Psychiatric Association, and I called him and said "Jerry, for God sakes, where do you stand on this one?" [04:10:00] He said, "I want to close the paper." I said don't do that, you are going to -- you know, the First and Second Amendment, people coming after us, even worse. And of course it was in all of the -- through AP, the newspapers of America and some into Europe, and some into Japan.

What happened was very interesting, because the one that was tall, thin, and like a rabbit, poor thing, the parents

that came from the south and were very upset because they were a very religious family, withdrew her financial support altogether. We don't want to have anything to do with her anymore and we don't want her at MIT. It's up to her, we are not paying the tuition. So I had to negotiate, what I never did, except one more time, with people at financial aid, to allow her to continue her education. But she was terribly upset because of her breakage with her parents. The other one, she weighed like 250 pounds and she lived with cats and with a roommate, and they lived together, not in one of the dorms but in a separate place. They began to take pictures of her and she became very famous, sitting, with her cats all around. The other one, they wouldn't have any more to do with her and she was too withdrawn and upset. But she became a public figure all of a sudden and she was so pleased with all of that, and she continued studying at MIT.

I think the committee on discipline suspended them for six months or three months or whatever, but she graduated from MIT, thank you, and the other one eventually did too. And then I saw her working at Harvard Medical School, and she passed me by, had a shy smile, the tall one. And I smiled back and she never said anything, neither did I. But they

were very hard moments, because I had to make a decision for the whole university, and I was the responsible person, because I also supported certain activities, and that newspaper got some money from my office to publish, because they had more of them. In those days, they had... what's the word I want? More of the peculiar arts and the political rhymes, photographs that were strange.

ROSOLOWSKI: It's all the stuff that's on the Internet now.

EISENBERG: That's right, that's right.

ROSOLOWSKI: It was very experimental.

EISENBERG: Yes. They were, they were that. You know the student that was the man that was about to graduate, what happened to him.

ROSOLOWSKI: I was going to ask you about the zero.

EISENBERG: Well, we sent a letter. He had been already accepted to law school. I forget which one of the New York law schools. We sent a full letter with what happened, because I was so angry at this student for doing that to the women. And you know, they accepted him. We had already accepted them. Legally, we have an obligation and cannot withdraw, so who knows what he's doing now. Maybe he matured and stopped childish ha-ha-has. I don't know.

But there were very hard moments and what was hard about MIT for me, I was very excited and very happy, but it was an enormous amount of work. Evenings, when the students wanted to have me, because I was a dean and because they liked me and because this and the other thing, and I would go home seldom. I had one secretary and Leon had another one, that they became very good friends and what they would do, if they will get together on the telephone once a month or once a week, I don't know how often, and they will decide when we were going to eat dinner at home. And if anybody called, except if it was an emergency, sorry, but Dean Eisenberg is not available on that date. So we could see each other. It was an enormous amount of work.

What other programs did I start? Well, I was responsible for a lot of things. For housing, for fraternities, I already told you. For the administration of the big office, for the counseling service, for the housemasters, for the athletic department. Then, I would get all these invitations for, come, we are going today, [04:15:00] the women's -- so my husband gave me a silver bowl, named the Eisenberg bowl, and you know to weeks ago, we went to a dinner here, having nothing to do with that, and a woman said, "You don't remember me. I was a student at MIT and

my husband was the coach, and now I am the head of ophthalmology at the medical school hospital." I was so pleased. She has three children, et cetera, et cetera.

ROSOLOWSKI: Did you do anything particular to help enhance women's well-being at MIT?

EISENBERG: Yes. I gave them much more freedom than they had.

ROSOLOWSKI: What do mean, freedom?

EISENBERG: Well, they had a dormitory for women and the men had to be out at six o'clock, or whenever it was, or eight o'clock, I don't know. And I figured out, the women will do whatever they want and there's no difference between day and night, and why do they have to have those restrictions.

ROSOLOWSKI: So there were curfews for women at the time?

EISENBERG: Yes, when I went. They had the most beautiful dormitory that a woman graduate had given, an architect that became -- Ms. McCormick. That became the McCormick Hall. I tried to, every time I could help with the promotion of a woman that deserved it, I tried to help. I was part of a group, academic council, when President Wiesner called the chief of the mathematics department because they didn't have one single woman in the faculty. Why? Because they said because women come into mathematics later and we have fewer applicants, and in mathematics, if

you are not a well-known, phenomenally successful person at 24, you will not be it. Which was true. The women come late and they went to have babies, you know, the same old junk. We pushed him and pushed him and pushed him, Dean Wiesner gave information to him. The head at the time said well, there are not as many to select from, but they have this kind of fellowship, that's the equivalent to -- not like a Nobel Prize but a great, famous fellowship, and they made it. Why didn't you ask them? Because, sometimes they don't want to do more, because -- excuses.

So, what else did I do for women? Well, we had the discussion groups that were very helpful. Then they divided in subgroups and there were faculty women's groups and employees, student groups. What else did I do for women? I supported every time that I thought they had the right to be supported. I don't think any special programs for them. I made all of the clubs available to women. I think that I made all of the fraternities coeducational.

ROSOLOWSKI: Did you encounter resistance when you were, for example, making the clubs coeducational, or the fraternities coeducational?

EISENBERG: Mostly on the part of the parents than the faculty. The faculty, because I had the enthusiastic

endorsement of the president and the chancellor, sometimes maybe did not express what they would have liked to have, because I know, there were some that were very recalcitrant. I went to -- as I was dean designate and not a dean yet, they asked me to go to the alumni session during graduation, that they had before the graduation, and it was in what was then the athletic department, an enormous arena. They asked me to sit with the class of '40, 1940, and to me they were old fogies because I was much younger obviously. I was what, 50? And if they graduated in the class of '40, and this was whenever it was, I figured out how old they were by the time I arrived. It was a big stadium and flowers all over the place, I'm going to get up and make a great speech and I was nervous. So I went a little bit ahead of time, to see what the scenery was like, because I hadn't started being a dean yet. So, I look at class of '40 [04:20:00] and there was a table for eight or ten people, and I was (pause) -- the only woman and a couple at that table. So I sat with them because the other ones have not come in as of yet. I happened to sit next to the door, next to the man, and he said, "Eisenberg, Eisenberg, I don't remember you from the class of 1940." So I felt like a flat pancake of course, because he thought I was -- so that was the beginning. I

said, "Well no, I wasn't a student here." What were you a student of? So I said, "I am a physician," and I don't remember what I told him. He said, "Why are you sitting here?" I said because they asked me to sit with the class of '40. "Why?" I said, because I am dean designate and he said, "With all those stupid women coming to MIT, I guess they have to have a dean of women." I said, "No, I am a dean of all students, women and men," and he looked at me like if I was dirt under his feet and he did that to his wife and said, "Now, you sit next to her." I got up, I moved to the other side. There were incidents like this one.

ROSOLOWSKI: How did you process that? (laughs)

EISENBERG: He's a poor, recalcitrant old man, and he had the wrong impression. I'm going to be a dean whether he likes it or not. I didn't get terribly upset at those things, I really didn't. And that's what I meant earlier, maybe I am particularly insensitive or maybe I came from a place that was so bad, that's so much worse, that now, occasional things like these ones don't upset me as much, because for all of the bad things that have happened and are happening to women, and which unfortunately continue to happen. We have made progress and I have to acknowledge that. What I did do, it wasn't just MIT. In the medical school and NIH

and other places, any time they asked me to do anything for a woman or any time I had an idea that was going to be good for women, I did do it, with a clear conscience. I do think that obviously, that women deserved, equal pay and several of the other things. I get irritated that occasionally -- not occasionally, not so occasional, things that happened. But I did lots of other things for women later on, when I had more freedom. I didn't have it, either when I trained, as I told you earlier. I was so busy learning and working and making it and fighting a whole system where women were supposed to, and girls were supposed to do something so different. I had the burden of my own feeling different. I couldn't do it. I didn't know whether it was me or it was the world that were not doing things for women.

When I felt even more and more strongly, and when I thought over the good things that were happening to men and some to women, and I have a little bit more freedom, I began to be very, very actively involved in whatever they asked me to do. And I was lucky enough, because I was one of the first ones to be early in. I was the first one in so many, the first woman with fears, not fears, anxieties, will I be able to make it, but why not try. I made it as first in so

many areas that I felt I had to do not only a good job, but an extra good job, so nobody could say she left because she couldn't balance the books or she left because it was this or the other thing.

ROSOLOWSKI: When you came to the end of that tenure as dean of students at MIT, what kind of lasting impression do you think that left? I mean, Dr. Wiesner or President Wiesner, took a real -- or maybe he didn't take a chance, but he selected you for that position, for his own reasons and because of his own confidence.

EISENBERG: He took a chance, he took a chance.

ROSOLOWSKI: And, you know, and you rose to the occasion. So, what legacy do you think that left at MIT?

EISENBERG: I don't know whether I left any legacy or the times changed. Eight years was a long time during those years, and I think that partly why he selected me was because it was time [04:25:00] where women had to stand on their own, and he realized that. So it's hard to tell how much I was a role model. I find people on the street now that say, I couldn't have done it without you, and I cannot believe they are talking about me because what did I do? I just put my foot in front of another and I did the best I could with what I had. I don't know what everlasting legacy I left. I don't know how the times have changed, I

don't know how many students. This chief of ophthalmology said to me, "I couldn't have done it without you," and I meet people on the street that tell me that, but there are some men that tell me the same thing, we made women part.

One of the new things I did do for the association with him, is that we were eating lunch at one of the museums in Paris and somebody said, "Would you pass the salt?" The tables were very close, as they usually are, and I passed the salt, and it was this young man and an older woman across the table, and Leon and I were here. Pass the salt. I didn't look and then I heard, "Dean Eisenberg, is that you?" Of course, several years had passed since then, like 20 maybe, I don't remember how many. And I turn around and I must have looked puzzled. I asked him, "Who are you?" And he told me his name. This was a student at MIT, who happened to be 30 years old, and he invented something that was terribly important, whether it was the stock market or something. He became such a multimillionaire, he decided to retire at 30 years of age and take a trip around the world. He was at the end of the trip around the world. I was so puzzled by anyone at 30, having being able to do that, so I began to talk. I couldn't remember him. I

remember the name strangely, because sometimes I remember the face but not the names.

Anyway, he said, "You never know, but you became, for a while, the most popular woman in my house." I said, "Why is so?" Because, when I became a dean, and I had sons that were in college and they never knew what was happening, not to them. To them, of course I wanted to know, of course, but what was the school like, what were they thinking, what programs they had for them. So I began to send a mimeograph letter to every parent in the United States and abroad, that a freshman at MIT, I said I'm now going to tell whether your son or daughter is washing behind her or his ears, but I would like you to know what we are expecting of your kids and why we have these programs. And I detailed all of the programs and how we hope that they'll be successful in their careers, and all of the best wishes. At the end, I wrote something, after all, you pay all that tuition, you may as well find out something about what's happening. I knew that I missed some of that when my kids went to school.

So, his parents, the one in Paris, his parents were delighted. And then, we had the reception for parents like

two or three months after the kids, and they kissed me on both cheeks and the parents were so delighted, most of them, because I kept them informed. I think I sent them from time to time. It seems so long ago that I was the dean of MIT, that I don't know whether I left a legacy or not, but I did the best I could.

ROSOLOWSKI: But that job led to your next position that was also a first, which was at Harvard. Could you talk a bit about that?

EISENBERG: I was asked by a man, whose picture I have here on the fridge, because he has become one of my good friends, came to visit me at MIT.

ROSOLOWSKI: And your friend's name is?

EISENBERG: Federman, Daniel Federman, who is one of the best endocrinologists in the area and maybe in all of the United States, and a magnificent human being. He was dean of students at Harvard Medical School [04:30:00] and I sort of knew him a little bit socially because my husband was then -- had moved to the medical school later, to become chief of something else, and they have known each other and they're having committees together. So we had met socially. So he came to see me at MIT and he said that he had heard wonderful things about working as a dean and that as a dean of students, have too much to do, would I

consider going to the medical school. Every time a job has been offered, except when I told you, the first one, I had to ask, in Boston, I never wanted to leave the job I had, because I was so happy and I felt doing very well, by my own set of standards, and by the people that were supervising me or hearing about my job, and by the students. I was having a whale of a good time at MIT. The chancellor would come once a year with an envelope and would say, "This is a new salary for next year." And at the beginning, I didn't know whether to open it up with him there or not to open it up, and he began to say, "Open it up." And he would have always, the most extraordinary, positive things to say. Then at the end it said, and your salary will be... and then he will tell me how much. And the first or second time I opened it, I said, "I don't know how much to thank you, because I don't know what I was making this year." Because to me, it seems incredible that they are paying me for something that I love so doing. And it was the truth, I was not just exaggerating.

But, what happened when Federman came to talk with me is that Wiesner was stepping down. I knew who the next president was going to be, and I felt that the new president, two or three things. The new president had the

right to appoint his or her own deans, number one. Number two, that I did as much as I could at that time, for women and for students and for many things that I wanted, and by then, maybe it would have become a little bit of a repetition, and I was beginning to miss my colleagues that were physicians, because I didn't have time to do any of the conversations. We had them with friends but they were different, they were not the day to day. So I couldn't decide. I didn't want to leave MIT.

I went to Jerry Wiesner, because I felt I had to talk with him. He offered me the job. I was practically in tears and he would hold up my hand, because by then we were such good friends. We went every summer, to Martha's Vineyard, to their place, and he and his wife. He got hold of my hand. I couldn't talk. He said, "What is the matter? Carola, what is the matter?" I couldn't talk, I didn't want to start crying. "Is Leon sick?" No, I said. "Are you sick?" And then I finally got it out, "I've been offered a new job." He said, "You are crazy, you ought to see a psychiatrist," we were those kind of friends. People are happy when they are offered. Take it or don't take it. What is a new job? But I was very upset about leaving MIT.

It was the first time in my life, I felt like a big person, that sense of superficial and stupid.

ROSOLOWSKI: What made you --

EISENBERG: I'll tell you what it was. It wasn't that I felt special. I discovered strengths in me that I did not know I had, that's what was so special, and I just was free as a bird to discover yes, I could read the budget sheet, even if it is... Yes, I can talk to people, yes I can give a talk always, to incoming freshmen when they come, even if they are 4,000. I will tell them what I feel and that was with a little bit of anxiety, but I was able to do it. Yes, I can meet with somebody in the visiting committee [04:35:00] that took me... That's another story. I was being considered as a dean of students, I didn't want to do it, but he heard that the job had been offered to me, and he said, "I hear wonderful things about you, Dr. Eisenberg, wonderful things about you, but these are times of unrest." He was sipping his milk and I kept thinking -- also, in those days we thought that, and he was straight, like in New England, big, blue eyes, and took me to some important people studying room, where he was working, sampling something, and he said to me, "I heard that you were offered a job, but I also heard that sometimes you might be with the administration, and sometimes you might be leading

the students in their revolt." And I said, "Maybe what you heard is right." I said, "It depends on what the cause is." Where I got the strength to tell him that, I don't know, because he petrified me, then and since then. He also became a good friend, because he was the president of the visiting committee of the dean's office. He said, "You might be helping the student," I said, "Yes, if they are against the president for something he has done wrong, of course I will be heading with the students and not with the president." If the president is right and they want to take his office and run the school, of course I will be with the president, because they don't know yet.

Anyway, I loved MIT, because I discovered things within myself that I didn't know I had, and that's always wonderful. I felt I did a good job and they didn't want me to go, but I decided to move. As it turned out, later on, when I went to the medical school, Paul Gray, that was the chancellor and the one I report to, became the president. I think he would have loved for me to stay there, because he had to look for a new person. We had a marvelous working relationship and he's an amazing human being. Then, he became president of the board of regents although then it had another name. I know he's gone back to being a

full professor, that he loves being a full professor.
Wonderful man, a wonderful man.

But anyway, I decided to go to the medical school and I started right away, and I remember the first day, coming out. You don't know this geographic section, but coming through Storrow Drive, that's on the Boston side of the river, because the medical school is in Brookline and MIT is in Cambridge, and Harvard University is in Cambridge. But anyway, I was driving Storrow Drive and I began to wonder, did I do the right thing? I was so happy there. And I was tired and all of a sudden my mood changed and I began to feel a little bit happier, and I went home and of course I was very happy, I was just tired. And the following day, the same thing happened to me, and then I wondered what it is about this place, that I began to feel bad. I was looking at the curve of MIT building, where my office was in, from the other side of the river. Looking at MIT made me feel so happy. Being in the medical school, I felt so strange at the beginning, but then I did it. Then I did it and I spent, I don't know how many years. Maybe you have it there, loads of years.

ROSOLOWSKI: It will take me a second to find it.

EISENBERG: It doesn't matter.

ROSOLOWSKI: I can get it tomorrow.

EISENBERG: It doesn't matter, but that was lots of years.

ROSOLOWSKI: Nineteen seventy-eight to 1990.

EISENBERG: Yes, 12 years.

ROSOLOWSKI: First, the first --

EISENBERG: I am not sure that I was first, you see, because at the same time, they appointed somebody, Eleanor... her name will come to me in a minute, and she was the dean of faculty. I don't know whether hers was two months before mine or mine two months before then. I don't know whether it was the first one, but one the firsts, yes.

ROSOLOWSKI: In the whole 200-year history, so that's quite amazing. [04:40:00] When you arrived there, what was medical education like at that moment, and was that snapshot in 1978, very different from what you had experienced?

EISENBERG: Very different than the experience in Argentina, completely different. Quite similar but different than Johns Hopkins. For one thing, the number of students, that were 160, and we were 800 in Argentina. I don't remember how many at Hopkins, they have a few other ones, fewer than HMS. Johns Hopkins had then, one hospital, the Johns Hopkins Hospital, and Harvard is very different in that the medical school has a central administration, and then I

don't remember how many, 13, 15 hospitals, maybe more, don't quote me on those numbers. It depends whether you come to smaller hospitals that are only slightly affiliated, or the main hospitals around the medical school that are affiliated. But they are independent board of trustees, independent income. They get some money for the teaching of students and they pay some money for, but it is a completely different system than at Hopkins.

When I was at Hopkins, they talked about being the hospital in the United States, and at one point it was, because they did a Flexner Report that for the first time, revolutionized the teaching of medicine at Hopkins, and they had five famous, very famous professors, and they were all over the world respected as the best thing. But then things began to crop up at HMS and Harvard Medical School also had a tradition of. But when I was at Hopkins, the people that had to leave Hopkins went into mourning because for God sakes, when are we going to find a position anywhere where we learn as much or teach as well or have the name that we have or do the research we wanted to do, because there also was an enormous amount of research money. When I came to Harvard, Harvard considered itself the best medical school in the United States and they all

have done this and have the other thing. I don't know how to compare them, except the hospital arrangements with the medical school that are very different, and except that Harvard also has a Harvard-MIT program, where people are getting MDs and PhDs, although some of the medical students also can get PhDs. But there is a specialized school within the school, where when I was there, there were 25 students and one woman, talking about that, came to talk to me at the beginning.

ROSOLOWSKI: This is one woman student?

EISENBERG: Yes. The needs for... The interns' requirements for that school are so incredible that few could make it, and maybe there was some prejudice, I don't know. One year, they had nobody, and now I think it's half and half. And I went to the medical school, to Harvard. I think the teaching was not all that different at the beginning. Large classes, difficult first couple of years. It was three years. Brilliant students, incredibly bright and amazingly committed to science, and some that came because they were going to discover the cure of cancer and some that wanted to work in poor neighborhoods because they didn't get good medical care.

Just what was beautiful to me and what I began to enjoy more and more about having moved from MIT, I had 4,000 undergraduates at MIT, and I only got to know the ones that have [04:45:00] problems or the very bright ones, or the ones that were politically interested in getting to know the dean and doing whatever it was they wanted. In the medical school, we had fewer students and I instituted a couple of programs that maybe I will tell you.

ROSOLOWSKI: We're at five o'clock, yeah.

EISENBERG: I will tell you tomorrow. (chiming) It was very nice to have a smaller group of students and they were more mature students, because these were 22, 24, 25, 28. So I didn't have as many of the acting out behavior in most cases, unless they were sick, psychiatrically ill, and then there were problems. But we had a good psychiatric service. It was a much easier job and there were no dinners at fraternities and dormitories, and there were not functions. There was some of all of that but very little. I was sharing the job with Daniel Federman, that he made all of the major decisions or the harder decisions; sometimes we made them together. I met with him at least once a week and we had great fun and I loved being there too. They were productive years and I got to know the

students very well because there were so few. Then I started those groups that allowed me to see even more.

ROSOLOWSKI: We'll talk about that tomorrow.

EISENBERG: It was just lovely.

ROSOLOWSKI: Well, thank you very much for your time today.

EISENBERG: I loved it.

ROSOLOWSKI: It's a little bit after five o'clock and we're stopping the interview today and we'll resume again tomorrow.

EISENBERG: OK.

END OF AUDIO FILE

Eisenberg FullAudio Part2

ROSOLOWSKI: I am back again, at Dr. Carola Eisenberg's home in Cambridge, Massachusetts, and we're starting the second day of our interviewing. Today is June 11, 2008, and it is quarter of ten in the morning. Well, Dr. Eisenberg, yesterday we stopped at the point where you were talking about moving your administrative position from MIT to Harvard Medical School, and you were starting to talk about some of the things that you were doing there. I'm wondering, we talked a little earlier about some issues that you didn't address in your experience at MIT, and I'm wondering if you wanted to talk about some of those things now or if you would like to wait. Specifically, how you had an impact on the situation at MIT, while you were there as the first woman dean of students. Is that something you would like to talk about now or would you like to...?

EISENBERG: No, I can talk about it now. It's very hard to evaluate what the impact has been, and this is true not only about my interaction with the students and the faculty and the administration at MIT, but in general in one's life. It's very, very difficult to know what the impact was. I think my greatest impact was in some new programs that I organized, and mostly with my interactions with

students. There were a few I had more of an impact and they were usually the ones that sought me out, either because they were having problems and they wanted me to help them solve them, or people that were interested in my role and began asking questions just like the one you have asked; what it's like being a woman in a position that they saw as a position of power or influence or decision making. I think at the individual level, I accomplished. I remember meeting people in the streets later on, that said if it wasn't because of you, et cetera, et cetera. But in general, it's very difficult to know.

With a patient, if a patient comes with a fever and an acute situation, you know whether you help them or not. They feel better afterwards and they can tell you. In programs where 4,000 undergraduates are interacting with one individual or with the administration in general, and this is something very dramatic. It's very hard to be sure. I do know that I had some influence in the life of students, and I can give you examples of that, but I don't know whether you want to spend the time looking at individuals that I know that I helped.

ROSOLOWSKI: Well let me ask you this question. When people would come to you at that time and ask about what it meant

to be in a position of power, what was the answer that you gave them at that time? It was an interesting period because feminism was really, really important on campus.

EISENBERG: Yes, yes.

ROSOLOWSKI: And so this was uppermost in many people's minds. So, what was your response at the time?

EISENBERG: I hope so. (both laugh) I did not know. I would say well, you'll have to judge me after five years or whatever time I stay here. Even now, I wouldn't know how to answer the question. I felt very good about being there. I thought that at the minimum, I was a good role model, not only for women but for men as well. So, I felt very good about what I was doing. I felt very happy about the fact that I was being helpful to occasional students that have ambition and want, and have the ability to do the great things, and they began to doubt whether they could. But other than that, as a whole, it's very hard to evaluate, for me anyway. Other people, you know, set up goals, and they are much more either better organized or much more rigid about [00:05:00] what they want to accomplish, and then they check at the end of the year or at the end of a particular program. I was much more casual. I did it when I had to obviously, write a report. If I had much of an influence, I really don't know.

I think I had some, and it was a period where it was terribly exciting to be a woman and have been given that opportunity. Look at what's happening now. We have presidents of three or four very important universities, including the president of MIT, with whom I had a talk a couple of months ago.

ROSOLOWSKI: And what is that president's name?

EISENBERG: What is her name, yes. I'll give it to you in a minute. At the moment, I cannot think. But I wanted to give her that seal that I talked yesterday about, the seal of MIT, because I didn't have room in this, since we reduced the size of our home. I wanted it to be somewhere, and she not only accepted it graciously, but they hung it somewhere in MIT. But I asked her the same question you asked me; what is it like to be president of MIT, a woman, and I was so surprised and so pleased, so very pleased when they appointed her, because I never would have predicted that we would be moving that fast. She said to me it's not surprising, look what's happening. Well, at Harvard it didn't happen yet, because it happened subsequent, but at Princeton, at University of Pennsylvania, at Yale, et cetera, and she mentioned, she said, "I wasn't surprised at that. What I was surprised at was that they would select a

scientist instead of an engineer." To her that was the great surprise because by now, being a woman, being appointed as chief of something, as the whole of MIT, is not as surprising, because although we made small progress and I wish we would have made more, we have made quite a bit of progress.

ROSOLOWSKI: I was thinking too, after our conversation yesterday, there were a number of moments when you said, you know, I just, I didn't know what I was doing, I was just putting one foot in front of the other. You weren't aware of specifically being a woman, being a pioneer. I was thinking to myself, you know, that may be a generational difference, because you were just doing it at a time when no one else had. Whereas someone from my generation or someone even the generation beyond would say oh, this woman was really being a pioneering feminist. But you didn't have an idea of yourself in that way.

EISENBERG: I didn't have time to have those thoughts, I was working so hard.

ROSOLOWSKI: Yeah.

EISENBERG: I just was doing the best I could, but I never felt all that unique. My husband felt that way because at one point, we had an all-day meeting, you know, the chiefs of academic council, and they were having a dinner at the

president's house, and they told us there was going to be a speaker, but we had worked for, I don't know how many hours, early in the morning until six o'clock in the evening, and spouses were invited. They told us we'll have a speaker, so I expected that this will be a couple of hours of a good dinner and some pleasant conversation and drinks. I didn't know who the speaker was going to be. So, everyone brought their wives and it was very nice to have met them and chat with them, because I did not know all of them. It was at the same building of my appointment, and the men I had gotten to know some better now.

ROSOLOWSKI: Was this at Harvard or at MIT?

EISENBERG: At MIT.

ROSOLOWSKI: At MIT, OK.

EISENBERG: At MIT. So they announce that the speaker was to be one of the spouses and nobody else but Leon Eisenberg. He never told me and I did not know he was going to be the speaker, and he started by saying that he was very disappointed at the media that had covered my appointment, because in those days they used to have a women's section and they asked the usual questions of the wives of the men that had been appointed, and Leon said, "I was very disappointed because they didn't call me to say what was my

favorite color, what was my favorite season, [00:10:00] what was my favorite meal," et cetera, et cetera. And he said, "I am the spouse of a person that had this position. Why didn't they call me? Why the difference between women and men. I feel discriminated against." And, you know, everyone burst into laughter and it was a very funny speech, but it had a connection. It had a connection with what was happening there, because who would think of calling a husband up. Anyway...

ROSOLOWSKI: Well, I think it's also interesting because it means one thing when a woman blows the whistle on sexism or discrimination in gender issues, and it's another thing when a man does.

EISENBERG: Of course. And I must tell you, to the extent that this has not been just a jovial presentation, but that he has worked against racism and sexism ever since I have known him, when I could be objective about it because we were only friends. This is a lifelong pattern that he has adhered very, very strongly. I am very pleased with that and I think I would have done it anyway, if he didn't feel that strongly, but I think it would have been a much more difficult series of jobs if I didn't have his enthusiastic support.

ROSOLOWSKI: Very important. Would you like to continue now,
by talking about the appointment at Harvard?

EISENBERG: Yes, I'd be happy to tell you.

ROSOLOWSKI: We talked a little bit yesterday about how you
got that position.

EISENBERG: Yes.

ROSOLOWSKI: And again, I was interested in finding out what
the climate was at the Harvard Medical School, for women,
not only at your level administratively, but also among
faculty and students as well.

EISENBERG: Was and is still difficult for women.

ROSOLOWSKI: Why?

EISENBERG: Why? Because there are so many reasons. It's
better than it was and some programs had been established
to encourage women to apply to higher and higher positions,
some programs that are excellent. One, which I think is
the best one and I had nothing to do with it or very little
to do, was started by Eleanor Shore, that I mentioned
yesterday, who was the dean and now has stepped down, the
dean of faculty. She started with volunteering financial
contribution of faculty members, to encourage young women,
at the time when they were at their most difficult time for
most women, you know, they begin to have babies, they
finish their training, they didn't have good childcare

centers, they wanted to be with their babies and they wanted to be at work, and they didn't have time to do the research that they would have liked to do. So, this program that started maybe while I was there, maybe 15 years ago, I don't remember exactly the year it started. We volunteered contributions from people mostly in the faculty, men and women, that contributed money, and each woman is given both a stipend and time to do research for one or two years, and this is between the time they have finished their residency usually, and they want to do research but they don't have enough money for an assistant and they have to pay their debts and they don't have money for...

So, occasionally, it's for the men as well, because some men need to take care of three generations; themselves and their wives and their parents that are ailing and the babies. It occasionally has been for men but mostly for women. And then they also, the organization find a mentor. I've been a mentor, for instance, of a woman. Well, I won't go into the individual cases, but they give a mentor a place to do the work, which they usually have an idea. They have to make of course, a presentation of why they want to enter that program. The numbers have been growing

by leaps and bounds, of women. [00:15:00] Some of the hospitals have contributed money, some of the administration have contributed money and many faculty members, and it has been a very successful program. I was part of hearing about it and I have a mentee, for instance, the first year.

There are some new programs that not enough to make sure but still, for a woman to arrive to a full professorship is a real struggle, and the factors are very many. It depends on what field the women are working, it depends on the willingness of the people on top of the hierarchy to understand that there are periods in a woman's life when they have to make some slight accommodations, because usually for women in general, getting a little bit away from this marvelous program, women usually finish their residency and they are in their early thirties, and their biological clock is running and their desire to have children is strong, and the desire to be very good at what they do is very important to them. They usually have debts from medical school they have to repay and they cannot take the time off without a salary, et cetera. So that's the period that's -- and there are not good daycare centers,

they can't afford to pay, most of them not all of them of course. So it's very difficult.

There have been changes in that direction. The program I mentioned to you is on. There are other programs and there are changes not only for women, but changes that I could palpate while I was in the medical school and some time later I can talk to you, the men were changing too. They used to be married to women that were there with a martini at the door and dear, did you have a good day, and of course, they didn't have a very good day. Too much work, too many patients, the research didn't work out. And the women took care of the home and the children and they usually married that way. The number of women married to men that are dual career families and both in medicine, have increased quite a bit. Therefore, the men have to change, because they understood better, the dilemmas of their wives and themselves.

At the beginning of my stay there, get an exit interview and we might talk about that, to three cohorts of students that have already been selected for where they were going to be there training, in the specialty they wanted. I have a good relationship with them. I told them that it was

confidential, the names that were volunteering. They didn't have to come, but I sent a letter to all of the students, and there were three groups, because -- and we'll talk later, I am sure, about we had started a new program, a new teaching program, the New Pathway of fame. So, there were students that applied and could not get in, and students that applied and did get in, and the ones that were in, the students jovially used to call the Coca-Cola group, because it was the classic pathway. I put it on a completely voluntary basis and we had 165 students at that time. I expected 30 or 40 that I knew well would come. To my great surprise I had over a hundred students volunteering and coming to talk, and it was an open ended interview. I asked them, what was it like for you in this program or this program or this program, whichever they were in, and they talked a lot. They talked a lot and very openly, about what was good and what wasn't so good. Parenthetically, the ones that could not make it to the New Pathway Program was because we limited it at that time. I forgot whether it was somewhere [00:20:00] between 25 and 40 students, because we did not know all of the details and how it will work out, and it required much more time on the part of the faculty. So, it wasn't because they were not qualified. We didn't have enough room for that.

Anyway, the main students would ask me, if I asked the question, do you look forward to your residency or becoming a physician in ophthalmology or in primary care or in psychiatry or whatever. Many of them told me that they had selected that specialty because they wanted to be a father to their children, and they didn't think that was very -- particularly the wives of physicians, they knew that it was going to be a real struggle and they did not want to do what their parents, if they were physicians, or the famous people have done, which had noted men in that time, were mostly or almost uniquely at Hopkins. There was a very famous physician, for instance, that prided himself on the fact that he never left the hospital in 365 days. Once the barber came to the hospital and that was elation from everyone around, because if you are a physician, you devote your whole life. They had a little place where he slept and he could eat there and they have clean clothes for him, and why did he have to go out?

Well, the generation I got to know well at Harvard Medical, males and females wanted to share job with raising the children, a shared job of usual household obligations. I even perceived those changes then, because in the old days

they said well, they are gravitating to that specialty because their income is going to be higher. Some people were skeptical of my idea that it was more than that. Of course there were some, because of course somebody needed a better income or wanted a better income, to buy a better car, but they were the exception. Most of them were marvelously committed to what I considered marvelous healthcare. They were wonderful. But to me it was impressive how many men gave me that answer, and I think it's become the generation, the present generation, has changed a lot, not only for women but for men as well. They understand that, the need for it.

ROSOLOWSKI: I have a couple of questions. Just one I want to ask you before we go back and talk more about your other contributions to the Harvard program that led up to the New Pathway teaching method. The first question was, why do you think so many, such a surprising number of students, showed up to do that exit interview? What did that signify to you?

EISENBERG: Well, they were freer at that time. They felt that they have accomplished, many of them, what they wanted, or practically. Many were very anxious because they had girlfriends or boyfriends, and they wanted to match together, and they did. They were thankful to the

school, because they began to see some of the results of their hard work and things that have happened to them. I think they had a good relationship with me and they were free to talk and they are not shy, and then they were not before, but there were some students that would have been - - very few students that would have been a little bit afraid. And because I promised them confidentiality, which I did. I regret the fact that I never wrote that paper, because I share it of course, with people that could have had more of an influence than I had, and I talked about that freely. I'm sorry I didn't write that paper, but I guess I was too busy as usual.

ROSOLOWSKI: Meaning a paper that summarized the results of those exit reports.

EISENBERG: Yes, that's right.

ROSOLOWSKI: Was it usual for those kinds of exit reports to be done at that time? Were any exit interviews done?

[00:25:00]

EISENBERG: Well, yes, there is a big educational section of Harvard Medical School where they have, and they still do, obtained results of the students' impressions of the courses. We had a different system of obtaining and maintaining the results of the students' performance in the course, but the students also get, at the end of each

course, evaluation sheet. They are very free to be critical and to, at the end of the course, again. So they are continuously doing evaluations, but mine was different because I didn't do it for the study result. I did it because I was curious as how the three groups had performed and how pleased they were that they have joined this group or that group or that group, because some of the students, when the new program was instituted and they were already in the school, were unhappy that the new and really different educational program had started. So I was curious about that reaction. But the school maintains a very well organized and very complete set of records, and they do all of the statistical analysis for each course, for each faculty member, for a group of students. Mine was really different. I didn't care about the numbers really. I wanted to know the emotional and -- not emotional. The intellectual evaluation and the level of spontaneous interaction with another person and not just sheets of papers.

ROSOLOWSKI: That's what I was trying to get at, how yours was distinctive. And it seems that from what I've read, that's very characteristic of your style, to ask for the human response, for the interactive, conversational response, that allows people to open up.

EISENBERG: I hope that that was the case and I think it was in the majority of the cases.

ROSOLOWSKI: Could we talk more now about when you went to Harvard, what kinds of programs you instituted. I understand from my reading, that a man who was in the position that you took up, his name was Alvin Poussaint, that he was very interested at the time in minority recruitment and that you took over the position and continued with that but also added a real commitment to recruiting women students. I got a lot of this information from a letter that Daniel Goodenough wrote.

EISENBERG: I'll have to see that later. I never have seen it.

ROSOLOWSKI: I will show it to you.

EISENBERG: Did you request that or you did find it somewhere else?

ROSOLOWSKI: Well, I asked the foundation to send me whatever materials they had on hand about you and that was one of the materials they shared.

EISENBERG: I'd love to see it because he's one of my most respected members of the faculty.

ROSOLOWSKI: I have to say it was a lovely portrait and I had this desire to write him a thank you note.

EISENBERG: You should, he would love it.

ROSOLOWSKI: I will.

EISENBERG: He's such a human individual.

ROSOLOWSKI: That comes through in the very things that he focused on about you, because he said that he knew that the other recommenders would be --

EISENBERG: And he was recommended, I didn't even know.

Recommended for what?

ROSOLOWSKI: For the Alma Dea Morani Award.

EISENBERG: Oh, really? I didn't even know that.

ROSOLOWSKI: Yes. And he said that he knew other people were going to be focusing on your accomplishments, you know, and things that one could find on a CV, but that he really wanted to talk about the impact that you had at a more subjective level. He told some wonderful stories in that letter and I have to say --

EISENBERG: I'd love to see them. I don't know who the recommenders were, so I did not know about that letter.

ROSOLOWSKI: Well, it was from his letter that I found out about Alvin Poussaint and the fact that you and he had a good working relationship.

EISENBERG: Very good.

ROSOLOWSKI: And added the recruitment of women to your mission, as well as minority recruitment. So, could you

talk about that whole situation; your working relationship with Alvin Poussaint and your agenda when you went in.

EISENBERG: Yes. Alvin Poussaint wanted to move on at that time, when they offered me the job. He's also a child psychiatrist and an extraordinarily [00:30:00] good human being, and I have nothing but respect and admiration for the work he had done. And he remained within my group, but he moved on his side, to continue and intensify the recruitment of minorities. He has remained a good friend, he and his wife, who is also a woman physician and a marvelous, marvelous person. He intensified and had more time of course, because he didn't have all of the other jobs of the dean. He intensified the recruitment of minorities and that wasn't specifically as to increase the recruitment of women, and it was my role. But I sat ex officio in the Admissions Committee. I sat for ten years there and without voting of course, and this was a choice that was made for a variety of good reasons, but I watched the succession of applicants and at that time, they had a special subcommittee. There were five or six subcommittees and the intensive work of the faculty, I cannot start describing. People that volunteered their time to do interviews, to write reports, to defend their students, because the number of applicants is enormous for a small

number of places. I was so amazed at the work that that committee did, and of course, if I'd heard of either a minority or a woman, that deserved better attention, I spoke up, but I wasn't designated to increase the number of women. It wasn't my role. The role for the minority students was quite encroached in the general job, because it was a special subcommittee for minority students and we had not only faculty members -- and I'm sorry, I did not mention earlier, we also had some students. They were fully selected, they themselves selected, because it was an enormous amount of work, in addition to the work they had to do as students. We had both minority students in the main committee, which was the one I sat in. So, there were students and there were faculty members and there were either men or women among the students. They were selected by the chair of that committee and it was no special attention giving, whether they were minorities or women.

ROSOLOWSKI: I'm sorry, I was just going to ask what were -- did you want to finish your point?

EISENBERG: I just wanted to add that soon after I arrived to Harvard Medical School, maybe six months after I arrived to the medical school, the times were changing very rapidly after Vietnam, after the assassination of course, of impressive black individuals. That laws began to change

about equality and Harvard Medical School decided to take more minorities. (phone ringing) Sorry about that. So they decided to maybe admit more minorities, because many of the minority students didn't have the brilliant records, (phone ringing) for obvious reasons. They were discriminated in college. They didn't have the preparation that some of the white students had had. So it was a great discussion at the faculty meetings and a great discussion at the [00:35:00] administrator level.

They decided to form a fifth Admissions Committee, special, for the students that might have needed a little bit of extra tutoring at the beginning, to the difference between having gone to a black college to a predominantly white medical school, or there were differences that they had to account for, because occasionally, the numbers didn't match but you saw the potential there clearly. So they created - - and then of course the people that were more recalcitrant and used to the Harvard Medical School that existed 200 years ago. Some of them, quietly, were not as enthusiastic, and one not so quietly. But then they decided to create a special subcommittee for minorities and the people that were more liberal and felt acutely, the need for equality, fought very hard. And they didn't want

to bring extra students at the -- decreasing the number of what they called regular students, which meant white students. So they created a special subcommittee that then merged into the regular main Admissions Committee, because the discussions were always in subcommittees. They took months. They really looked at each student, what recommendations. There were lots of discussions at that time.

My husband was the chair of the Admissions Committee and he had been fighting for equality and against racism and sexism all of his life, because if I am liberal, he is a little bit to the left of my liberalism. The students were very -- the minority students entered then. I think there were 15 new students we admitted, or maybe 20. I don't remember exact numbers, because before there had been one or two African American students in 165, and here, the numbers were almost palpable, and they were not only African Americans; they were the Latinos, they were the Indians, that came from reservations and some of those were not exposed to good colleges. Anyway, it was an enormous success and to this day continues to be an enormous success.

Going back to what we talked about then, earlier we talked about early, Alvin Poussaint did a titanic job. He would spend, I think it was a month, during African American month in February, visiting all of the black colleges and places where Latino populations were, and the Indian reservations, and he would look at the students and would look at their records and will talk with them. He did a wonderful job. When I left Harvard Medical School, 18 percent were minority students. We also provided, at that time, a woman working for time, which we used to call the reading teacher, to help them the first couple of months if they were having a little bit of difficulties adjusting to the enormous demands at that place in the first year.

ROSOLOWSKI: Was that something that you instituted?

EISENBERG: No, Alvin Poussaint did, no Alvin Poussaint did.

ROSOLOWSKI: What were some of the --

EISENBERG: But he was just starting when I started, yes.

ROSOLOWSKI: I see. What were some of the initiatives that you set in motion when you assumed the deanship at the Harvard Medical School?

EISENBERG: Well, more to our main theme, I decided women were so few, that they needed something to talk about their own experiences. So, I helped them organize a group that would meet once a week, for women, [00:40:00] and if men

wanted to come they were welcome to come. There was no agenda, brown bag lunch, that wouldn't take any time away from the curriculum. For once a week, we met every week, and they have a name for the organization since then, I have forgotten the name, honoring one of the first women that became a professor at the medical school, one of the few.

Many things became quite clear. The uneasiness of the few women in all-male, almost total male, but mostly men, environment, and there were the desire to help for the following year, the newcomers, the new women, and they started a mentorship between second and first year students, and this continued for many, many years, and it might still be present, I don't know. So that was important. Important for the students but for me, a clear view of some of the problems the women were having.

ROSOLOWSKI: What kinds of issues did they raise when they were talking about their discomfort being women in pretty much an all-male environment?

EISENBERG: Being alone in a particular class, tutorial or a seminar or something. Somebody said well, you could represent the point of view of the women, what do you think? Well, she didn't represent anything but the point

of view of herself, and she was shy occasionally. You know not for all women, because the ones that had made it to Harvard Medical School, had a stick to it-ness to what their goals were and they were going to be there. Some of them were not shy but some fell under the gun, not only of the faculty member that would ask that question, but with their classmates, who think of her when she expressed one point of view that maybe was not the most popular point of view. Forever present, and it happened to me before and it happened, I suspect still now, and it happened to me at MIT, and not only at Harvard Medical School.

Being at a meeting and you have a creative idea and you have the -- it happened to me, because particularly early, it was difficult to come up with some idea that, you know, all these men would think of. Where does she have the courage to say something that might revolutionize A, B, or C, that we've been doing for years? How does she -- it was hard to bring up an idea. So, I would bring up an idea or the students later on will bring up an idea in a seminar usually, and their discussion continue all around the table, and then they will attribute to what they said what I said earlier. Well, as Dean, blah-blah-blah had said... And it was me who had that idea. You know, in the business

of the discussion, they forgot who said it usually, and they will attribute it to somebody else.

ROSOLOWSKI: A man.

EISENBERG: Women talk about that, talked quite often about that.

ROSOLOWSKI: Did you also experience that when you were in your own medical training?

EISENBERG: In my own medical school? I didn't dare to talk in my own medical school, and the classes were so large. I talked among my friends, yes a lot, but I didn't get a chance to experience that then.

ROSOLOWSKI: But that was something you experienced professionally. What other issues?

EISENBERG: Other programs.

ROSOLOWSKI: Yeah.

EISENBERG: The one that I started, and that's how I got to know Dr. Goodenough. It became quite clear that the adjustment of the medical students at the beginning was very difficult. The pressures for learning were enormous. They were separated from girlfriends or boyfriends. They worried about the amount of financial aid they were getting and how they were going to pay it. They had to study anatomy and they had to face a cadaver for the first time.

[00:45:00] I'd like to go back some time, to my own experience as a medical student and facing a cadaver.

So the stresses were very hard. Some came with partners or wives or husbands, and they didn't have a job and they had a future career but they didn't know how to get into the system in Boston. They were living in -- most of them, in a dormitory in the medical school, and for some of them that was an adjustment too. They were very idealistic and will they be able to maintain that idealism during the four years and later on. For the ones that loved playing an instrument, and we had a concert pianist I can remember, we had many musicians. We had a man, a pugilistic accomplished man, and that was a way he could make money. I don't remember the common word for pugilism, you know, the ones that fight.

ROSOLOWSKI: Combative?

EISENBERG: No, he was a fighter, he was a professional.

ROSOLOWSKI: Oh, like a boxer?

EISENBERG: A boxer. I couldn't think of the word in English. Anyway, we had a very diverse population and for some of them, those things were very, very important. So I decided to create a new system for myself, to get to know the students. Once they were admitted and once they

decided to come to our school, I sent a letter, 165 letters; I'm so glad you are coming to a medical school, because some of them have been admitted and decide to go to another school, mostly because of financial reasons, because they were being offered better financial aid, because the name Harvard is like a magnet, you know, and they were right.

But anyway, I sent 165 letters, a warm, which I felt, personal letter, and I told them that I wanted to organize groups of 20 students, and they have to come every evening after class, from five to seven. I gave them a place in the library, where 20 students will come every afternoon, and we will introduce each other and we will talk about our hopes and our fears and our previous career, and that they have to come. And then that afterwards, I would want to form volunteers that will want to continue those discussions, so at moments of stress, they will have a more intimate group of students with whom they could talk about the stresses, because some of them were going to experience, not everyone. Most likely, the stresses were going to be minimal, but they were going to be present. And afterwards, I will have a group of volunteers, that I will meet with them once a week and the ones that committed

themselves to coming back, they will have to come for six sessions, and then they will decide whether the group will continue or not.

So, I met every afternoon, with all of the students, and they all came, and that started the discussion, because I learned enough in group therapy and in group sessions, that was not therapy like those ones, and I made it clear that these were not therapy sessions. I would tell them who I was and where I came from, and I gave them an abbreviated version of what you heard yesterday, briefly, because we had two hours and 20 students had stories to tell. But I had learned from before that whatever the person says, the main theme continues all around it. So I made it not spicy, but I made it varied, so they could pick any one of my little facets of my own life, and then ask who wants to get the discussion started, [00:50:00] and usually somebody said well, I am a cello player, but I also love medicine, and I wondered if anybody's interested, whether we could have a little quartet to play when we have the time. Somebody else would say, it's -- and each one would give their individual version of what their life had been and what they felt.

I met with everyone. I expected about 20, 30 students might want to come back to my sessions that I was going to have once a week. I discovered the sessions would be like and who will chair the sessions, and I will have about eight students afterwards and whoever wanted to come was welcome. And I would give them, at the end of those, whatever the numbers were, 165 divided by 20, I took about two weeks. I will give them a piece of paper; yes I want to join and no, I don't want to, I don't have the time, or whatever reason they gave. I would like an all-African American, I would like an all-women's session, I would like a musician's session. Whatever they wanted. Or I would like a mixed group. Well, most everyone wanted a mixed group and most everyone, 95 students wanted to have sessions. And then I began to tremble on my feet because I thought, where do I find the time for whatever it is, eight students, 95 -- eight students in each group. So what I did do was to get the faculty members, and by then I knew who were the ones that liked students or loved students, and who were accessible to the students when they needed an interview, and who were the more regimented, magnificent researchers or magnificent clinicians. But, I had -- I knew the faculty members by then. It was my second or third year as a dean. And I called them, and I had a

session with all those people and I told them what I just described to you, briefly, and asked who wanted to do it.

And they were the group of volunteers, of which Dan --

ROSOLOWSKI: Goodenough.

EISENBERG: And there were two Dans, that I admired. Anyway, I got volunteers, and then we will meet, the chief of each one of those groups, and I, will meet once a month, and that was of course accessible any time they had questions, and I met. Dan Goodenough was wonderful at what he was doing, and so were the other people. I had a couple of women, some of those women faculty, that had some of those groups.

ROSOLOWSKI: Could I ask --

EISENBERG: I had one group of women that wanted to have, and that group, well the question was how many will continue after six sessions, and that to me was a puzzle. The great majority wanted to continue. So, I had one, and the first year, I had them the first, second, third and fourth year, and I met them afterwards, after the residencies, they came especially at one of the reunion, the fifth reunion, and we have another session after the five years. They came with their babies and they'd talk about their residency. I am still in touch with many of them at Christmastime. I get cards and pictures of their sons graduating from college,

et cetera. But I learned a lot from these women and from some of the men.

Then I did something else. I realized that some of the partners and spouses of my group were under great stress, so the following year, I started a group, at the beginning, for six weeks only, of partners and spouses of the people that came and needed jobs or didn't have anyone to talk and they follow their boyfriends or girlfriends for this great adventure of being at Harvard Medical School. And they have no friends and no jobs and they felt isolated. So I had marvelous discussions with them.

Then I did something else, but I mixed them then, just started talking about programs. I decided to have, at our home here in Cambridge, every Friday evening, for the first two or three months, dinners for the students and occasional faculty members that I knew liked students.

[00:55:00] My husband and I would have dinners and they will come and we have just a good time, and discussions. It was interesting, because I usually started discussions and said look, kids -- I wouldn't call them kids. They felt like kids. Look, fellows, (chuckles) this is not an admissions interview. What is it like for you? And boy

did they expand then. It wasn't, you know, I always had dreams of being a physician and be a Nobel Prize winner. Ad admissions they talk about those things. They said, you know, I got so scared at the beginning, I couldn't talk with a faculty member. They seemed so distant and blah-blah, and they would talk about politics and they would criticize some of the professors. They were free for all type of dinners. I never had one especially for women, but many of the women obviously came. In fact, most everyone came, women and men. But that was just wonderful, and then I would re-invite them in the second year, and they will ask, can I bring my girlfriend, my boyfriend.

Interesting enough, going back to what we talked about, to my great surprise and a little bit of disappointment, I wanted to have some for the couples, separate from the other students, because they were facing different sort of problems and satisfaction. The married couples didn't want to have the couples that were living together. Can you imagine that? Of course, it was, you know, how many years ago? But that was a great surprise and I said no, if you want to come. If you don't want, too bad, but I'm having. These were couples that came to live together, so we had

them together, and they got along very well. They were fabulous dinners, I just loved it.

ROSOLOWSKI: Could I ask kind of a side question, because I'm struck by the kinds of programs that you're mentioning all take a lot of facilitation.

EISENBERG: Lots of what?

ROSOLOWSKI: Facilitation. So, your strengths in group dynamics, in group therapy, as you were saying, that you bring as a psychiatrist, was something that you were demonstrating in these groups, for these young medical students. And I'm wondering to what extent they might have been learning from your example, how to have better interactions in a professional --

EISENBERG: That's an interesting question. I'd like to tell you, but I think we have to take a break.

ROSOLOWSKI: Sure, sure. We can come back to it.

[PAUSE IN RECORDING]

ROSOLOWSKI: We took a little bit of a break, and so we're resuming with the question of how your demonstrating these kinds of facilitative ways of interacting with other people could have affected the students in their own professional development.

EISENBERG: I don't know that. I cannot tell whether it did or not. I know it was helpful to them. I got to form relationships with some of those students, that were helpful to them. Particularly to women. I think the fact that we had a fifth reunion after, there were lunch, for the ones that are local, I still occasionally meet them in concerts or lectures, and it's just wonderful. The other question, I don't know the answer, I really don't.

ROSOLOWSKI: I was just curious because, I mean it seems like by creating these groups, you were contributing, not only to quality of life for these students, but also in a sense their health, I mean their well-being. I wonder if they themselves made the connection that as doctors, if they could establish that kind of rapport with a patient and even with other physicians and healthcare practitioners that might be delivering care to a patient, if they could improve patient care.

EISENBERG: I don't know. I think that maybe the ones that had the tendency or that predisposition or that kind of interest, maybe that became even more marked. I think that they were so busy with their own lives at that time and their own study. Some of them maybe felt enriched by them and some of them, it was just [01:00:00] a place to ventilate some of their frustrations or talk about the

excitement of learning in medical school. I think it varied more with individual. It wasn't my intention, when I created the groups. I felt that what I wanted for them was to get a network of support and find somebody that they could expand their vision about medicine or become friends with, at the time when time for them was at a premium. So, it depended very much on the individual, I think more than the affect. As I said, it wasn't my goal, but maybe this was a secondary gain, but I don't know.

ROSOLOWSKI: I have another kind of general question that occurred to me, which is that I've heard, or I've read, as I was doing research for this interview. I read statements by a number of physicians, generally male physicians, who said that they felt that women brought a more human kind of touch to the medical profession, when they were operating as faculty members of administrators. I'm just wondering how you see that. Do you think that you, as a woman, brought something unique and worthy?

EISENBERG: I think that women do, I think this is the case. At the time, yes. Don't ask me why because that's more complicated.

ROSOLOWSKI: Oh, I would love to ask you why.

EISENBERG: (laughs) But I think that women as a whole, bring a slightly different dimension to the interactions

with patients. For instance, during the time when everyone, and even now, in some specialties, some of the doctors were closing the office because of the number of suits. Women were not -- if my information is correct, and I don't have the statistics, but women were sued much less than men. I think we have the tendency to spend more time with the patients if we are given the opportunity, which now, with the terrible healthcare system we have, we don't have. But I think given the freedom, some women like to get to know the patient, other aspects that the men will just go through the physical examination in a different way. I think they are different in that way, in some specialties more than others. A surgeon or a pathologist of course, cannot do that, but I think as a whole this is true.

ROSOLOWSKI: And I have to ask you why. Why do you think that's the case?

EISENBERG: Well, some people talk about biology, some people talk about the environment where we grew up to be professionals. Some people talk about the needs to relate at a different level. Some people talk about being more human, not that male physicians are not, but it's a slight difference. There are all kind of theories and where there are so many theories, I think no one knows the answer.

ROSOLOWSKI: What's your belief though?

EISENBERG: I'm sorry?

ROSOLOWSKI: What's your belief?

EISENBERG: My belief is that we, as women -- enjoy is not the word, with some patients we don't enjoy that, but our lives get enriched by the fact that we know the person as a whole and not just the image that they present, the patient presents. I think that's a generalization, because of course there are men that like that too and there are women that wouldn't spend five seconds in asking the extra questions. But I think that there is a slight difference, yes.

ROSOLOWSKI: Do you think that patients --

EISENBERG: And there may be studies done about that but I don't know the answer.

ROSOLOWSKI: In your experience, are patients -- do patients respond differently to a woman physician than to a male physician?

EISENBERG: Some of them do and [01:05:00] some don't, and many more patients now are getting used to a woman doctor and they don't say, hey nurse. I think they do. I think the difference is decreasing as the numbers of women are increasing, but it depends also in the environment where the patient has grown up and the life exposures he has had.

ROSOLOWSKI: I was just thinking back to your own earlier professional life as a pediatric psychiatrist, and I was wondering if you felt that children, for example, responded more openly to a woman, because they might connect that woman to the idea of their mothers.

EISENBERG: Yes, yes, I think that yes, definitely, children did, because most of the children were exposed more to their mothers than to their fathers. You can invent all kind of theories, but I think they felt more comfortable with women child psychiatrists. At the end, it depends on the individual. My husband has a way of relating to young children that's amazing, not just to patients but to our own children and grandchildren. That's amazing, even when they were small. He has a story that he tells, used to tell to the children, about the child in Poland, how he put the finger in the dike and how the child became -- you know the story. And then our children began to tell that story to their own children. There are some men that have that ability and there are some women that are very rigid and need to follow a schedule and ask the proper questions. So it depends on the individual but as a whole, I think that children maybe relate better to women, and women patients better to women doctors, particularly OB/GYN.

Another specialty, it's that way in psychiatry. I learned, if I were to ask, why did you pick me as a physician, I know most of the patients would say, because I feel freer to talk to a woman. Most of my patients were women, when I was in private practice, although I had many, many patients. It's an interesting question and the answer as a whole, I think that women like to interact at a more personal level than men. Whether they are socialized that way is another interesting question, you know?

ROSOLOWSKI: Yeah.

EISENBERG: Of course. That's an important, important one.

ROSOLOWSKI: Well, I wanted to go back to the peer groups, because I wanted to sort of check with you, if this is correct. I believe that it was those peer groups that served as a model for, or that gave people the idea, that it would be possible to reorganize the curriculum and create the New Pathway Program. That's what Daniel Goodenough said in his letter at least.

EISENBERG: Oh, really?

ROSOLOWSKI: He did, he credited you. He said you were the unsung visionary who really created a cultural change in Harvard Medical School, so that people at all levels recognize the value of more personal interaction, so that New Pathway could come in.

EISENBERG: I am laughing at that because first of all, we have the mutual admiration society, but second, I wasn't all that important to creating a new cultural environment. I don't think that this was my case. That maybe had some influence in some individuals. Maybe he wanted me to get the award and exaggerated what he thinks. I'll be curious after I read the letter. I haven't seen that for 15 years, 10 years. It's always with a great impact, and we are very simpatico toward each other.

ROSOLOWSKI: Could you describe what the New Pathway curriculum was though, because you mentioned it before and we didn't define what it was for the record.

EISENBERG: Well, they changed very, very, radically, the whole structure of teaching, and they went from classes from nine o'clock in the morning until five o'clock in the afternoon, [1:10:00.2] to specialized areas of teaching, which they called the tutorials, where young groups will get together with a faculty member obviously, and in different small groups. In that way, that work was similar to the peer discussion groups. Dan was one of the most fervent defenders of the New Pathway. The classes were smaller. They still have a couple, a few. I don't know how to quantify how many large classes, but the majority of the learning was in a very small group that continued

throughout the year. Most of the students will do some of the studying ahead of time and then there were discussions about those classes. It wasn't sitting for hours and to hear a faculty member that was interesting, but in a small area of research, and we'll talk much more about that than about general subject.

And then there were different groups organizing to five societies, with a headmaster and an associate headmaster, faculty members, and then people that volunteered to come to the dinners or to be mentors. So the whole educational system was divided in smaller segments, and it was for the benefit of the students. First, they learned how to be independent, how to do things on their own and not just repeat verbatim, what they have learned. It worked out wonderfully. It wasn't created at Harvard, you know? It was a large... (pause) public advertisement. Not advertisement, but big press releases because, you know, whatever Harvard did, the rest of the country will do. But it was started in a small school in Canada and a small one in the United States, on a very small scale, but we enlarged it and it became much more so, but it wasn't invented at Harvard. Some people will disagree with me on this one but I felt that way.

ROSOLOWSKI: Now, when was the New Pathway system instituted at Harvard?

EISENBERG: I don't remember the year. I don't remember the year, but I left shortly afterwards, maybe three years later, because my role had changed too, because now the housemasters had an opportunity to interact with small groups of students and they did much of what I was doing before. So I did something completely different.

ROSOLOWSKI: I was wondering if even with that overlap of say three years, what kinds of changes did you see in the students who were going through that program. You mentioned the exit interviews.

EISENBERG: The students or for my role? I don't understand the question. Whether I heard the students. Well, the first year was experimental, I told you, with a small group. The second and third year, the students were delighted. I began to teach more in those years and I began to, for instance, during those years I taught the patient/doctor relationship, and I heard a lot from the students. They loved it. They loved it and the older students, this was true for the first couple of years in the New Pathway. Then they tried to institute changes in the clinical years, but they were not as smart. So, it was just for the first two years mostly and at the beginning,

they had a little bit of anxiety because the system was so different. They did not know whether they will pass the first part of the national boards and they did famously well, but the students themselves were under pressure, and they knew it. So there were some changes, maybe a little bit more of anxiety, but at the same time, delighted that they could [01:15:00] work independently, more independently, not fully of course, but there were changes, there were definitely changes. For my role, they were not. I saw maybe -- the ones more anxious kept gravitating to me, because they knew me better or they had a friend in the upper classes that told them. The headmasters, some of them were selected for that uncanny ability to relate well to students and because they were famous researchers and they wanted to include more people among the faculty for the students that wanted to do more research. Some would be African American housemaster, that was absolutely wonderful and a marvelous physician that worked at one of the local hospitals. They felt more comfort. The students didn't select the headmaster, mind you, but among the students that were assigned to different people, there were people that were more comfortable with one or another type of housemaster.

I'm trying to think whether there were any women housemasters. I think that was true. Dan Goodenough was one of them, the students loved him. But later on, yes, women were appointed and did of course, a beautiful job.

ROSOLOWSKI: I wanted to ask you, one thing that we haven't spoken about is the balance of teaching and private practice with your administrative work, because you were sustaining all three areas pretty much the entire time and you had, of course, family life as well. How was all of that balancing and what did those different areas of activity mean to you as you took them on?

EISENBERG: Well, you mean that was extra, extra, extra work. It meant that I had to put an enormous amount of energy into that. It meant something different. When I took that position, my children were at least physically grown, sometimes emotionally grown too, because they were all adolescents. I had more time to be flexible. But I always felt, particularly when the children were small and I began to work, and I had some privileges that most women don't have for a variety of reasons, quite often I was at work and felt that I had to be at home, and so often I was home, I felt I had to be at work. If they got sick, I particularly felt that. When they were small, I had many conflicts.

My oldest son was in first grade or kindergarten, and as I was putting him to bed, he was five, he said to me, "You are coming to school aren't you mommy, tomorrow?" I said, "Why?" He said, "We are having the play and I'm going to be Santa Claus." He was so big, he always was given. I said, "But you didn't tell me. I told you, when I went back to work, that if you wanted me you had to tell me ahead of time." And I told him about what the physician is like. I went through a great deal because I didn't know what I was going to do. I had scheduled patients at Johns Hopkins. And at the end I said, "Do you understand why I cannot come?" With tears in his eyes he said, "Yes, I do understand, but I am going to miss you and all of the mommies will be there." I said, "Well, you have to tell me ahead of time." And of course I changed the patients and of course I went to the play and I swear to God, this was the case; I was the only mother in the school, because it was a small little play that, you know, four or five kids had put together.

Well, I have stories like those ones galore, going back, but by the time I took the job, both at MIT and -- my children were in college. I had more freedom. I had a

very supportive and understanding new husband, proud of my new role and contented that I was doing something so important. In fact, my professional life took off here in a way that [01:20:00] had not been present before and I don't know how much was the move from Baltimore to Boston, how much that I was a little bit freer of the responsibilities I had before, but at times it was a hard juggling of different needs.

ROSOLOWSKI: In general, how many private patients did you have?

EISENBERG: Well, as many as I could afford to have, because I made it a condition, both at MIT and at Harvard Medical School, I had to continue seeing patients, and in both cases they said yes, as long as you can do your job. So I would see them early in the morning. I would start at seven-thirty in the morning, seeing patients, usually at MIT or at Harvard Medical School, in my office, and then later on at home. Then I'd start working at nine and then I will see patients in the evening. I had so many patients that I had to be selective and restricting myself and be sure that I didn't take anything that will interfere with my other roles.

ROSOLOWSKI: I have no idea how to translate what you're saying into numbers. Did you have a hundred patients?

EISENBERG: I couldn't tell you about numbers either because I never counted them.

ROSOLOWSKI: I was just curious that's all, because that's kind of hard for me to imagine.

EISENBERG: I don't know. Maybe I will see one or two patients in the morning, which was wonderful for the patients, because I saw many but many professional women, and they will not want to tell the people where they worked that they were seeing a shrink, as I was called in those days. Then, I would see them in the evenings. I don't know, maybe I would see patients occasionally on Saturdays. I do not know about numbers. It depended on the time of the year. They were wonderful at both institutions, by giving me the flexibility, because they knew I was going to do whatever was necessary there. Sometimes, I will see them at lunchtime, when I didn't have the peer discussion groups.

ROSOLOWSKI: I was just curious that's all. It's not overly significant.

EISENBERG: I don't know, six, eight.

ROSOLOWSKI: What about your teaching?

EISENBERG: Teaching, I loved. Also, with restrictions, different than most of the other people I've known, I do very well in small groups. I get slightly anxious less as

my experience has grown, in a class of 165 or welcoming 4,000 students to MIT. I guess because I grew up in a period and in a culture and environment where little girls where listened and not to speak. Later on, it was the same thing for spouses, although I had two incredible husbands that not only encouraged me professionally, but at a personal level, they will hear what I have to say and think and feel. But in spite of that, remnants of that, made me feel I can do it, and I've done it many times. There is a little bit feeling uneasy but I loved smaller groups, and I taught courses that I felt that were not taught in the medical school and that I felt the students will need or want.

ROSOLOWSKI: Such as?

EISENBERG: Human rights, which I taught now, for eight or ten years, and we haven't gotten to that, as a physician and I hope we have enough time because it's my passionate involvement for now, in the last five or ten years, professionally speaking. But I taught courses that were not taught. I think you have a list. I don't know where you got those lists from, but I taught enthusiastically and I would put comments from the students on my own, just to bring them, because mostly likely I will forget some of those otherwise.

ROSOLOWSKI: Well, you did freshman seminars at MIT, and then I was interested, [01:25:00] that you had courses on human sexuality and careers and life development.

EISENBERG: Together?

ROSOLOWSKI: Careers and life development.

EISENBERG: With sexual development?

ROSOLOWSKI: No, no, no.

EISENBERG: Oh. (laughs)

ROSOLOWSKI: That was two entries.

EISENBERG: I was going to say no, there were two different courses.

ROSOLOWSKI: That would be definitely an ethical problem.

EISENBERG: The sexual course I gave with two of my colleagues, and that was an enormous success. And I based part of my interest on the fact that at MIT, those group discussions and lectures were so successful. I felt that the students, that they were older and obviously have had more sexual fantasies or realities than the students at MIT, but they still did not know, they were so busy making it, to the best medical school, as some of them will describe.

Anyway, I thought that was a good idea and I discussed it with two friends that were wonderful, and we gave that

course that was again, an enormous success. What we did was to cover eight or ten subjects, and we organized it by inviting specialists in these different areas, and start a discussion. That person will start a discussion, one, one of us will start, usually the specialist, in a five or ten minute presentation, and then they would bring patients or we will bring a patient. We had one in prostitution that was incredible, and we had to pay the prostitute what she charged for the session as a prostitute, and we gave it to an organization called PUMA, whom we contacted, that was called Prostitutes United in Massachusetts. Yes. And what they had done was something marvelous. It was like a small group where the prostitutes that got sick or were beaten by *cafisho*, we used to call them, but the male owner of several prostitutes, or were afraid of the parents prosecuting them, because some were very young. Not prosecuting them, snatching them and take them back home. They will have sort of a protective environment and they consulted a lawyer, and they will help each other in times of stress. Some lived with children, their own children, would have a little bit of companionship.

What was funny about that first session, I knew it was going to be well-attended of course. I had a very urgent

situation in my office and I arrived three or five minutes late, and I have the memory of a movie I have seen, with Jane Fonda being a prostitute, whatever the movie was called. I've forgotten now, those many years ago.

ROSOLOWSKI: Is it *Klute*? I'm not sure.

EISENBERG: Maybe it was *Klute*, yes.

ROSOLOWSKI: I've seen it too, yeah.

EISENBERG: Anyway, and it was going to be a glamorous, heavily painted sort of a woman, and when I arrived, it was a woman like 200 pounds, sitting on my chair, next to the podium, with her feet on the podium. They were quite dirty, as a matter of fact, before we used these kind of sandals. She was just there waiting for the session to start, so I apologized to the class and of course to her, for being late, or maybe my colleagues took over, they were above me. I don't remember. She was talking and talking about her life, and I understood immediately, that she was a very bright woman and told about her son and her love for her son, and how she was afraid and how she had a dog, and she wouldn't take anyone that came with chains because the child was in the other room and she didn't want to be physically abused, and how she was selective. But the kind of things that she felt she was providing for males and how important it was. She described that most of the men were

men that [01:30:00] were separated from their wives or widowed, and she felt more like a social worker, sort of giving them a release and letting them talk. And when I heard all of this, in spite of her physical presence, that was so overwhelming by comparison with Jane Fonda of course, I realized that she was quite a good presenter.

So, at the end of her presentation, students asked questions, and I was boiling inside because -- and finally the question came from me, I said, "Didn't you feel abused by men using you as a way of..." And I described my question. And she looked at me like if I was dirt under her feet and put her arm on her hip and she said to me, you know quite clearly in charge of the situation, she said to me, "I am a nurse, a registered nurse. I worked at Boston City Hospital." Now it's Boston something else, Boston University Medical School. "They were exploiting my hands and my brain, what's the difference between exploiting that and exploiting my vagina?" I didn't have an answer. I didn't have an answer and, you know, she didn't feel differently. So I said, "Well, I guess different people feel differently because..." da-da-da-da. And she said, "I earn the same money, I have the freedom of my schedule. I feel not exploited, because I do it because I want to."

So I learned from that course a lot too. The other ones were interesting, yeah.

ROSOLOWSKI: Let me just interrupt you here, because I need to change the disc.

EISENBERG: Yes, of course.

[PAUSE IN RECORDING]

ROSOLOWSKI: OK, we took just a brief break, to change the discs, and I want to identify this disc as disc number two in the interview of Dr. Carola Eisenberg, on June 11, 2008. You said you wanted to add something.

EISENBERG: Just another thought as we took the break and went for the coffee. That I learned also, from women patients, some of the problems they were facing. For instance, we had one on breast reduction and extension, whatever the technical words are. We had a grandmother, a mother, and a daughter, three of whom had to have their breasts reduced, because they were whatever is the maximum, I don't know, E, or D5. They were enormous, according to them. They were very humble people that had to -- one worked in the post office and the other two were doing very menial jobs and they didn't have very much money, and they didn't have good insurance of course, but they decided,

first the grandmother, to have that surgery, and we had the surgeon that operated on the three presenting the problems. I remember one of them, I don't remember which one, saying, I was going to a meeting -- and of course the three women (phone rings) moved up in their professional roles and their earning abilities and everything else, but one of them said, "I remember going to a meeting and I was the only woman in the meeting, and everyone was not looking at me, they were looking at my bust. I decided I was going to use the money for that, no matter what." But then I realized how often that did happen. I always, not just in this case with the physical problem they were having. The other one was talking about she, at the end of the day, couldn't remove the brassiere fast enough because they were hurting her shoulders and she couldn't wear it because of the pain.

But I learned always from patients, and much, when I was doing other psychiatry, with women that were most of my patients, but most of them, as I said earlier, professional women. Some of the things that I was too stupid or too insensitive or too busy or too, whatever I was, that I did not notice before, and I want to pay tribute to my women patients, because I started with something that was just a

small example, but [01:35:00] for my women patients, the things I learned from them were enormous and I just have to say that. Now we can move to the questions. You asked what?

ROSOLOWSKI: Well, this is actually right in line with what I wanted to ask, so thank you for bringing that up, because you were seeing private patients during this time. You were teaching, you were doing the activist kind of work in your administrative role. I wanted to ask how those three activities fed one another at the time.

EISENBERG: Well, I have to say before, that I loved every one of those things and I didn't want to give up any. I just loved, so that every time I thought maybe I should do this less or maybe I should -- I felt depriving myself of something that I thought and hopefully was of benefit to the students or to the patients. But it was also a marvelous thing for me.

I wrote a paper once, *It is still a privilege to be a physician*, and I wrote that because I only write papers when I am moved by passion, either positive or negative. I am not a writer, I am not a researcher, but when something burns me up, I just have to let the people know. They fed into each other, they really did. As being a professional

woman, early, when my children were small, helped me. It didn't help me being a better mother, because I thought I was, and I still think I was a very, very good mother. My children might disagree with that. But I had strong feelings that I became a better professional person, because I was a mother, and a better mother because I was a professional person. I didn't go through some of the boredom that some women have when they are home and they got tired of fixing the same stew day in and day out. So, I found that was true later on with the teaching and all of these other things. I had doubts earlier, as you have heard from yesterday, and I needed the reinforcement of knowing that I was doing well for the capacities I had.

As a look back at my career, I did everything I wanted and I think I did it well, but I got such satisfaction at each one of those three roles that you mentioned, I didn't want to give it up, until recently, for obvious reasons. I just loved both the dual role as a woman, as a wife, as a mother, and the professional role. And then later on as I expanded because I had more time, the three different roles. There were doubts. Maybe I'm presenting too positive a role. I had doubts. For instance, when my children, to stand, when they are grown up, how I divided I

was at times. Well, I guess life has proved me, or has proved, I didn't have to worry. My sons have met professional women and that they were willing to repeat that life experience and they are proud of their wives and they are wonderful human beings, et cetera. So, some of the anxieties I had, and the same thing was true; maybe I could be a better doctor if I don't start at seven o'clock in the morning. But I couldn't give up any of the things I was doing. I loved it. You chose three roads. There were other ones that became important later in my life, very important. And we'll talk about that later on.

ROSOLOWSKI: And we'll talk about those, yeah. I was just trying to kind of get a snapshot right here because it struck me that, particularly, you had mentioned how your career really took off when you came here to Boston. It struck me, as I was looking at the variety of things that you did when you were at MIT, and how that expanded when you came to Harvard. It's almost as though, you know, you were first focused on kind of [01:40:00] individual experience, but then became involved in administrative and kind of institutional experience, so changing that. And then kind of feeding institutional change back into an understanding of how individuals develop as professionals. And I could see how, sitting down with private patients and

hearing about the experience of a professional woman who's struggling, would make you reflect more on what your own -- the students in the medical program were going through, what you maybe, as a professional woman was going through, and how that could also feed into your teaching. So it made this kind of interesting feedback circle.

EISENBERG: Well, they interact with each other, I know that, and with my earlier experience, all of them, all of those. But I also, and I have to mention that some time, I was very lucky in my personal and professional life, not without low moments and difficult moments, terribly difficult moments, but also, because of many things, including the changing times, I was offered things to do. Only once in my life I had to look for a job. Can you imagine how many people can boast about that? And it was when I moved to Boston. This was the only time. They were offering me things and I couldn't resist the temptation of trying, and this was partly the times and partly the things I experienced growing up and some of the pains that I talked about yesterday. I think they all influenced each other, I know that they all influenced each other. There were times when I thought I should do more of that, and then something else came up and I just couldn't say no. My social conscience in some cases would bother me, and I want

to sleep at night, and I sleep well, thank you. So I had to, say well I tried. I always, somewhat timidly, I'll try, and if it doesn't work out, no hard feelings, I'll go back to what I was doing before.

I always hated to leave the last job, because I enjoyed everything I did do. How many people can say that almost at the end of their lives? I just loved everything I had done.

ROSOLOWSKI: Were there any particular professional disappointments that you had?

EISENBERG: Yes. When I had to leave the dean's office in the medical school. Yes. Oh, what a YES, with big capital letters. When I had to take national boards, that was the worst period professionally in my life. Yes, in small ways, when I couldn't do well with a patient. Yes, when a (gasps) student that I did not know at MIT, committed suicide, and I had to call the parents, sometimes in the middle of the night and tell them that. Was that hard.

ROSOLOWSKI: Was that --

EISENBERG: That wasn't a disappointment, that was an overwhelming sadness.

ROSOLOWSKI: Was suicide -- how frequently were there suicides?

EISENBERG: Well it turned out, we did some studies afterwards, because I was getting worried and oh. The one thing that was so difficult for me, it turned out that it was more than other universities. Every time it happened was a major tragedy obviously. This was a difficult time. It was, as you said, disappoint -- professional disappointment. I never thought that was a personal disappointment really. It was an enormous sadness that overtook me. There were disappointments, there were difficult times. [01:45:00] When, despite trying terrible hard, I couldn't fully connect with a patient, where I felt that maybe something else was needed that I couldn't provide. Those were frustrations more than disappointments, some of them, the ones I mentioned.

ROSOLOWSKI: Could I ask you another question?

EISENBERG: Sure, any question you want, and stop me when I talk too long, please.

ROSOLOWSKI: OK. Well, it's always a balance between making sure you have enough time to answer and moving on to the next thing. Just as you look back over your own career path, I'd like you to maybe compare it to some other people's experiences. You actually changed institutions a number of times during the course of your career, whereas

other women stay in one place. I'm wondering if you see pros and cons of these two career strategies.

EISENBERG: Yes, both.

ROSOLOWSKI: Could you expand on that maybe?

EISENBERG: Yes, both. I think there are many advantages of staying at one institution, if one feels, a woman particularly, feels successful, understood, supported, and is given, according to their ability, increased roles and can move up the academic ladder, and can get the challenges of new excitements in the field. And it has the problem, at least in my personal life, I was each time enriched by a challenge and a new set of rules and regulations and new life experiences, professional life experiences that were enriching me. It depends, again, when I make generalizations or I project myself into those things, I think that's not fair. There are women that prefer the security, if they feel comforted by their roles and happy with their roles, and continue to learn in the same setting, they feel much better about that. There are other women that love the new challenges. There are very many differences in the personality structure of the individual, and many times the changes were sort of imposed by life circumstances or new -- mostly by life circumstances

really. Because I always, as I said, I always loved what I was doing. So it depends on the individual I think.

ROSOLOWSKI: There's an extension of that question. There are many professional women, in fact, I read a speech that you gave on the Net, and you made this observation, that the careers of many professional women kind of start and stop, and they take unexpected directions, whereas it's assumed to be a norm or it's the more usual situation for men, to have a sort of unified career path. I'm wondering how you see yourself in all that and how do -- well, I'll ask that first. What about that broken versus unified career path, how do you see your own career in those terms?

EISENBERG: Yes, I moved, not a lot really, considering some other professional women. From what you heard yesterday, you heard why I moved from one thing to another, and each time I felt enriched after I have done the change, although it was terribly difficult for me to move from one place to another. If I was given the choice and I knew that it was secure and good for the institution and for myself, I would have stayed much more steadily in one place, I think.

ROSOLOWSKI: How do you imagine your professional life and your personal life would have been different if you had been given that opportunity to stay?

EISENBERG: Well, it is a challenge [01:50:00] to get into a new job. There are a series of excitements and the learning process continuous, and for anyone that has some doubts, will I be as good here as I was there, after I've proven success in one area, to go to another one. In some ways, going to Harvard Medical School, I was not any more, in an academic council, for instance. I had to relinquish that. That gave me enormous satisfaction once I learned how to proceed. But it gave me the satisfaction of going back to my professional role in an institution where I grew up and I was familiar with and it was smaller and I felt more personally connected with the students because there were 165 versus 4,000, and they were older and et cetera, et cetera. So there are always pluses and minuses in my career, and I suspect to many of the other people. And the same thing was true leaving Baltimore. It was much harder moving here, and particularly because I didn't have a role here, because I didn't have time to organize a new role.

ROSOLOWSKI: That was a perfect example, that moment when you left Baltimore with Dr. Leon Eisenberg, to come here.

EISENBERG: Yes.

ROSOLOWSKI: That was a perfect moment when the personal and the professional intersected.

EISENBERG: That's right.

ROSOLOWSKI: I'm wondering if you could talk more, would you talk more, about how the personal and the professional have related for you over the course of your career.

EISENBERG: Well, for me, I can only speak for myself, personally was so excited and delighted and happy at the prospect of sharing my future life with Leon. I was thrilled. This was a man I respected professional, personally, I admired and liked as a friend. Then, I was overwhelmed by the excitement of thinking that my personal life as part of a couple was finished, and to renew that. I was so enormously happy that I was, at that moment, willing to give and leave everything behind and to leave my new life, which is what I did. And I did it because for myself, a personal life as a wife and as a mother and as a friend and all those other things put together, were always my first goal. I needed that, I wanted that, I got that, and then the whole thing collapsed suddenly, so I was depressed. I was in a grief reaction, the likes I never knew the intensity, and this man made me become alive again and it was a thrill of -- I cannot describe it. But I knew that my professional life was -- I knew I always could do something. I have enough confidence and I have had enough success, that I knew, but I didn't realize how hard it was going to be.

In fact, one of my sons that was a freshman at Harvard then, came one day to have lunch with me, and I thought oh my God, what's happening now, because that was an unusual thing. Usually, he went the other direction. I thought maybe he had a new girlfriend that he wanted to marry, at 17 or whatever. Who knows what. We had a lovely lunch and then he said, "Mom, I want to talk with you." I don't know whether he even remembers or whether I talked about that experience. I said, "What about?" "Don't you feel sorry for yourself, wasting yourself running a vacuum cleaner and doing nothing but fixing dinners and trying to make new friends? With the experiences you have had, how come that you don't have a job?" And I said, "Well, nobody has offered me a job. I had to put this rented house together. It's the first time in my life I can go for a walk by the river or pick up a novel and read it without the pressures of time, and I've been [01:55:00] making some efforts but they have not been successful." He said, "Get on the stick ma and get a job. Doesn't your social conscience bother you, with your training, not to be helpful to people?" And that all coming from a 17 year-old son. That was -- I had to do something, which I was doing, but he did not know. I

couldn't bother him with my frustration of not having a job. But he was right.

ROSOLOWSKI: Well, I'm also just amazed that he would sit you down. It's a testament to how you mothered him, that he would understand that.

EISENBERG: Yes. Well, there are times when they will discuss that, but they are wonderful human beings. I have to talk about them some time, talking about professional roles. Do you want me to tell you about them, just a couple of sentences?

ROSOLOWSKI: Sure, if we do that now, or we could do it a little bit later.

EISENBERG: Or we can do it later. I will do it later if we have time.

ROSOLOWSKI: OK, let me make a note.

EISENBERG: I am so proud of those sons of mine.

ROSOLOWSKI: Though, here's a kind of related question. How did professional demands influence the choices that you made in your personal life?

EISENBERG: When I was really very young, a requirement for a boyfriend was that he was taller than I was, (chuckles) and good looks were important and, you know, fantasies of an adolescent, wanting to attract other people. And then it became quite interesting to me that I needed much more than

that. Of course, if they came with a side -- pleasurable side issue, because I learned that (inaudible) is handsome, the first time may not be handsome and what difference does it make. And then later on, I began to -- I needed somebody... And this is against what most women will think now, feel now, but at my stage in my development and my type of emotional needs, I needed somebody that I felt that was more intelligent and more learned than I was, and successful in their own professional roles or personal goals. And then later on in life, I learned that different people have different types of intentions. Some people that seem very learned, didn't develop the part of the personality that has to do with the human interactions, and some other people have that facility, but I don't remember the papers they had read. Or some people can write better and other people can speak better. Intelligence is a very flexible sort of a thing, so my needs have changed and my personal needs have changed as I mature, as I observe the board, as I learn from patients, you know, the kind of things that happen as one grows older. They have affected my professional life more so than the personal life, because the personal life, I don't know how to group that, because I've been extraordinarily honest, both in the personal and professional life. The personal life, I have

been so fulfilled by what I considered great happiness at all levels; the husbands, the children, the friends.

The professional life, my greatest pride, I think, is that I never sacrificed my own [02:00:00] needs or my own goals or my own desires for the price to obtain. I wasn't a particularly ambitious professional, as you know from my early life, and the opportunities were given and I picked them up and I did a good job, but never shaking hands with people that I detested or saying words that I did not feel. We all had to have a degree of politeness, yes that I did do, but selling myself for a better job or being dishonest, what I felt dishonest, with myself, never. So that's my pride, yeah.

ROSOLOWSKI: In the course of those opportunities, professional opportunities coming to you, and demands of time and energy that they required or that they exerted on you, how did those professional demands affect how you were in your family life as a wife, as a mother, as a daughter.

EISENBERG: It affected all those things, yes they did affect all those things, particularly when the children were small, I mentioned that before. I so much wanted to be in both places and you can't, so it affected me. There were times I'm sure, I don't remember them, but I'm sure I was

irritable. I don't remember special times when I wish I would have been... professionally, I could have been writing papers that would have moved me faster in the academic world. I didn't care about those things really. But the influence on my husbands both, and my children, yes, sometimes were very much, I think. Not greatly, but I'm sure that I had to give up some of those precious moments.

ROSOLOWSKI: You've mentioned how that balance between family life and profession was so much an issue for the women students that you had interactions with, and the balancing act that you achieved as you were going through that, you said served as a model. You realized at a certain time that you were a role model, and I'm wondering at what particular point in your own career did you suddenly say to yourself, "I'm a role model for other women." How did that realization come to you and when?

EISENBERG: I never thought of myself as a model for anything, you too know that. Yes, I was proud of the women that were progressing, yes I gave speeches to encourage women. I became very active in the National Institutes of Health, when they had a section of women, I gave talks. I believed all those things happened, I wouldn't have done it otherwise. I believe strongly, I still believe very

strongly, that we have marvelous support. We are marvelous contributors to human mankind. Contributors doesn't even seem to say it. I don't know if it's the right word. Contributors gives the impression that the men are doing and the women are contributing. No, I don't believe that. I think that we are part of human mankind, and we can do extraordinary things. I believe all those things. But to see myself as a role model, I don't think I ever thought in those terms. I guess, I don't know why. As I am going through this intense psychoanalysis in two days, I realize I could have seen myself that way because of the times. But always, of course now they want to be nice to women because they have to, so they are nice to me. And then I proved I could do the work [02:05:00] and I guess at those times, somebody more secure than I was at that time could have said that to herself, but I never thought. Even when you used those words, I feel like smiling, "Who, me?" What are you talking about?

ROSOLOWSKI: What words would you use?

EISENBERG: I'm sorry?

ROSOLOWSKI: What words would you use?

EISENBERG: I'm just an elderly woman professional that did a very good job at everything she was given the opportunity. That's how I felt and yet, as I thought about these

questions, I realize, I guess at some level I was a role model, but I was too busy to give myself credit, maybe that was why, because if I would have analyzed, of course when I met with the women medical students at HMS, of course when the women had conversations in the restrooms, it was like (gasps) you are the dean of students, I finally met you, oh. If I was, I guess not so busy, maybe I would have thought. If I were to ask my husband... Last night, he asked me how did the day, had gone. I said I loved every minute, she's a wonderful interviewer and it's interesting, to review one's life. I found it very thrilling. And he said to me, in response to a similar question that you asked, I said, you know, I did the best I could with the equipment I had. And he said to me, "Did you tell about that student," that blah-blah-blah. Well, he remembered something that I had forgotten, because I was always doing and doing the next thing and learning the next challenge, and I guess I am who I am.

I speak to my sister every day, who is incapacitated and very, very old, and to her it comes as a sort of prize, that somebody will come and interview me for two days, and you got that award and you're going to get another award, isn't that wonderful? Because her life has been so very

different that it's hard for her to grab that we grew up in similar circumstances. And it's hard for me to see my -- there are times when I think, but never as a role model, I think my God, when I think where I came from, the school and the jail and the woman that wanted me Catholic and the three hours in the subway, and hoarding the money tight because otherwise, I wouldn't be able to get home, how do I get home. And I didn't have a telephone at home. You know, there were moments that were so anxious, when I think of where my life started and where it's ending up, I think, I am so lucky that I've been given so many opportunities. I was so busy, so very busy, trying to do the best I could with the equipment I had, that I never considered myself as a model.

That's a long answer to your question but it's very sincere. Other people maybe saw me that way. And as I looked where I came from and where I am today, I think I guess I was, and I guess I wasn't retarded, as I thought I was in the first grade, and maybe I wasn't the things I felt at that time. I don't know why, my parents were loving, they were very much together, but there were reasons, I know now. See, I understand my life much better now than I did before because I wasn't fully mature when I

was obviously a child. Later on, because I was too busy doing and thinking and working.

ROSOLOWSKI: I think that's a wonderful answer.

EISENBERG: This is an honest answer to your question.

ROSOLOWSKI: Another question that's more institutionally based. Did you encounter what we call today, old boy networks?

EISENBERG: Oh, yes, oh yes.

ROSOLOWSKI: Could you describe some of the situations and what you learned from them?

EISENBERG: Well, I guess yes, I encountered them all over the place, [02:10:00] much more in Argentina than the United States, but present in the institutions I worked. I guess it was part of the times I was part of, why the men were socialized, part of the fact that for so long, they considered themselves the doers and the thinkers. Many reasons. More for some individuals than others, but I encountered that and I touched on it very briefly. As I encountered later on, men that were willing to take chances. With people I knew, have not proven themselves to be great administrators, but they had a sense of who could do it and they gave us a chance. And now there are more of those men. The ones I learned to distrust, I still do, or dislike more than distrust, dislike, are the ones that paid

then and less now, because they are usually very smart and the men I related with were all very smart. They make the verbal commitment to the cause of women professionals and inside, either consciously or unconsciously, they don't like it. There are lots of those. The ones that straightforward said, well I don't know whether she'll be able to do it and are honest with themselves and where they were, I said well you'll learn differently. Give us a chance and you will learn differently. But the ones that made the verbal commitments and then put their foot every time and start to walk, those I detest.

ROSOLOWSKI: What were some ways that you could recognize men who were like that?

EISENBERG: I don't always recognize it, I don't always. I'm sure there are some more.

ROSOLOWSKI: Can you recount a situation in which you encountered someone like that?

EISENBERG: Well, not about sexism, no example comes to mind, but racism. A very liberal man that it all kind of -- when the moment came to put the vote as to whether we'll extend the number of African American and Latino and American Indians and all these other things, began to make terrible noises against it. And that, I am sure that he wasn't fully aware of what he was doing and unconsciously, he had

it hidden from himself. I hope that was the case. But, sexism, well, the men that says yes, I want to have women in my department and then they delay the process by putting stumbling blocks that were not with the men that they trust a hundred percent. Yes, I have examples of that, I could give you examples of that. Those are the ones that...

I'll tell you why I don't trust them, because in some cases, they are not aware themselves of the prejudices they have inside, for whatever reasons they have them. And then I cannot trust them, that they move at the right time, in the right direction as I see it, and they do things that if we as women will confront them, would say well... And they will look for rational decisions for that.

ROSOLOWSKI: I'm thinking, as you're describing a situation with these two different kinds of men, how difficult it is to create the psychological and emotional changes in individuals that you have to accomplish before you can actually have cultural change. What's your view of how you can most effectively create that change, even when you're dealing with very unconsciously resistant people like that ones that you described?

EISENBERG: Well, we have created -- we. I had nothing to do with it. The medical school, for instance, the hospitals,

[02:15:00] created them, many hospitals at Harvard, so the supervisors. A woman, in one case, at the Brigham and Women's Hospital and the other one at the Mass General, and they might have it in other hospitals as well, that specializes in promoting the cause of women, and in some cases also, the racism problems that they have in all places, as they have against women, as we talked about before. The women feel free, some, I'm not sure about them all, to go to these women, and the women that are knowledgeable of the institutions, the environment in general, and the women professionals try to accelerate that process and are successful, not always, but in many, many cases. I am all in favor of that, because somebody has to know both the institution and the city and the people involved and the women, because there are also some women that because they are women, would like to move up, and they don't see themselves objectively. But that's very seldom, it's usually the other case.

One of the women that heads now, the program at the Brigham and Women's, her name is Carol Nadelson, and I got to know her because we were invited, 25 women from different universities, to go to China, before it was open to tourism, for us to interact with Chinese women, to give the

same spiel of how we can do both. We went with a very limited budget of course and we had to share rooms. I shared rooms with Carol, whom I knew from before. I knew she didn't smoke and I know she liked to sleep, (chuckles) so it was also decision making time, because I never had slept with anybody but my husbands, et cetera, my sister, whatever. I won't go into those details.

Anyway, Carol and I talked a lot about these issues at that time and it was many years ago. She's a psychiatrist and she was made the first woman president of the American Psychiatric Association, and she was also first in many other areas. Happily married, gorgeous children, struggling also, with the things we talked about, the teaching and everything. We talked a lot about that, so we had lots in common. She then was made head of the university president, when her time ran off.

ROSOLOWSKI: The university?

EISENBERG: The American Psychiatric University president.

That was a big job also, at first, for a woman, and she, like I, had first many times. We talked then a lot and her husband and my husband became friends. As couples, we went together to movies or had dinners, whenever we had time, and talk about the children. One day, I guess we had a

couple of drinks, the husbands began to talk about what's it like being married to a professional woman, and they began to talk about, you know, they don't come with a martini at the door, sometimes they have meetings themselves. And they began to tease us and they began to talk about what it was like. It's not like my father and my mother. So we challenged them and said all right, put it on paper, describe what it's like being married to a professional woman, but do it seriously, don't tease us or each other, because there were things in themselves, why they picked us as wives.

Anyway, they wrote a paper and it was the first paper in the American Psychiatric, before Carol became the president, it had nothing to do with that. I ought to get you that paper.

ROSOLOWSKI: What's the name of it?

EISENBERG: *What it's Like Being Married to a Professional Woman.* [02:20:00] You can get it, I am sure. And it was the first paper in the journal, that is always about schizophrenia and what kinds of drugs to use, and infantile autism. Anyway, they wrote that paper and my husband, that was older, and since then Carol's husband tragically died. They decided that Ted Nadelson was going to be the first

author and Leon was going to be the second, but Ted could not go to the meetings, so my husband read that paper in the section of women of the American Psychiatric Association (laughs) and they gave him a standing ovation. They were mostly women, and occasional men, and it was such fun. We really had fun with that paper. They gave it to us for approval and we didn't want to change anything. If that's the way they felt, it was fine. It created some -- one letter in particular, that I remember, you know how they write letters to the editors afterwards, one that was in disagreement, written by a woman. But anyway, that was fun, but why did I get to that subject?

ROSOLOWSKI: We were talking about cultural change.

EISENBERG: Changes, yes, changes in the roles and changes in woman and what it's like and how to combine both, and unconscious and conscious. Oh, we were talking about yes, how the women needed to talk sometimes, to another woman, to be able to fully describe their frustration with their chief of services. There have been very serious cases and some who have gone -- there is one now at Harvard Medical School, that the woman has sued one of the hospitals. I don't know what's going to happen. Of course the hospital, they have lawyers involved. There are very serious problems with that.

ROSOLOWSKI: I have one more question in this particular section, and some of these issues you've already touched on, so let me read the question and if you have anything to add, or if you feel you've already answered it, you can let me know either way. How did social movements and other national or international events, have an influence on your career? And here I'm thinking about World War II, the postwar events in America, which were about sending women back into the home. And then of course the Civil Rights Movement and the Women's Movement.

EISENBERG: It all had an enormous influence on me personally, and women in general, for some of the reasons that you mentioned, something we talked about yesterday. For the fact that I -- my social conscience continued to be very active throughout, starting in childhood, as I described, all the way through and up to now, and anything that I consider a moral injustice or a political injustice or a misstep on the part of the people that are in charge, pulls my heartstrings and I have to react. I cannot be quiet and I've been active and I will continue to be active until the end of my life. So, they had an influence on me, had a great influence in many women, more to some and less to some other ones. And yet women are very happy and contented with their own role and with limited goals. In

fact, there is quite a bit of movement now, I think, in a little bit of the other direction, of women that yes, don't want as much data centers. They want to be with their babies and once they get to their babies, they have a great deal of difficulty separating from them and assuming other roles. And these are some professional women that have worked before and thought -- we haven't seen those extremes in medicine, but I know that the stress, that the women talked a lot, was what happens when they have not enough time with their babies, because the medical schools have been so stringent about time for the mothers, and the fathers, to spend three weeks with the baby. [02:25:00] That's not enough for some mothers. Some want to get out a day later, but most of the mothers want to, and they go through the tortures of hell leaving those babies. They have thought for nine months, what's the best arrangement, and then the arrangements don't work and the nannies don't come, or they expect much more money than what they have. That's an enormously stressful time for parents, which brings me to one thing that I didn't mention, that you didn't have in those questions, but I want to mention that a colleague of mine that was the psychiatrist in the medical school area, and I were good friends. We have known each other before and liked each other. One day we

were having lunch together, which happened very seldom, because we didn't have time for lunches, and we talked about the fact that both of us were getting tired. At the beginning, women, and very occasionally some men say how did you do it all? I am so scared. So the two of us, she and I, started a group to start with ten women, medical students, volunteers that would come with a brown bag, and we'd have lunch at the library and we will tell our stories, in a very abbreviated one hour. We will talk half an hour and tell us what your questions are. The same questions you have asked me, with the luxury of time, and we would tell our stories, because we were tired. They would come one by one, quietly, and they had a boyfriend. Occasionally, the men say I have a girlfriend and we are thinking about this and we have to apply and we don't know, but the residences. They were kind of concomitant questions. So we said, we'll get rigid numbers, and then what happened was that more men began to come, and it was a great success. This was a program that I didn't mention before, but we liked it. We loved to tell our stories because they were stories of hope. She also was married, she also had children.

ROSOLOWSKI: What was her name?

EISENBERG: She's dead now, unfortunately. I'll have to think of her name, this was many years ago. I'm sorry, I cannot remember. Chris, the last name was Chris, and the first name, I don't remember. She was married to another psychiatrist. Anyway, and then men began to come as well, and there were men that were in relationships. And then, we would invite women residents or more senior women physicians, because our story was a little bit more removed, because our children had made it or they thought they had made it, and we were elders in another time. So we would ask them to come and give them their life stories and where they were and why. We invited both who were married and people who were not married, people that have children and women that didn't have children, men that wanted equality and were married to physicians. They were the speakers and then the other question. Then one woman told us, and she was right, how come you didn't invite a lesbian woman? And she was absolutely right and we apologized and we invited a lesbian woman that was in a relationship with another woman, and a very important relationship, who had adopted children, et cetera. So that was a great success and I think it was a help to the women.

I felt we were not very helpful to the women in China, but that's another set of reasons. But I wanted to mention, I thought about yesterday, after you left, after you asked me about programs. I don't know whether it's continuing or not.

ROSOLOWSKI: So that was an official program. Do you recall the name of it?

EISENBERG: It didn't have a name and it wasn't official. We just did it because we wanted to. I have the tendency to be very casual about all those things. The group of women that were discussing issues, among the medical students, other issues as well, had a name, which I don't remember. Some of the organizations for women, the program that Eleanor Shore has started, has a name, [02:30:00] now named after her.

ROSOLOWSKI: Oh, wonderful.

EISENBERG: And her husband. She and I would meet and have lunch and we'd talk about our children and our times, and were we doing the right thing or not. It was lovely. Do we want to take a break?

ROSOLOWSKI: Sure.

[PAUSE IN RECORDING]

ROSOLOWSKI: OK, you had wanted to add to the conversation about programs that you established.

EISENBERG: Yes. I had forgotten a group of women residents at the Mass General Hospital, affiliated with Harvard of course, asked me whether I wanted to meet with them on a regular basis. They were all women that were feeling the pressure of working at one of the best hospitals and in a very male environment. So I said I will be happy. So, what we did, there were eight or ten women and not all could come because if they were on call, of course, they had to stay at the hospital, but we met at each other's homes. It didn't have a name, it wasn't officially recognized, but we had some coffee or wine and cheese or something simple, and the women would talk about their stresses as women in medicine.

The woman that asked me to head that group was a woman, had been in one of the women's groups in the medical school and knew me from then. Now she's a full professor in fact. I learned a lot from these women, because I had known them as college students, I had known them as medical students, I have known exceptional women that had made it to the faculty at Harvard Medical School, but I never talked on a regular basis, with women residents, and some of the

stories were appalling to me. I really didn't fully know some of the stressors those women were exposed to.

ROSOLOWSKI: Could you elaborate on those?

EISENBERG: One woman was married to a resident that was a surgeon, and they had had rounds in common at that particular time, and the spouse, male spouse, as they had finished with surgery, and one of the surgeons said, "I told you so, she doesn't use a brazier." And the other one said, "How do you know?" I told her -- I won't mention names, I put my hand on her shoulder and said, you have done a good job, and then I realized that she was not wearing a brazier, and there was the husband among the group of people that have heard that about his wife that was a resident somewhere else, in the same hospital but not in that service at that moment. That's an example that jumps to mind. It was just awful, just awful, some of the examples they gave, and some of the stresses, because internship and residency is a terribly difficult time from the point of view of sleep deprivation, from the point of view of challenges of knowing medicine yet, from their new roles, from there, et cetera. And to have that, the anti-women, subtle, another example of a man that was talking. I did not know the man but from what I heard, the man that made that comment, but from what I heard, when he talked

with the women, he seemed to be in favor of women residents, but when he behaved that way, that's one more example of the unconscious things that among men, in that little niche, they feel comfortable to talk about and comfortable to think themselves.

I was saying earlier, the unconscious or conscious needs. Those are the ones that I distrust, those are the ones. But this was a good program and it ran for a while. I don't think it continues. Number one, the number of women have increased, and that's true in the medical school and the medical profession. Now, in medical schools, we are about, in different schools, 50/50. So there is much more mutual support and there is much more [02:35:00] understanding of each other and much more... I was going to say tolerance and that's the wrong word. Much more understanding of the males, that some women, and also think and learn and behave professionally under all those things. But in those days, that was one example that just appalled me, just appalled me.

Anyway, we are going to take a break now and then we will go into my next professional role.

[PAUSE IN RECORDING]

EISENBERG: Just go ahead. This is so much better than yesterday.

ROSOLOWSKI: Yeah, I'm glad we decided to do this.

EISENBERG: That's a good idea.

ROSOLOWSKI: We are back after a lunch break. It is one-thirty and I wanted to turn now, to your human rights work. Could you describe to me, the process by which you shifted your attention to the issue of human rights, and when.

EISENBERG: When, 20 years ago, 21, almost 21 years ago, and I didn't shift my attention. Yes I did. I added, to the things I was doing, a new challenge, because somebody asked me whether I will consider going to El Salvador, that was there then, in a terrible civil strife, and investigate what was happening in El Salvador. Somebody asked me from New York.

ROSOLOWSKI: That was in 1983.

EISENBERG: Yes, that's when it was.

ROSOLOWSKI: Who was the person who asked you?

EISENBERG: I don't remember. It was a physician and he told me he'd been reading the papers and he had a group of people that he was trying to organize in Boston, the people who worked from Boston, who I considered going. I knew

what I had read in the papers, I was, I am, and I will be forever against wars, and particularly internal wars where brothers kill each other. I was terribly upset about what I was reading, of what was happening, and I said I would go. Not without trepidation, because I didn't know very much about it, because I was very afraid. They were murdering lots of people at that time, and in addition, people were coming to investigate things. So, I asked a colleague of mine whom I knew, who had lived in El Salvador, North American person whose name is Bob Lawrence. I phoned him because he had worked there for a couple of years and he was politically, very much against the war. He was then the director of one of the local hospitals connected to Harvard. I was then working at Harvard. He told me, once you get to the airport, it's a very short distance and you'll go to a hotel and everything will be all right, don't worry about it, it's just getting there.

So, I decided to go with another eight or nine people. I could spend hours describing what I saw for the first time. We went first to Mexico, because there were the mothers of the people who had disappeared, as they had done earlier in Argentina. We talked with lots of them and they gave us the names and ages of their kids who have disappeared, and

we hid them in the shoes and wherever we could, to try to find out what happened to them. But, they described a horrible tale, and we went and the problem was that in the airport, there were some questions being asked, and obviously, we were not welcome at the airport. But then, we took the bus from the airport to a hotel and we had to - - a minivan that they had arranged for us. They had to take a detour [02:40:00] because the day before, they had made a horrible dent in the road and we couldn't travel that road any more, through a bomb that was sent obviously, from an airplane, and many people had been killed. So my idea was easy, that once you get from the airport to the hotel, you'll be all right, was frightening that that had occurred the day before.

Anyway, we arrived to the hotel and it was just incredibly to me, the contrast between what the mothers had told us in Mexico, between what we saw, and the way we were treated in the airport and the arrival, and we saw, next to the hotel, young kids, 15, 16, in caravans, with guns.

ROSOLOWSKI: Yeah, machineguns.

EISENBERG: Shooting at us. We arrived to the --

ROSOLOWSKI: They were shooting at you?

EISENBERG: Not at us. They were there, taking guard. Later on, one time we escaped miraculously, but this time we were just -- because after six or seven o'clock, you couldn't go out, and we were delayed for a variety of reasons. But when we arrived to the hotel it was just a shock to see. There were women having cocktails with Chanel suits and perfumes, and a cornucopia of flowers and fruits. It was an aristocratic hotel in the middle of nowhere and that's where -- the newspaper, where people were staying too, I learned afterwards. Anyway, we shared a room, a nurse and I, we were part of the group.

ROSOLOWSKI: What was your particular mission, the reason for going?

EISENBERG: To investigate what was happening to physicians and medical students in particular. This was before Physicians for Human Rights had started.

ROSOLOWSKI: Because what were the reports in the newspaper about, physicians?

EISENBERG: What they wanted us to do was to investigate everything, and because we had a North American passport, they were sure that if we were not killed or hurt or whatever, that we will come to the United States and declare what we had seen and put it in the press all over the United States. President Reagan, at that time, and the

men in charge of the Latin American desk in the State Department, were considering reinforcing the money that was being sent to El Salvador. So we started by going to the embassy in El Salvador, acknowledging we were there, we were all North American citizens, and if we didn't report back, they should look for us or our cadavers or whatever it was.

ROSOLOWSKI: I guess I just wanted to add the context, because the reports in the newspaper were saying that physicians were disappearing, they were being murdered, they were being tortured, all of that.

EISENBERG: Or individuals that were not physicians, but we were stressing that aspect. Anyway, I could tell you more about those horrors. We stayed in that hotel and I couldn't sleep the first night at all, because we would hear the submachine guns nearby the hotel. Anyway, I could tell you more and more and more about that visit, that would take hours to describe, but I was horrified.

ROSOLOWSKI: Maybe you could tell just a couple of examples of what really stands out in your mind.

EISENBERG: Well, a medical student for instance, we were to meet in different places at different times, and not in the hotel because it became quite clear that they were having phones installed. Not phone, but, you know, they were

hearing what we were saying in the hotel. So we would have to meet in different places and hope that nobody was hearing, because the people were risking their lives by coming to tell us the story that they had experienced.

One of the students that came and met us the following day, he gave us a date and a time and he never came. So we don't know whether he was arrested, whether he was hurt. Then we met other students and other physicians that were the ones that deserved the gold medal for peace because they were trying to do the best job they could and they were running a risk. We were not, except the moments and the places we went to, we were not because we had an American passport. We could be hurt but we were not going to disappear.

Anyway, then [02:45:00] we came back and we saw horrible things. We went as a nonpolitical group. We were not to defend one group or another. We were for peace of course, but not to blame one group or another group. But once we got there and we visited the jails and we visited the hospitals, the army hospital and regular hospital, it was so awful. Talking about women, we went to the consul of women. The day after we had been visiting the Ministry of

War, where they attended us, very attentively and very nicely and they gave us little coffee and demitasses with gold inscribed, the Republic of El Salvador. The man was polite and he knew English, so we could ask him questions and no, the rebels are exaggerating what's happening. Then, that afternoon, no the following day, we went to the consul of women, and we saw a woman, I will never forget her, maybe 30 years old. Her gums were bleeding. She had been raped in the basement of Ministry of War, by the soldiers, while we were having the little coffee. They stuffed a telephone book in her mouth so she couldn't scream, because we were upstairs, and they knocked off all of her teeth. We saw that and she told us that story, and then they put her in jail because she was a subversive. What was subversive about her? She was a social worker that was helping the poor and among the poor, of course, there were some people that were subversive and some people who were not. She said she had to take care of everyone that needed her professional help.

Anyway, I could go on and talk for days about this one, but this was my first visit. When I came back from that visit, the Association of Public Health in Washington gave us an auditorium. We had worked like 20 hours a day. The

emotional impact of those human murders and the people whose legs had got cut off because of the war. We went to a children's place where the mothers and the children, a Catholic... I cannot think of the word in English. A place, like a sanctuary, because they would not go against the church at that time, although they did murder a Catholic priest in one of the big cathedrals in El Salvador. Anyway, there were 800 or 1,000 kids and about a hundred mothers, and they had walked all the way from the countryside for days, because they were sending napalm into the farms, and they abducted the men, and the mothers and the children didn't have any food, and they went to this place. We interviewed these families.

We had, among our group, a professor at MIT. He's a retired professor of nutrition, so we did a little bit of studying the nutritional stages.

ROSOLOWSKI: What was his name, what's his name?

EISENBERG: I don't remember his name, it was a long time ago. I would remind me, remind me of the days, before you leave, the names I cannot remember. Anyway, we could tell they were malnourished. Right here, abdominal, prominent abdomens. Mothers, children, just hanging on to somebody who was a stranger, asking for food, asking for -- the

mothers asking us to take those babies and feed them. It was just horrible. Anyway, we came back and the Association of Public Health, there were cameras and there were radios, and we were trying to make a big dent in what the North Americans were sending to the soldiers in Salvador. So we decided ahead of time...

We had gone to the State Department, to talk to the man, and he lied through his teeth. He told us things that we knew were lies, about why the -- [02:50:00] his name was Abrams. Since then, I was delighted to read in the paper that he had lied in the State Department as well and he was fired from his job. He was a good for nothing man and we told him the stories and he wouldn't accept them, what we had seen in a week. We were exhausted, we were really exhausted. We worked nonstop, being in the worst place, where I had never been to one, was depressing and upsetting. So we were to make an impression. So we divided among the eight or ten of us, and one was going to talk about the war and one was going to talk about the people who had disappeared. They assigned me to talk about the children, because I felt a whole generation had been lost. There were not young fathers, there were not -- I was to talk about the children and in the middle of all of

-- and I wasn't used to speaking to the press. Anyway, I was the last one to speak and when it got to speaking up, I began to say two or three sentences and began to cry. I was exhausted, I was upset, I was scared. I was so embarrassed with the comments and my colleagues afterwards said you were the most impressive speaker, this we are not going to forget. But I really felt so sad for those kids that will never grow up to be normal.

Anyway, I could tell you more and more but this is what we did in this group that originated in New York. Then, a couple of years later --

ROSOLOWSKI: Could I just ask you? Did you feel that you had an impact afterwards?

EISENBERG: Yes, oh definitely.

ROSOLOWSKI: How did you know?

EISENBERG: First of all, we told the people in the United States what was happening there, and it was unadulterated truth, and not what the newspaper was saying, because the government of Reagan was sending money and defending their own intervention there. Number two, we talked with people who had been heard by -- I have some pictures of talking to a woman on the floor of a place. The Catholic Church was wonderful. I guess it was the beginning of the liberation

movement and they were wonderful, and we talked to them. They had a human rights office, I don't know where they got the courage, and they stayed there until three or four of them were murdered later on. We talked to the official human rights group that were not doing anything. But we talked to many, many different groups, and we saw individuals, and of course we had an influence. For one thing, we gave them hope that there were people that were caring about them. I talked with a child in one of the jails, in the men's jail, and my heart broke for that child. He was obviously not very intelligent and he was among adults in the jail, many of them political, some of them criminals, they were a combination. We talked because they would always send a delegation to talk with us when they knew we were coming, and the little boy was sort of smiling that smile that children that time were, he said, "They said I am a soldier, why did they say that to me?" I was waiting for the bus and they got me and they put me here. They are treating me now, all of the men give me some of their food, et cetera. So we were able to intervene with the other people in the jail, to protect this child. We made an impact.

I'll tell you, for the questions I had, you know, before I went, I didn't want to leave my family, the job and the medical school. I talked with the dean and he said to me, "Well, of course if they kidnap you, you know that Harvard Medical School will come to release you, that's why they warned you. Are you sure you want to go?" And I said, "I feel I have to go." I really felt that once they asked me and once I heard, because we had of course, a whole day of preparation, I feel I had to go. Anyway, at that time, when I was questioning whether to go, I didn't have any expertise. What am I going to do there and one person cannot have an influence over a government, here or there. But each time I have gone to a mission, I have come back [02:55:00] thinking yes, it was worthwhile and I am very glad I went to El Salvador.

Then a couple of years later, somebody asked me, a physician here in Boston. I don't know exactly the time, but I guess it must have been '83. They asked me whether I would be interested in forming an organization to defend the human rights of individuals in the United States and outside of the United States. With my social conscience and my political activities and with the experience I have

had in El Salvador, I said yes. So five of us got started, five physicians got started, this organization.

ROSOLOWSKI: Who were those other people?

EISENBERG: One was Bob Lawrence, who was the man that had been to El Salvador before, who is now the president of our board, coincidentally, after many years, because he moved away from Boston and he directs a program in the school of public health at Hopkins. Jack Geiger, who is an incredible human being. If at some time you get an opportunity to talk to him, it's an experience you'll never forget. He started all of the movement in the south, to help African Americans have a clinic of their own because the white doctors were treating only the rich ones. He started a movement that has grown all over the United States. Anyway, he was incredible. A woman pediatrician that was the chairman of the Department of Pediatrics here at Tufts, whose name I am block now again. Who was the fifth person? Oh, an interesting man that was -- and played a very important role. He was a surgeon at the Mass General Hospital. Anyway, we formed the organization. We had zero money. We had nothing but an enthusiastic commitment to that kind of work.

ROSOLOWSKI: And just for the record, this is the group that came to be called Physicians for Human Rights.

EISENBERG: Right. We called it that at the beginning.

ROSOLOWSKI: At the very beginning, OK.

EISENBERG: We managed to pay for a one room office in Somerville, which is 20 minutes away from here, and we hired a part-time secretary, now one of the great movers in this movement, still working at Physicians for Human Rights, in a professional role. She had worked for Amnesty International in New York before she was here, and she came with a new baby and would write the notes of the meeting with one hand. She's left handed, and nursed the baby in the other.

ROSOLOWSKI: And her name?

EISENBERG: Her name is Susannah Sirkin, S-I-R-K-I-N, and she's wonderful, the best known human rights activists. Anyway, 20 years later, number one, we got part of a Nobel Prize for our work in landmines. We've been to many, many countries. We began investigations in former Yugoslavia, through excavating cadavers from mass graves and doing DNA examinations of relatives that needed to know whether their fathers, husbands, have disappeared, in several countries. We did a big one in former Yugoslavia, we did some in Guatemala, we did several other ones. We have gone to only a few of the countries where we were asked for help, because unfortunately, as we got better known, the demand

increased and to this day, we don't have enough money or space enough, although we have expanded enormously, and I'll tell you more about that.

I went to a couple of other missions, mostly Latin America, because I had the opportunity to interview people directly, without the interpreters, because of course my language, original language was Spanish.

ROSOLOWSKI: Let me just go through this and check that the dates are right. I have that you traveled to Chile in July and August of 1986. [03:00:00]

EISENBERG: Ninety-six.

ROSOLOWSKI: Ninety-six, OK.

EISENBERG: No, I'm asking you.

ROSOLOWSKI: Eighty-six.

EISENBERG: Eighty-six, yes. I thought '96 was wrong. I'm sorry, I misheard you.

ROSOLOWSKI: I'm sorry, or I misspoke.

EISENBERG: In '86, that's correct.

ROSOLOWSKI: And that you, as a result of that mission, you were the primary investigator on that mission, is that the case?

EISENBERG: The Chile?

ROSOLOWSKI: Yeah.

EISENBERG: Two of us, Bob Lawrence and I.

ROSOLOWSKI: OK, and then you were the author of an article, *Sewing Fear: The Uses of Torture and Psychological Abuse in Chile*. Is that correct?

EISENBERG: I forgot that but I guess I did.

ROSOLOWSKI: And then I have that you went to Paraguay in '88, and then back to El Salvador in June of '89.

EISENBERG: Correct, all of this is correct. I don't remember the years exactly but the sequence is correct and I suspect the years are too.

ROSOLOWSKI: Are there any of those later trips that you would like to speak about as part of the development of your work in human rights?

EISENBERG: Well, our role was clear. We used the -- we are still using, the skills of the medical profession, and they don't have to be just physicians; nurses, social workers, whoever wants to join us is welcome. As members, they have to be a health professional and we do have some that are not. Yes, I'd be happy -- not happy, it's all unhappy, but I could talk about any one. They were very different in nature.

ROSOLOWSKI: Well perhaps you could select the one you feel best represents.

EISENBERG: Chile was, and history has proven us right, horrible, what we saw there. First we went directly from the airport to the jails, because all of the physicians of the Chilean Medical Association had (running water) been placed in jail.

ROSOLOWSKI: Could I just...

[PAUSE IN RECORDING]

ROSOLOWSKI: OK, we're back on.

EISENBERG: The whole medical profession was in jail and I learned, on the first trip, first of all, they didn't want us to come in, in the jail. We arrived at seven or eight o'clock in the morning and there were two groups of people; the two of us and a group of women that were going to visit their lovers and they were in jail for other reasons. So, we had to go to the embassy and ask for permission and that was complicated, as you can imagine, because our government was then supporting Pinochet and there were lots of complications. But we finally managed to get in. And also, because the week before, the other reason why we were going, the week before, the students had a manifestation, and these were university students, they were not medical students. They had an open parade and a manifestation

against the government, and the people were being killed, were being tortured, we knew all of that. These students were having a peaceful demonstration on the street and they formed barricades with old tires, so the transit couldn't continue. They had placards, *Baja Pinochet, No Queremos Pinochet*, all of the things against the dictator. The military came and they dissolved some of the parade, but two students, one was a North American born students whose mother was from Chile, 18 years old. The other one was a Chilean woman, and she was 17, and as the group of students began to disburse, because they were coming of course, with -- the military were coming with guns and teargas and all of the other things, they caught these two students in a corner and what they did to those two students was to douse them with kerosene and they threw a match to each one of them. They wrapped them in blankets and they took them into one of their vans. In all these countries with dictators, they have special vans with dark curtains. They took them to the countryside and they threw them down for dead, and they were not dead. They were brutally burned, [03:05:00] but they managed to get up, I don't know where they got that, and they began to walk in the countryside. A group of peasants saw them and took them in and took them to a hospital. The young man died of the burns and the

girl had 95 percent of her body burned. They saw all these flames, the country people, they did not know. They saw flames walking and they couldn't understand what was happening.

Anyway, the Chileans asked this man surgeon, or they asked our organization, to send physicians to see whether we could help with this woman that was going to die. So, one of the members of the five of our mission members went and managed to move her, because he was a great personality. He managed to move her from the general hospital, because they didn't have any equipment to do what was needed. They moved her to a military hospital. They didn't have an insulation, they didn't have -- anyway, she survived. Carmen Quintana, Q-U-I-N-T-A-N-A, and I forgot the name of the young man who died obviously.

So they asked us to go and see whether we could do more for the physicians in the jail that were being accused of helping the subversive, because some of them wouldn't ask if, in an emergency room, if an individual walked in with burns, with bullets, they wouldn't ask who do you work for, and they were accused of helping the subversive, which was not. One was a professor of medicine, one was -- anyway,

that had nothing to do, they could have. Anyway, we went to investigate these two things, and what we did -- and that was different. Each one of these missions were different. What we did in that case was we helped Carmen Quintana. I worked and got the family to come to a place that we knew it was neutral, the mother, the father and two siblings, and by then, we got Mass General Hospital to promise that they will take care of her at no cost, to take care of her burns, because she would have been disfigured for life if she survived. We got money somewhere, I believe, I am not sure, to transport her, with a nurse, to the Mass General Hospital and the hospital was going to pay for her care as long as it was necessary.

Anyway, I talked with the family and the family said thank you very much but we don't want that, because we are worried that they are going to take our two other children and us, and they are going to make us disappear and we won't be helping Carmen or anybody else. We managed, and they managed, through a series of changes and more changes, to get her admitted and the whole family in Canada, that had a much better program for immigrants and were much freer in cases like this one that our group was, because they were not important in the war. For a year, they paid

for the transportation of the five. They paid for all of the medical treatment. They had one year to learn English, they were reading all these papers, and to get used to some sort of jobs. They did and eventually they got jobs. Last I've heard, Carmen Quintana survived and she's back in Chile now and has a family, because she got married and has some children.

Then, what we did with the physicians, we managed to have a group of reporters that were afraid to come to us and describe what we said, but we were a North American citizen, and the woman was afraid to displease the North American press. And we have all over the United States and in Chile, in some newspapers that were not closed, very many, in Chile, a summary of our findings in the United States, more and more advertised. I could tell you more and more but it will take -- but then we investigated other things. We were asked for these [03:10:00] two.

The one in Paraguay was interesting. Well, I don't know whether I want to go which one of all of those.

ROSOLOWSKI: Could I ask you, in the interim, when you wrote the report about the uses of torture and psychological abuse, how did you summarize that entire experience in

Chile, to put it into the article? What were the main things that you focused on in that article? What did you feel that the community here in North America needed to hear about that?

EISENBERG: You know that I don't remember what I wrote in that article. If I had to guess or if I try to think the way I thought then, I will make a plea for democratic governments to succeed, for dictatorships not to use. I think that I would have put first, for whatever government, not to use torture as a way to interrogate individuals. Yes, I'm sure I put that first. That was a common theme through whatever. Many other papers with other trips in totalitarian regimes, and I can give you copies and more copies of those other studies that were done and published. Because what we did each time was to come and not only have interviews with the press, but write a full report for the organization, about what we did find out. Some of them were quite scientific, because then the organization evolved to what it is now, you know, 20 years later. We have a budget of \$5 million, an annual budget of \$5 million. We have 40 full-time employees that are specialists in the different sections.

What I started doing, without much knowledge really, but deciding to do, what I felt was needed, of course for the individuals that were tortured, physically or psychologically, but also because I felt, and I know that my colleagues felt that way, that it was a direct work that we could do with individuals. We were able to give them voice when they were being suppressed. But then we evolved in all kind of new directions and the organization professionally, as the needs of it were, and the needs in this country evolved, and as we developed more and more expertise, we began to branch in different directions. I continued to be involved passionately in this movement. I think we've done an extraordinary job. I have nothing but respect and admiration for the people that are doing the heavy part of the work, and spend day in and day out writing reports, hearing. I don't know how they don't get burnt out, and some of them do. We have lots of younger people, volunteers that want to come and work in our organization. We have done newer and newer things. I've done less and less, because as I grew older and older and older, some of the physical challenges of some of those trips are beyond my capacity to respond. But what I continue to do, if you want to know that aspect, I am heavily involved and I continue now, to do psychiatric

examinations of individuals who have come to the United States and are seeking political asylum. If I feel that they were telling me the truth, to the degree I could ascertain, and if they give me reasons that I believed, about what would happen in their country, and because they were timid or psychiatrically upset, or they did not know the system, by law they had to seek the political asylum within the first year they are in the United States.

[03:15:00] Some of the time they are given entry for three months and they let that elapse, and then they are illegal, and then they are taken over by some distant relative or some country folks, and they don't trust them and they are afraid to talk and they don't know how to seek a job and they don't know how to support themselves, and they have these ambivalent feelings about the people that are trying to protect them, that maybe they are spies, and they will talk to the people in their country. There are enormous problems they are facing, but if I -- and we have like 300 volunteers all over the United States now, some more active than other ones, if we feel, I as a psychiatrist and other people as general clinicians, if we feel that we are convinced, in my case that the patients had a great deal of anxiety, post-traumatic stress syndrome, depression, whatever it is that we can document, we write a lengthy

report summing up what the lawyers had given us as information. These are pro bono lawyers that see the individuals first, and they have usually lengthy reports. We read the reports, we interview the individuals and we write the reports and we send them to the judges. Then, the judges decide against or in favor, if they have to be returned to their country. There is now, I assume us have writing the paper what happened to immigrants that are illegals in general, but in those days, when I started doing it, the program was quite different. Now there is the number that are overwhelming to some of the legal courts, to some of the organizations.

So the problems then were different, but I continue doing that work. I started mostly doing for people from Latin America, because I could do it without the interpreters. Then I got to see more and more from African countries, from in general, Southeast Asia, those with interpreters, that we usually will select to make sure that they were not partial and they will distort some of -- and sometimes it was people that they had brought, if we have no access. Some of the stories are horrifying. I saw many women, not many, I don't know how to say the numbers, but I saw women that were raped by soldiers, and they were raped not

because of the reasons one usually thinks of rapes in the United States, or the ones that are raped in the United States, or the ones we get to see, but in some countries in war, it was another act of violence, another instrument of defeat. They would have eight or ten men raping young, virgin women, and some of them got sick. Some escaped, very few, I suspect, that there are very small, talking about women and women in medicine. We sent a delegation to Liberia, a small delegation to Liberia, to find out what happened to women that were raped, and in some of these countries, when they were pregnant, they were not accepted in their home because a dishonor to the family and the other children, the other women will never get married. So they wander through the countryside with those babies, some of them they love and some of them they hate, because they were an act of violence against them, with no money and no respect from the community. It was awful. It's what's happening in Sudan.

We sent a group to Sudan, mostly to train women. We did something in Liberia, local women that will help the women that were being raped or had been raped. In Sudan was the same thing. Susannah Sirkin, in fact, has gone a couple of times for that purpose and has done, I'm sure a wonderful

job, as everything she does. But this is now part of what I do, because this I can do in spite of my physical aging aspects. I have remained as a member of the board and heavily involved with [03:20:00] many of the decisions that board has to make, some of them quite painful and some of them quite difficult. Every year, we live through the anxiety, will we be able to keep and do we raise hope in some of those countries, and then will we be able. We have a budget to do the things we would like to do.

We've done some studies in the United States. When I give lectures or when my colleagues give lectures, the question they always have, why don't you do more for them in the United States, and they are right, there are more things we could do. It's a question of what's more acute and where do we get money to do what, because some of the foundations are more limited in their scope, et cetera. But it's a marvelous organization.

ROSOLOWSKI: You had said earlier, that you wanted to talk a bit about how it grew, and you've given a portrait of all the variety of ways in which Physicians for Human Rights is acting now. Maybe, unless you feel you've already done it, could you focus on some of the turning points in the organization's evolution and how you contributed to that.

EISENBERG: Well, we have expanded in different directions. We are heavily involved in health issues; the discrepancy between the healthcare treatment of minorities in the United States and outside of the United States. The question of maternal and infant mortality death in Peru, we started in Peru. We have a strong educational group and we have about 16 organizations in medical schools, where the students are giving lectures, and they come once a year to us, the leaders of those groups, to get an intensive, three day I believe, or two days, and we bring them from all over the United States, to learn more and spur the interest among younger people, because we are sure that all of us oldies have to awake the younger people to what otherwise does not get taught in the medical school or nursing school or social work schools. School of public health has a little bit more of that. Medical school, as far as I know, two colleagues and I, started the first course at the Harvard Medical School.

ROSOLOWSKI: When was that?

EISENBERG: Which was did for eight or nine years. I don't remember exactly, I think nine years. I managed to convince a group of the faculty that's in charge of curriculum, I think we did it for nine years, up to last year. What to do was to get the faculty to approve that

this was a voluntary course but they will get credit for the course, because they had to do quite a bit of work in order to finish the course. We will get, every year, an exceptional group of students, and they were usually either foreign born, which of course we have more students in the medical school, who had heard or had experienced from their country, similar in their countries, some of the problems in human rights. Or people who have volunteered and have spent years abroad doing Peace Corps work, or kids whose parents were in countries where the parents will tell their sons and daughters, the problems that they have experienced in those countries. And some that would come because they said, because we usually have a first session, why did you enroll in this class, who said I don't know anything about human rights, so I thought it was about time for me to learn, because I don't know and once in a while I read in the papers and I don't know how to interpret that. So it was a very mixed group but usually, all of the medical students are bright and verbal.

ROSOLOWSKI: Are there other ways in which you fed your commitment to human rights back into the medical school community?

EISENBERG: No, except the ones the medical school recommended in general, and some of the things I have said

about HMS [03:25:00] and Hopkins, is true for most medical schools. Physicians are quite recalcitrant, to change ways and modes. I don't want to offend them, but I think the American Medical Association was very slow at moving in that direction. We have a woman that's in charge of the American Medical Association journal. We in fact go to one of the -- I recommended her for one of the awards. If you get a chance to interview her, she's going to be superb.

ROSOLOWSKI: Who is she?

EISENBERG: Don't ask me for names. We've been here two days for intensive questions and the names are escaping. I'll tell you.

ROSOLOWSKI: I'll make a note and we can add it.

EISENBERG: Yes. I forgot to tell you that she's a friend in addition, because I knew her from the Hopkins days, and she's marvelous. Anyway, in the journal, we have a marvelous place, my closest friend since then, she wasn't a friend before, was the first woman in charge of the *New England Journal of Medicine*, and her name is Marcia Angell, A-N-G-E-L-L. They allowed me to publish one of the articles about human rights that ordinarily or earlier, I think I would have had trouble.

In what other ways, going back to the question, ways I contribute. With policymaking. We have to make all decisions as a member of the board, and I was the vice president. I had been in the board in and out for 20 years. We do very many new things. Well, I mentioned about trying to influence the medical school's curriculum, about getting younger people so they would turn to human rights issues. We try to engage more people as volunteers, to come to our conferences, to lectures that we organize. We respond to any invitation, any professional school or other, you know, church groups or whatever, that want to hear about Physicians for Human Rights. We have a group of speakers and some of them are superb. Can you stop for a minute?

ROSOLOWSKI: Of course.

EISENBERG: Hello, Leon.

[PAUSE IN RECORDING]

ROSOLOWSKI: We've taken a brief break and now we're back.

How do you think the role of the physician as a deliverer of healthcare, as a deliverer of service to a community has changed since the '50s? I'm thinking here, the activist work that you have done and your colleagues at Physicians

for Human Rights, have opened that out into a whole new arena, and I'm wondering the extent to which movements of this sort that physicians have initiated, have changed the service concept of the doctor and the doctor's role in society.

EISENBERG: That's an interesting question. Can I add one more thing to what I was saying about Physicians for Human Rights? I could have expanded in 80 or 20 different directions, but I am so proud of the work we've done, for instance, in landmines, for which we got a part of the Nobel Prize. We were the first ones, as a group of people expanded, and I believe there were eight or ten organizations that divided that prize. This is one more example, because our activism was a response to what I think was social changes that were occurring. Now, how physicians in general, responding to your last question, --

ROSOLOWSKI: Actually, can I interrupt you and ask another question?

EISENBERG: Yes, sure, sure.

ROSOLOWSKI: (laughs) We're playing tennis here. I wanted to know, when you and this other group of organizations received that Nobel Prize in '02, what message do you think that sent culturally, because I mean the Nobel Prize is always a message [03:30:00] about what's important.

EISENBERG: I could talk about two Nobel Prizes, because I went to a ceremony in Sweden, to watch some people receive the Nobel Prize, which isn't the one that PHR got. I could expand that, because that would have been fun, I was present at one of those ceremonies. It's another long story, when I was at Harvard Medical School, and how I got to that ceremony. I wish we had the time, so I could elaborate. But it also touches on something little that you had asked me before, that had to do with how people see me as a role model and how I responded realistically, I never saw me that way, but in some foreign countries I did, even more so than in America, because they were even further behind. For instance, we went to Prague, because people from Charles University asked us to establish -- I think I mentioned that yesterday. And when we went to Prague, of course we all gave little lectures, but we also had two faculty members that were our guests, when they came to the United States, and we were their guests for dinner, and those people, both physicians and both -- one of them for sure, the other one I don't remember, maybe two physicians. But then I heard from other physicians, automatically, not only that the women stopped being physicians and stayed home forever, but the husbands would expect that this will happen, and the few that escape then

will have to stay home to baby-sit for their grandchildren, so the mothers that had dared to continue in medicine. So I felt in there, I felt like a role model more so in Latin America. In Sweden, they were quite progressive but in Czechoslovakia, in those days that was the case. So in some other places. In Argentina, I felt like a role model, when I went back and we gave lectures as professors, and for the first time I sat in the podium, where I used to be next to the singing, in those big amphitheatres. But I just wanted to touch because it made me think, in one of the breaks, that I did not explain that it wasn't because I was so exceptional, that I became a role model in those places, but because they didn't have anybody else.

ROSOLOWSKI: Yeah.

EISENBERG: Now, going back to --

ROSOLOWSKI: What did it mean to receive the Nobel Prize.

EISENBERG: I'm trying to think how to summarize it briefly.

When we got part of the Nobel Prize and got the whole movement started, of course we had an enormous influence, because it was all over the newspapers, and because landmines came under attack. With landmines, I've seen some of those children without their leg, because they went to play. I didn't see all those many, mind you, because Latin America didn't have as much as they had in other

countries later on. But they are very cheap to install, very difficult to remove and expensive to remove, and children will begin to play, because they look like little balls and they begin to play and they will explode. And not only children. I saw adults as well. So that was one contribution that was important, a Nobel Prize, because it took the attention, pay attention to that centered focus.

ROSOLOWSKI: What was the work that Physicians for Human Rights did with landmines?

EISENBERG: Well, advertising and working international committees and continued to work for the eradication of those. We have done lots of work in that area, before and since then, but like this one, I could describe PHR and the work that physicians specifically, and nurses and other people, can do, we talked several times about the possibility of changing the name, because it's a misnomer. We accept anyone from any branch of the medical profession.

I want to say one more thing about PHR. If anyone asked me at three o'clock in the morning, what do you feel was your great accomplishment in medicine, and I have the personal ones that I also have first and the most important thing, but professionally, I think that I will talk about

[03:35:00] Physicians for Human Rights, because the other

jobs I did were partly the times that have changed, partly because somebody guessed that I might have the ability to do a good job, partly because I wanted to pick up the charge, but anyone else would have been able to do it. And when we did that work at the beginning, at PHR, it took a lot of emotional energy and decision making and some dangers, to do it, and I am so glad that we had moved in the right direction in 20 years, to accomplish what we have, and I'll be happy to send you the names of all of the brochures that we distributed among libraries all over the United States, some abroad, some of course for the people that contributed. Very intelligent, hardworking people in that organization.

ROSOLOWSKI: You said that with your other roles, you felt that anyone could have done the job. I'm just wondering if by implication, that means that you had special gifts that you brought to the work in Physicians for Human Rights, and I'm wondering if you feel that's true and what those gifts were.

EISENBERG: Anybody who has a social conscience. I seem to have used and used that expression all the time.

ROSOLOWSKI: What do you mean by social conscience?

EISENBERG: Oh, you don't want me to define that, it will take until tomorrow morning and we have lots of questions I

want to get. But anyone that's interested in relieving the human pain in countries where they cannot speak up, in countries where they cannot act their own instincts, in countries where they've been denigrated, that's an English word. And the rights to good health and good food and good housing and for them to have all those things, and their right of freedom. Anyone that cares about those things, no matter where they happen, has to respond. I don't think it was my doing it. I think that the movement of human rights, the movement in global medicine within the medical profession, continues to grow. There are now several organizations in different countries that are doing that, because people are beginning to be aware of the responsibilities they have or should have. So I don't know that I contribute more than anyone else that cares about human beings. I really don't know if that's anything special that I contribute.

ROSOLOWSKI: When you were still seeing private patients, during the time when you were doing this human rights work, when you first began, and I'm wondering if the human rights work had an influence on the way you interacted, or your work with private patients.

EISENBERG: I don't think so. First of all, I maintained quite a separation from that kind of work, from the

patients I was treating. Furthermore, I think that psychiatric patients are victims also, of many human rights. No, I don't think that did interfere or that influenced my judgment.

ROSOLOWSKI: I guess I meant -- I didn't mean influence in a negative sense, but I guess I meant in a positive sense. Did it expand?

EISENBERG: I don't think so. I always felt very badly. I had a great deal of compassion and empathy for the individual that's psychiatric, particularly the very, very sick ones. And mind you, I was more or less dealing with just neurotic patients, but you know, when I saw them for the first time in the Hospicio de Las Mercedes, those were psychiatric patients whose human rights had been abused by the things they were doing, because they had nothing else. Even the practice of psychiatry has changed. We had no drugs at that time. I didn't mean to imply then, they were being abused. They had no way of treating them and they didn't have the money to treat them, and the patient continued to suffer. So I guess in general, in theoretical ways, yes it influenced [03:40:00.8] my way of seeing psychiatric patients, because we have new treatments that we didn't have then. But the person, not at the personal

level of individual patients. I don't think that very much so.

ROSOLOWSKI: How can an international awareness enhance any physician's practice, even if that physician really is only seeing patients locally?

EISENBERG: Could you expand the question?

ROSOLOWSKI: How can an awareness of human rights on a global level have a positive impact on any physician's practice, even if that physician is not directly --

EISENBERG: Oh, it has an enormous influence. First of all, they get more -- if they are very interested, more and more learned about what's happening in Botswana with AIDS patients, what's happening in Zimbabwe, how it affects the general health level of the population. They learn more as one publishes more and more. For the ones who have trouble and see the impact on colleagues, of course it has to have an influence. I think it has improved quite a bit from the days but I judge that by the interest that young people, young physicians, have in global health, they all want -- not only physicians, but I read last week, in the *Harvard Gazette*, which is the newspaper for the Harvard College, the number of students, I've forgotten by now of course, but an enormously large percentage of young people that have had either a thesis they want to work on or a paper

they want to work, and they want to visit foreign countries. The number of students has grown by leaps and bounds. It's not just physicians and young physicians, but young people are interested in the world around them. Of course it has to influence physicians, these young people that are still learning and learning, not just the little enclave where they have grown up. That's why we started that program in Czechoslovakia. I thought it was very important. Some of the people had never left New England and their little community, but by their intelligence and hard work, they have gotten to Harvard Medical School, but they didn't know there were...

When I stopped being a dean, I began to do part-time, but more of my activities were in the direction of international health, because when I was the dean of student affairs, some students came and wanted to go to foreign countries, a very small number. They didn't have the money, some of the students. We had one fellowship started by a cardiac physician, well-known, and we started -- the program had started by someone who had even less than what I had, and he was stepping down. So I volunteered to take over because I felt that was very important for young physicians, to learn what was happening

in the -- anything else than that was happening in the United States; they would learn that automatically by being here. But they have to compare healthcare systems, they have to compare different cultural environments. They have to learn about parasitology, they had to learn so many things that they couldn't when they had that focus in a very narrow passage. So I tried to increase those numbers and I was successful, not for all students, but the students manage a way. For instance, they will rent their apartment for three months on vacation and they will do anything, build latrines in a foreign country. At the end of first year, what do they know about medicine? Well, they knew but anatomy was not enough to help, but they will do all kind of things, and then between the third and fourth year, when they have a little bit more leisure, they will go and do some of the clinical work. We expanded those numbers. Now, it's for me, a colossal number, there is a committee, there are several fellowships, there is an almost full-time person [03:45:00] that directs the program. I smile every time I read that because it's wonderful.

We started also, at that time, when I was the dean of students, or enlarged. I don't think I started, I think

that existed, and I know it existed before, but I enlarged it. There is a heavenly man that is from one of the Central American countries. I'm sorry I don't remember what country he's from. He had a clinic at one of the hospitals, for Latin American patients, which he courageously continued to do, for now I guess 30 years, with very little support. He and I got together and we hired a professor from another university, maybe Minnesota, maybe Wisconsin, that taught Spanish, its native form, in North America. So we enlarged the program that my colleague from the Brigham and Women's Hospital had started, by which the students would get credit, and it was between the third and fourth year usually, though there were younger students too, that will get, for six weeks or two months, an intensive Spanish class, but by intensive I mean that, and at the end of the six weeks or two months, they were asked to give a lecture. I couldn't get over that those students were understanding my questions and speaking Spanish. And then they had this system, Dr. Herrera, H-E-R-R-E-R-A, Guillermo Herrera, who had programs in several Latin American countries, including his, and the students would go between the third and fourth year, and go to remote sections, usually supervised by a local physician, and they would practice regular medicine in

countries, but in sections that particularly didn't have very good medical care. They came back so confident, not only of their Spanish, of which many patients will be Spanish in the future of course, but also about their clinical skills, because they had to understand the patients and to understand their illnesses, without all the machinery and the equipment that they have available here, which is marvelous, but they didn't have there. They had to remember to do some auscultation of a patient and hear for places where you -- they do that and have they heard sounds.

ROSOLOWSKI: I'm sorry, I missed that word.

EISENBERG: Auscultation.

ROSOLOWSKI: Auscultation.

EISENBERG: So that program expanded and now it's growing by leaps and bounds, and other ones as well. Many people have gone to do research in other places. But anyway, the interest is all over here and they were always in great interest, and we always accepted a Harvard medical student for the clinical years, for one month rotations from other countries. So there is an exchange that continues to grow, and that was great fun to do. The student had to write a paper when they came back of course, and they have all of these requirements, and they had to have a supervisor among

the faculty members. All of it was and is even better organized sure, now.

ROSOLOWSKI: You mentioned that as part of the work you were doing for Physicians for Human Rights, you also had involvement in women's health issues and human rights for women in particular. You were very active in that field as well, so I'm wondering if you could talk about some of the work that you did specifically in women's health. Some of it, I know was not associated with Physicians for Human Rights, but that's a whole other area in which you (inaudible).

EISENBERG: Well, I mentioned a few, about the raped women and offering clinical support for them. I mentioned maternal and infant mortality rate. Education in other countries, of little girls. [03:50:00] We haven't done as much as I wish, but we couldn't get support for that kind of work, not all that much, but we've done some.

ROSOLOWSKI: Is this within Physicians for Human Rights?

EISENBERG: All of this that I mentioned is within. We, of course did asylum work for women, as well as men. We have had an enormous success in that work, because the average asylum petition, I think used to get -- the last statistic, as I thought, I'm remembering, a couple of years ago, was 30, 35 percent of people that are sick, where I am sure

that's even less now because of restrictions have become worse and worse, difficult to manage. We have had 90 percent success, partly because the people that find their way to get to us, are usually more aggressive or more intelligent or more able to find their way in what is a very complicated autocratic system. But partly because we offer something that's very hard for the judges to resist, because the people that are doing the work are well equipped and well... They are very knowledgeable and they have very good credentials and they trust us, the judges trust us; not all of them, some are more difficult than others. But specific programs for women, I'm sure there are more and I cannot think at the moment, more.

ROSOLOWSKI: Well, there are certainly some that you worked on that were not part of Physicians for Human Rights. I had, in my research, in 1992, you were part of the Office of Research on Human Health. Through that organization, you co-chaired the women's health workshop on reentry of women into biomedical careers.

EISENBERG: I did lots of work there. I did lots of work.

ROSOLOWSKI: Now, that's a federal agency?

EISENBERG: It's part of National Institutes of Health, and they are federal agencies, and it was created through the outstanding job, mostly, not all of it, but mostly from a

woman that at one point, temporarily became acting director of NIH, who is a woman physician, married to a man physician, and a marvelous, marvelous woman, whose name I will remember. But this was only part, and partly it was the times, you see. They appointed a woman in pathology, that in fact had been at Harvard, African American, able, successful, wonderful human beings. She and I have gone, as I have mentioned before, to many conferences at Harvard College, that we were invited to talk about, you know, what have we done and is it possible to be a woman physician. I continued to do that for several years after she left. At the drop of an invitation, I will go, I will talk about what it's like being a woman physician and encourage young women. But when she was named director of that office in Bethesda, she invited me and I had the first conference, and from then on, I went quite frequently, to Washington. Whenever they needed me. And they did very, very good things. They continue to do very good things.

I have been less active recently, because they haven't asked me, because they have sort of an obligation to draw people from all parts of -- women, from all parts of the country, from racial and economic and cultural backgrounds, and they have to distribute that and they have an

obligation, and they are right to do it that way. But at the beginning, I was one of the people that was more actively involved.

ROSOLOWSKI: What were the things that you did when you were involved?

EISENBERG: Helping organize lectures, helping select people for the different committees, giving some -- I was chair of a couple of things. A couple of [03:55:00] people were -- any woman that was somebody was invited to come, and they did come, and there were 100, 150 women, listening to two or three days symposium. We did everything that we possibly could help women excel in the fields they were in, and there were women physicians and dentists and pharmacy professors. There was everyone in the health profession, so they had to distribute that. We had lectures. We organized the program, and I was just a small cog in the whole wheel there, but I was one of them, enthusiastically helping organize a program similar to what was developed later on at Harvard, for women who had stopped doing research, because we did both at NIH. We stressed both the clinical and research aspects. If they had to step down for a couple of years, then they couldn't go back because the research had moved much too fast. So we would find a location and a mentor, and they had to submit applications,

and they will get a stipend for two years, I think of \$35,000 a year, to appoint a research assistant or a secretary, or whatever it was that was needed at that time. Then they had to present in a date, research of what they had accomplished in those two years. Then by then, they understood how fast their field had moved, and what they could apply. I don't remember whether we helped them or they themselves secured positions afterwards. That was very successful. My only slight disappointment was that people in universities and research labs, didn't hear, because at that time we could have had more than what we had, whatever there were, 20 or 30 positions. The money was available and the mentors, and some men also applied, just as Harvard Medical School did, but they had federal money for that.

And a program that was excellent and I went afterwards and I heard the presentation from the people who have done research, and it was very impressive with the results they were getting. I loved going to those meetings because first of all, I learned from different fields, but also, it was encouraging the women to keep at it, you can be very good and you marry later on, if you don't. People wanted to do it and couldn't find ways.

ROSOLOWSKI: In what other roles did you work to help women advance in medicine and the sciences? What were the most significant roles when you were working at that level?

EISENBERG: Well, the American National... Hmm, American Science. I'll have to give you the full name afterwards. What is the most prestigious organization in size, that has an institute of medicine and has other organizations, and they had one for each one of the specialties? American Academy of Science.

ROSOLOWSKI: The National Academy of Science?

EISENBERG: The National Academy of Sciences.

ROSOLOWSKI: The Committee on Women and Science and Engineering.

EISENBERG: That's right, I participated in that committee.

ROSOLOWSKI: What year was that?

EISENBERG: During those years when I was active at NIH.

ROSOLOWSKI: OK, so around '95 to '98.

EISENBERG: In the '90s. I was very active in that and I began programs.

ROSOLOWSKI: What were your roles in that capacity?

EISENBERG: I'm sorry?

ROSOLOWSKI: What did you do in that?

EISENBERG: As a member of the committee to encourage women, to ask them to connect with a different organization, a

medical clinical society, American Association of blah-blah-blah, to encourage, to incorporate in their goals, women that mostly will select women, to create the umbrella organization for all of this, and because [04:00:00] of the prestige that it had, had an influence on all of these other organizations. We also organized meetings and invited speaker, you know, the usual things that is an encouragement to women, and where they can learn how to beat the system, that's the best way of putting it just briefly. They all played a role. They all played an important role because the times were changing. The male dominant group was in charge of the organizations, et cetera.

ROSOLOWSKI: Yeah, I'm thinking about the AMA, you know, the American Chemical Society. These are bastions of male dominance.

EISENBERG: That's right, that's right.

ROSOLOWSKI: What kind of reception did your committees get?

EISENBERG: Some were very receptive in saying that we don't have the ways to contact women; so we provided names. We interceded for women that we knew were available. Some continue to be recalcitrant. It depends a little bit on the organization. Now, some of the people have to play the game because they think that they have to, but they don't

get actively involved because they are too busy. It's not bad intentions, sometimes they are, but sometimes they get very busy. Most of the people in the medical profession have a field of vision that's very narrow and if they are doing investigative research or if they are discovering a cure for something, they just remain active there and they forget about the world around them and some of them, just there's this other world. You cannot blame them, you know, they were trained to do that. Yes, you can blame them too because they ought to be more connected. Erase that. Yes, I do, I do, not blame them, because in some cases it's not a conscious decision, but I don't justify them, that's a better way of putting it. I don't justify their behavior. They have to be more connected.

ROSOLOWSKI: For some reason I'm remembering the title of the article that you wrote, which I know it's, *Why it's Still a Privilege to Be a Physician*. I don't know why I'm thinking about that at this moment, perhaps because you're talking -

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EISENBERG: Because you've been talking to a physician for two days. (chuckles)

ROSOLOWSKI: Well, no, I'm thinking about this context and our discussion about the way there are certain physicians who have a very narrow field of vision, and obviously they're

very committed to that research that's involving all their passion and all their time and all their energy. And yet, you chose to title that piece, *Why it's Still a Privilege*, as if the medical community needs to be convinced that it really is worth being a physician. I'm wondering why you chose that title, what that says about the medical community in general.

EISENBERG: I felt very strongly after hearing one student after another, that would come and talk to me and said, my parents wondered whether I should be a physician, the investment of everything; money, time, energy, and the profession is changing and will I be able to have the income to pay the debts, and we don't know where the changes are going and the patients don't respect the doctors the way they used to. And I wonder why I didn't listen to my parents, because now doctor so and so said, I'm going to recommend to my children to go into medicine. These were the men that were supposed to be mentors. And I heard it so many times that I got tired to hear those people that were creating doubts on a few, just a few medical students. I don't want to give you the impression. That's why. I just felt that I had to tell, at the larger level, how I felt about medicine, and I felt and I feel and I will always feel that it is a privilege to be a

physician. I have experiences, so many and many of them, where I felt that an individual has opened their heart and they were telling me things that they never told any human beings, that [04:05:00] they were trusting me, they have hopes that I will be able to help them. They became individuals that were suffering, but gave me the opportunity to help them, and by helping them, I help myself in some ways, or reinforced my compassion in that way and my empathy for the suffering. That's a better way. It wasn't because they were helping me because I extracted from them something that I needed, but I felt that trust in that way was just an enormous privilege. I'm sure I've thought of other reasons, but that's the one I remember. But as I told you yesterday, I have to be moved by something very negative or something very positive, to put pen and pencil to paper, because that's not my forte and it's not my enthusiastic commitment.

As a consequence of that, it was very interesting, because they asked me, either that year when it was published, I don't remember when, to be in four important medical schools, to be the speaker at graduation. And why did they ask me? I guess they wanted me to reinforce what the students have heard and to reassure the parents and to tell

them about the marvel of the profession. They were very interesting and rewarding experiences, I loved it, but it was because this idea was raised. And in fact, in fact, to my surprise, a colleague phoned me from Duke University, somebody that's a friend still now, and he said, "I didn't know you wrote that paper." He's a professor of history, of science. He said, "Do you know that you are the first article in a volume that's given to any student in the United States that's going to study in medicine." I did not know that. I did not know because it was published by the *New England Journal* and they asked for permission. A great satisfaction at that time, as a nonreligious person, was that I beat the Bible, because they have the (inaudible). I was the first in a collection of beautiful summaries and poems that people have -- summary of articles and poems and things that people have done over the years, and I did not know. Anyway, that was an aftermath of that publication and I guess at that time, it was surfacing in these two days of intensive questioning.

I guess there were some women that did not know me but read it was written by a woman, that could have had an influence. I tend to minimize the ones that already went to medical school, that have that path open for them. Some

other people maybe went to a library and picked up that because they had questions, who knows? Who knows? I hope they did, that I did have an influence.

ROSOLOWSKI: I have to say, I can only imagine that you have.

EISENBERG: I can imagine too. My fantasy world is very big.

(both laugh)

ROSOLOWSKI: I'm glad to hear that.

EISENBERG: Oh, very, very big, that's what made me survive in some difficult times.

ROSOLOWSKI: Is it?

EISENBERG: Of course.

ROSOLOWSKI: Is it?

EISENBERG: Of course. That's why I love part of the freedom that I have now. Maybe we should talk about the women physician retiring, because that's where I am now for the last year. But it gives me the freedom to enjoy the fantasy world of authors, because I never -- not never, but since becoming a physician, I don't have the time to read as many novels as I want. Only when we went on trips, of which I've been very fortunate. I went to very, very many, and in other countries, where I give talks, I was a role model, I think. [04:10:00] First of all, because they asked me, second because some people were listening. I didn't have time to indulge my fantasy world with things

that I liked and respect and read. Now, I'm reading voraciously and it's such fun. It's such fun, but there's an undercurrent of the sadness of not feeling as active as I have been, particularly when I stopped seeing patients, because with students, through the courses, I continued with them even last year, and that's another sad story of frustration that you had asked me earlier.

I continue to see students and I feel I had to stop seeing patients, and that was another difficult time. It turned out that as much as I miss that, and I miss it quite a bit, it's not as bad as I thought it was going to be, to my great surprise, because as I told you earlier and sincerely, that was such an important part of my life. I feel there are so many younger people that are coming up that will be just as good, and some of them will be different, but they continue to do their job. And I had to stop, there were many reasons, and I don't think that's different for women than for men, but if you want to I can enlarge on that. But you have many more questions and we have now, very limited time.

ROSOLOWSKI: Well, I'd like to move to a question that builds on a lecture, or a talk that you gave, that I read on the Internet. I'm paraphrasing here but you were referring to

one of your favorite quotations, and here I'm paraphrasing but you said that women will have achieved equality when a female schlemiel can become --

EISENBERG: Do you know I didn't originate that.

ROSOLOWSKI: No, I know you didn't. I can't remember who did.

EISENBERG: I can tell you.

ROSOLOWSKI: Ah, do.

EISENBERG: It was a physiologist from George University (sic) and as I glimpsed at the questions, I realized that it sounded like I have given myself this quotation, and I did not. I can tell you in a minute because I wrote the name of the person. I love that quotation and I feel strongly. Wait one second.

ROSOLOWSKI: Well, as you're getting that reference, I'll just, for the record, say that my paraphrase of that quotation is women will have achieved equality when a female schlemiel can become a professor as easily as a male schlemiel.

EISENBERG: Yes. And the name of this woman, since then I think has died, and I'm sorry to tell you that, but she was Estelle Ramsey, R-A-M-S-E-Y. She was at George -- either George Washington or George. I don't have my glasses with me. You can read them.

ROSOLOWSKI: Brown.

EISENBERG: George Washington University or George -- I don't know.

ROSOLOWSKI: We can check it later.

EISENBERG: One of the Washington universities.

ROSOLOWSKI: Well, what I asked is what do you think -- where do you think we are with that in terms of women's equality and what needs to happen?

EISENBERG: I think that the men that are schlemiels should not be appointed, neither the women, the schlemielses, if that's the feminine, should be appointed. I think there are people that are excellent, and I don't think women should be appointed because they are women but because they are excellent professional people.

ROSOLOWSKI: Did you feel, along the way, when you were coming up, and then as you were taking on administrative and teaching roles, did you feel that women were held to a higher standard than men were, that women really did have to outperform, over-perform?

EISENBERG: Some. It's very hard for me to judge when numbers are involved. Very occasionally would be the case. Maybe there were. I don't know the answer to that.

[04:15:00] I don't know, once they make it the standards are so high for men and women, that I don't think that anyone expected. Maybe earlier in their careers, they used

to. Now, I've seen most medical schools, the women are making it in larger numbers at the lower levels of assistant professor. It's a pyramid and of course, the ones that make it to the top, have to have extraordinary -- and the rationalization for some men, of I don't agree with that, is that many have enough numbers, and now that we have more numbers in the future, maybe that will get equalized. I think that there were bad years. Some were biological, like having babies and stopping at it, and many are from the environment, where maybe at every other level were discouraged, as men and women were discouraged because their parents did not know whether they would be able to make everything come, that's for the birds, because all physicians will do well in whatever healthcare system eventually we evolve.

I didn't talk about my political point of view, but that's not the main -- but I am also very important in complaining about the healthcare system here. I believe very strongly, that we ought to have a universal healthcare system. I think that a portion will be discriminated, the middle class shouldn't be discriminated. I don't think that there's better care for the white male or the white female wealthy patient is good medical care. I think everyone

should have a better system and I think that we ought to create something even better than what they have in Canada and England, which we are spending so many dollars in administrative costs, that's pathetic. And of course the costs of healthcare, as we develop more techniques and more machinery and more tests, and the people are living longer, which I am (chuckles) responsible for too, and the costs are increasing. There are many problems in here that I will hope that younger people and some of us will continue to address whenever we get a chance.

ROSOLOWSKI: To what extent do women and men recognize the contributions that women have made to the field of medicine?

EISENBERG: I think that many men and women acknowledge that, some others do not. I find myself, in the last two days, giving answers to some of the questions that sound evasive, and I don't mean to do that, but I don't know how, when I talk about men and women, it's very hard for me to generalize. There are men that give full credit to women and there are women that give full credit to women, and the other way around. I think that as a whole, it is acknowledged that women have made contributions in medicine. They cannot ignore history for God sakes, in spite of the difficult times that women have had

progressing, they cannot disregard history, so they have to acknowledge. Do they, in their hearts, in their thoughts, in publications, in acting as physicians in positions of power? I think that most of the people I respect, maybe that's the way. Men and women will acknowledge that we have made important contributions, that we could have made more if we had more (pause) -- we have had more opportunities available, I have no question. If we had better educational programs, some of the women that needed, could have gone to an all-girls school, and all-women's colleges, because they were too shy and the men would recognize when they ask the questions, you know, this has been written over and over and over again, but they are the historical truth [04:25:00] and I think that men and women cannot ignore that, that we made contributions in medicine, no question.

When I went to Hopkins, some of the things I saw made me feel I want to turn around and go right back to Argentina. Not because it was better, but after what I told you yesterday, that I expected nothing but the very best in Johns Hopkins. I went to entrance, and it was search of Jesus Christ, all the way from the floor, to an atrium that was four floors, all the way to the top of Johns Hopkins

and the cupid and all those things. And then I turn around to Jesus Christ, and as you heard, I was either agnostic or atheist at that time and I doubt very much. But anyway, it was a respect for the men that Jesus was supposed to have been, and not for the ones that have -- they have differences in them. But anyway, I made it clear and I went to what was then the main corridor, and I saw an entrance, and it had a door and it had a sign, "For white women only." And then next door was for colored, as they were called in those days, women. I really wanted to turn around by Jesus Christ, and go back to Argentina. And then I understood, and there were separate wards for men and women, and the great to-do was about the first blue baby that was operated on at Johns Hopkins, and these were babies that were to die, and a team of workers did the operation and this marvelous surgeon operated on those babies and they survived, and then we had an influx of questions at the hospital, not in my service but at the hospital, questions from the press and doctors that had new patients that were born as blue babies.

ROSOLOWSKI: What does that mean, blue baby?

EISENBERG: They were babies that had some malformation of the heart and they couldn't breathe and they couldn't get the oxygen they needed. And the clinician was a woman,

awkward, shy, and she was the one that did all of the clinical work, and none of the prize for this surgeon. So I saw that from the time I came. She's still revered, but for people that want to acknowledge, but it's called the Blalock operation and Blalock was the surgeon. Now you are going to ask me what was the name of the woman. (laughs) To be, percolates up, mind you, this has been intensive and the names are beginning to disappear.

ROSOLOWSKI: That's OK, we can check it later and work it in, don't worry about that.

EISENBERG: Helen Taussig, the name, Helen Taussig. T, like in Tanya, A-U-S-S-I-G. She was one of the incredibly shy, very shy, very modest, amazing clinician. So this happened all over the place. They cannot deny it, men and women that don't give enough credit to women. Some were the times.

ROSOLOWSKI: I'd like to ask you some questions of a more personal nature right now and find out who is the private person behind the titles and the public face of Carola Eisenberg? I wanted to know, what are your favorite activities when you need to recharge yourself, when you need to rest body and mind?

EISENBERG: Well, to the first question, who is the private person that what?

ROSOLOWSKI: Behind all the titles, you know, the first women
who did --

EISENBERG: Who am I, the private person?

ROSOLOWSKI: Who are you, the private person.

EISENBERG: Oh. Well, you've heard enough about me in the
last two days, that you can describe the answer as fully as
I can describe myself. I've been so very open through the
questions and before we finish, now that we are near
finished, I want to give you credit for making it so easy
and so enjoyable. [04:25:00]

ROSOLOWSKI: Oh, thank you.

EISENBERG: I really feel very strongly that way, because I
mentioned before, I thought it was going to be an intensive
psychoanalysis of six hours a day for two days, go over my
childhood and my adolescence and my change of careers. How
can I compress 90 years of existence? So you know as much.

I'll tell you, maybe I ought to think about that question.
Privately, I am not all that different than publicly, I
don't think. I think that that's the answer, because
unless I am in a situation where I think I might hurt
somebody by making public obviously, something that was
told confidentially, and then I will bite my tongue and I
will not say it. Or if I need to protect, for other

reasons, other people, I am whoever I am, with all of my strengths and weaknesses, and I talk. I don't think that privately, I'm very different than I am publicly, no I really don't, and I think that's a strength from the point of view I say it. I like that in me, as I don't like some other things but then that one I like.

ROSOLOWSKI: You've engaged in a lot of activities that have been really, really stressful, and I'm thinking here in particular, of the human rights work. But also, you've talked about some of the stresses of dealing with --

EISENBERG: Some of what?

ROSOLOWSKI: Some of the stresses of dealing with private patients. So, from that perspective I'll ask that other question. What do you do when you need to recharge, when you need to really rest?

EISENBERG: Lots of things I do. There were times I wished for the time and I have it now, but not full-time, because having worked in many other things. I love talking to my husband, listening to him. I love talking to my children. I love to travel, insatiable traveler. I love to read. I used to love to garden. I love to listen to music, I do a lot of that. I love to sleep and I am a good sleeper. Once in a while, I overeat, because I love the taste of food, not because I am hungry. What other things recharge

my batteries? What else do I do? I should have mentioned that I love to talk to close friends. It's interesting, I've made a little deviation. I have male and female friends, more female friends, and they are different as friends, at least in my experience.

ROSOLOWSKI: How so?

EISENBERG: I don't know how come, the same reasons I guess. They're all sort of different in responses I guess, or the interests that they, as different parts of me.

ROSOLOWSKI: What parts of you are men interested in, what parts are women interested in?

EISENBERG: I guess with men, I am a tiny bit more professional, but I talk also about personal issues. I have few of my friends that I have, male friends. With women, the close, close friends I am talking about, I expand. If I have a quarrel with my husband, I talk about it. If I'm worried about one of my children. I guess I feel that at some level, I never thought about that question, or why is it different. I love both, but I guess at a personal level, I am a little bit more inclined to talk to women. I think that maybe, they have shared more experiences, therefore they can understand mine.

ROSOLOWSKI: Do you find that you have most of your friends are within the medical profession?

EISENBERG: Unfortunately, yes, and I said unfortunately because I love friends, the few friends that we have that are not, [04:30:00] and I derive also, a great deal of satisfaction from them, but if I think of numbers, you are more apt to relate to the people with whom you interact every single day. They have more common experiences and you see more often, and the friendship becomes more. And yet I love the few friends that I can hear about their lives that are so different. Yes, most of them are in the medical profession.

ROSOLOWSKI: Who are the most significant people in your private life?

EISENBERG: My husband and my children and my friends.

ROSOLOWSKI: You were going to tell me a little earlier, about your children.

EISENBERG: Can I take one minute break?

ROSOLOWSKI: Absolutely.

[PAUSE IN RECORDING]

ROSOLOWSKI: So, we're back after a brief break and we're going to resume with you talking a bit about your children.

EISENBERG: I'd like to talk about my husband as well. We shouldn't use the word children. My grown sons and my

stepchildren. I don't even know where to start or how much to say. I don't know, it's hard to sum it up. I talked yesterday, a lot about Manfred, that was my first husband. He was a forensic psychiatrist and a well-respected member of a community that I liked, of which I was part of. I think I said something yesterday about his death and the effect on the children and on me, and then I remarried. Some were different and somewhat similar to my first husband. They were both friends, close friends.

ROSOLOWSKI: What do you feel that your first husband and your second husband contributed to your life?

EISENBERG: Personally, a lot, both of them, a lot. I don't even know how to start, it would take too long to describe. They made me happy and sometimes they made me unhappy too, of course, like in all marriages. But a lot of the time and as a whole, they made me very, very happy. That's one general way of putting it. There were other ways. As a woman physician, they contributed a lot, because they respected what I was doing, they liked it, they approved. They might sometimes agree, sometimes disagree. They were confidants, they were encouraging, they were all of the good things that a good partner can do, and both of them, they did that. I feel lucky to marry both of them, mostly because of the relationship I developed to each one of

them, but also because at some level -- and that... I really felt so lucky that they already have children, because I felt I was acquiring a family and then I was acquiring a second family.

My children felt very welcome when we had more children. It was a very interesting and active and interactive and marvelous house. I'm talking about the first and we'll talk more about the second marriage, but both husbands were somewhat different, somewhat alike, and both made me feel wonderful, most of the time, (chuckles) I'll repeat that.

ROSOLOWSKI: Well, you can't beat that.

EISENBERG: No, that's right.

ROSOLOWSKI: That's a good balance.

EISENBERG: That's right, never the regret of why have I married him.

ROSOLOWSKI: One of your children -- I don't want to --

EISENBERG: No, I know, I know. I know. My children.

ROSOLOWSKI: And stepchildren.

EISENBERG: The first one is Larry, who had a stormy adolescence, as most kids did in those days, (inaudible) for a different set of reasons. [04:35:00] They were among the usual disturbance of adolescence. There was the anti-Vietnam movement and all of our kids and grandkids

were heavy involved in that. Not grandkids, what did I --
I meant step kids.

ROSOLOWSKI: Stepchildren, mm-hmm.

EISENBERG: Were heavily involved in that. He struggled a lot. Both of my children had to struggle through the death of their father and through a change of locations of their mother and the adjustment of a new stepfather whom they loved as a friend, but this was a very different situation to the coming of stepsiblings.

ROSOLOWSKI: Was there anything special that you did at that time to help ease that transition? You, yourself, was going through a period of grief, but what about --

EISENBERG: Yeah. Well, I did some things and Leon, my present husband, helped me a lot, because he and I were worried about the fact that I was falling in love shortly after my children's father had died. Leon insisted that I should be talking with him often about our relationship evolving, because it was a big change, not only for them but for me, because it was a change that happened in a short period of time. It was difficult. So, he wanted, my children particularly, to be aware of the fact that I was getting involved with somebody else, so we brought them up to date in most everything, except the ones that were obviously too personal and will not affect them. They were

both very receptive of the idea of my remarriage, not only receptive but enthusiastic. So what I did was whenever I talked with them, it was just to talk about where we were and the doubts I had and the doubts that I'm sure Leon had, and how did they feel about it. We kept it very open.

I went to Oberlin College, where Larry was at the time, to talk with him about it, when it became obviously, a serious involvement. Well, it was always serious, but we were making plans for the future, in that way serious, and he couldn't have been more enthusiastic. At one time, I believe I told you, we talked on the telephone and I said something about if and when I decided to marry Leon, and he said, "Hurry up, somebody else might snatch him." So, they were enthusiastic and they both were at our weddings, as well as Leon's children.

ROSOLOWSKI: What is Larry doing now?

EISENBERG: He's a professor of psychiatry and the humanities at Rochester Medical School.

ROSOLOWSKI: That's the University of Rochester Medical School?

EISENBERG: Yes.

ROSOLOWSKI: And your other biological son?

EISENBERG: As of the first of August this year, will become the acting director of the Genome Institute at NIH.

ROSOLOWSKI: And remind me of his name.

EISENBERG: Alan Guttmacher, and the other one is Larry Guttmacher. What I loved about them, I cannot tell you how much I love them. What I love about them is that they are such magnificent human beings and most of the time, they have built a life for themselves. No, with that I have no question. Most of the time, I was going to say, I started saying, they are good friends of ours. But what interfere with that or the other, so that they have built lives, whose goals I respect and that I admire [04:40:00] and I am sharing with them. They have wonderful lives by their standards, their needs, and the needs of their wives and their children. They run into some of their grown relationships of the children now. Anyway, they are wonderful people and they struggle a lot in different ways, and they are somewhat different people.

When I was a child psychiatrist, first I had to hear from other people that jokingly will say huh, two psychiatrists, parents of two sons. They say that all of psychiatrists' children are brats and they are maladjusted and errrr. There were times when I began to think maybe they were

right when they were adolescents. But then they have to outgrow their adolescence and their pains and trials and tribulations, and they had difficult times, but as of the last ten, fifteen years, they have wonderful wives and wonderful families and wonderful professional lives, and wonderful commitments to society in general. We are very much, all of us, on the same wavelength.

I have been very lucky with the stepchildren as well. I feel very close to particularly one of the two stepchildren from the first marriage, whose children have lived with us for a year, one of them, so the step-grandchildren, I relate to.

ROSOLOWSKI: What is this stepchild's name?

EISENBERG: Hmm?

ROSOLOWSKI: What are the stepchildren's name from Bernard.

EISENBERG: Their name is also Guttmacher; one is Jonathan and one is Richard. And then I acquired these two other children.

ROSOLOWSKI: Or stepchildren. Stepchildren or grandchildren?

EISENBERG: Stepchildren, and their names are Mark Eisenberg and Kathy Eisenberg. They've been always wonderful to me. They had a more difficult time, because their mother was still alive and they came to us for visits. It's much

harder for young children, although they liked each other and they knew each other and the two families were friends, it was really hard to give -- although that was the case with the first set of stepchildren too. The difference was that the first set of stepchildren lived with us and these two stepchildren lived with their mother. Anyway, they've been very good to me and Mark is also a physician, the three boys are physicians, my two and Leon. John Guttmacher is a physician and Dick was very important in the health industry and now, et cetera. Kathy went for two years of medical school at University of Pennsylvania and then quit after passing the first part of the boards, because she wanted not to be a physician, and to this day, I don't know whether the motivation was everyone in the family were doctors and she wanted to be different. She got depressed when she was accepted in medical school. So I don't know, I don't know what motivated her, but now, and for many years, she's been teaching English as a second language, which is (inaudible) and very devoted to their kids. Anyway, it's another long story.

But I wondered whether -- going back to me, because that's the main subject, as a physician, whether my needs to be surrounded by kids and wanting kids so badly, at some

level, very primitive level, made me go into child psychiatry. Then I would have all of these patients in addition to my children and the first set of stepchildren. And then in counseling students, because then I will be more [04:45:00] surrounded by kids, and then into the medical school because all of the students were relating, you know, whether they want it or not, you know, I was a mature woman. And also, the fact of meeting a man with children, when I was, as I mentioned yesterday, not knowing how to deal with children, I never have had any. Two adolescent children in a society that was different than the one I grew up. But whether my need to be surrounded by children and substitutes, pushed me, at some level and primitive and not the main reason in any one of the case, but was one of the reasons why I continued to professional roles when I had been in contact with, until I finally outgrew the need and I managed to get involved in other issues. But I don't know, not very often, I said, and then I don't know whether it has anything to do or not, but once in a while the thought occurred to me.

ROSOLOWSKI: That's an interesting...

EISENBERG: I was so happy to get stepchildren, I was happy to be with the students. Who know? Who knows? And then of course the grandchildren, that was a separate different,

we have loads of them, and I won't go into it, it will take too long. But it was all the satisfaction of I'm different, I'm being a parent, but more young people growing. I loved growing up. Being close to things that grow, whether they are children or grandchildren or flowers or people's maturity increases as patients, or students that develop a new role in life, I love being with things that grow. I love to watch that and maybe it was one small factor in all of this personal stories I was giving you. Ask me more questions.

ROSOLOWSKI: OK.

EISENBERG: Or you come back to questions if you continue to have doubts.

ROSOLOWSKI: Let me ask a few more here. Describe a situation where you feel completely content or joyful. Describe a situation where you feel completely content, completely joyful.

EISENBERG: Many, many. I don't know whether I could describe one particular. I'm ecstatically happy when I travel. I am very happy when we are quietly reading in the evenings here, Leon and I. I am ecstatically happy when I see the children and the grandchildren. I cannot describe that. I love being with friends. There are so many situations, I cannot single one and describe. I'm

contented sometimes to be alone. Don't think that I am forever gregarious. There are sometimes when I just love...

I'll tell you, going back to the retirement, what I like the most -- I talked about the things I missed briefly. What I loved the most is what I never have had so much of it, is to be the owner of my own schedule and doing what I want, when I want. (gasps) Does that feel like a luxury, first time at age 89. And I am responsible and do it, but it doesn't have to do this moment. That's a moment of happiness, when I realize that, and then comes the other aspect; I miss this, I miss that, I wish that. I like being with myself too. I love being independent. I fought for that since I was an adolescent.

ROSOLOWSKI: To fight to be an owner of your own schedule?

EISENBERG: No, to be a real independent person. There were times when I would feel lonely and many times during adolescence, I wish I had this or I wish I had that.

ROSOLOWSKI: I had a related question, since you're talking about retirement or semi-retirement. How did you feel over the years, [04:50:00] getting older, and getting older as a woman?

EISENBERG: I never felt much older and I never had time or interest in what is it like if I get older? Of course I gave it some thought, I had to. What's going to be climbing three sets of steps when I grow older, what's going to be like this and the other thing, but never an intense question of growing older. There are many advantages to that.

ROSOLOWSKI: What are they?

EISENBERG: In the last year, I have felt more, the impact of being older, because since I fractured my femur, and for the first time I had to be really dependent for a month in the hospital, and since then, not being able to walk as fast, et cetera. So, I have felt more the impact. What are the satisfactions of being older? I can get to the movies at half price. (both laugh) Don't forget about that, and several other things. I feel more at peace with myself. I recognize some of my strengths. I don't worry about some of the things I used to worry, that were related to youth.

ROSOLOWSKI: Such as?

EISENBERG: If I were to be a widow with two small children and I didn't have a license, how will I support them? Lots of other things. That was a worry of mine. When I talk about worries, I don't think that they were overwhelmingly

taking my time or my energy, but it was a thought that occurred to me, what would happen if I died also, after my first husband died, who will look after them. What other worries did I have? Am I too fat, should I lose some weight, (laughs) yet I loved eating sweets, I still do. I don't know what kind of things would worry me at the time. I don't think any basic things.

ROSOLOWSKI: I have kind of a related question. There's certainly, there's culturally, a view of older women and what older women represent. Do you think that the view of older women, do you think --

EISENBERG: Do they think what?

ROSOLOWSKI: Do you think that the view of older women in this culture has changed over the course of the last generations?

EISENBERG: A little bit. There are some realities one has to face, and it's again, very difficult for me to generalize, but there are many more elder women than there are men, so the view of the single woman as an older person is more prevalent and in some cases more respectful of the way they organized their lives. In some cases dreadful sorry and compassionate, but the lives they have to lead. Again, society hasn't paid enough attention to that, the ones that have to live on social security or don't have

enough money to -- they have to make a decision between buying medicines or eating a hot meal in the evening. It's a serious problem. Medical care for the elderly is improving, but there are some areas that are terrible. The homes for the elderly women particularly, because there are more numbers, [04:55:00] for the ones that don't have the money and even for the ones that have the money, are enormous problems. The view that people have depends on the individuals. Again, I'm talking too near of always. I think of individuals. I kind of think in general terms. It depends on their own relationship with their mother and their grandmothers and their own views of elderly people. I don't know, there are so many factors for any piece of behavior, it's hard for me to generalize.

ROSOLOWSKI: Let me ask a couple more specific questions.

What are some of your favorite places and why do they mean something to you?

EISENBERG: Goodness, again, I cannot single one out. Home is a favorite place, I love it. I love this new place that we moved six or eight months ago, six months ago. I thought I was going not to like it, I was not going to like that I will miss the other place. I loved being home. I love traveling, and I don't mean this as a permanent home, but favorite places. I like to visit my children's places.

I love to travel to foreign countries. The most exotic, I love it the best, and yet I love going to London and Paris. I also realize that some of the exotic places we visit are all, you know, overrun and drove, whatever the word is, elephants, giraffes. I did many things that now I couldn't do. I realize the limitations of aging. I don't like being far away from our doctors and our hospitals, we are so old. But there are lots of places I love, lots of places. I love chamber music, concert halls. We go down here, to lots of music. I love gardens. There are many things I love, I cannot single one out.

ROSOLOWSKI: I think you're a person who is just --

EISENBERG: I'm sorry?

ROSOLOWSKI: It seems to me that you're a person who embraces life no matter where you are and no matter what.

EISENBERG: Most of the time, yes, and most of the times are very depressing. I think like some of the places I saw in Kenya, some of the places I saw in South Africa. I almost cried when I saw for the first time, villa miseria in Argentina. I embraced then, the life of the poor people that had to live in those places, but not the places, mm, no.

ROSOLOWSKI: I think you've already answered the question of whether or not you're a religious person, but do you

consider yourself a spiritual person and is this part of your work?

EISENBERG: You know, I never fully understood the difference between the two of them, because when I have asked that question, I've got different answers; the one of spirituality. Different answers from different people and I haven't read enough. How would you define the difference between religion and spirituality, for instance?

ROSOLOWSKI: Well, from my view, religion is something that you practice within a certain set of walls that are defined as a sacred space.

EISENBERG: Yes, with that I have no trouble, because I understand. What about spirituality?

ROSOLOWSKI: Well, spirituality, I would define as a practice that one carries with -- well, I'll speak from my own perspective. A practice that I carry with me, that can happen anywhere, but it makes me feel deeply connected with other people or with the world around me, whether that be a sense of nature of the cosmos, or even just at a chemical level. And I think spiritual is something that I -- something spiritual is something that I do for my own health and for the health of other people. So that's a brief answer.

EISENBERG: That's a very interesting and good description.

No, I am not religious and I am spiritual, I guess, as it gets to connections with other people, strongly connected with other people, [05:00:00] with the cosmos, and what else did you mention?

ROSOLOWSKI: Well, I'm just using my definition. I wouldn't want to put words in your mouth.

EISENBERG: No, no, no, but I am interested in that.

ROSOLOWSKI: I talked about how I go into Attica Prison, to work with inmates, and I consider that --

EISENBERG: That's a connection to people.

ROSOLOWSKI: But I consider that deeply spiritual work.

EISENBERG: That's interesting, I wouldn't call it that way.

That's very interesting and I think you might be right, yeah, because my connections to people, wherever they are, it feels very strong to me. But other things, the cosmos and part of the work I do, I think I am not, so I guess I am partially spiritual. That's the only way I can put it, according to your definition, but I was surprised at how many different answers, because people use that very often now, and 20 years ago nobody talked about those things. And I think that's evolving as people feel a little bit more threatened by the looming problem of the cosmos and nuclear war, and maybe all those things -- ah, I just used

two examples, but there could be 20 others. They feel a little bit more threatened and they want to connect to something. Maybe it's possible that that's what happens, I don't know. But I have an answer to your question as best as I could give it to you.

ROSOLOWSKI: No, I appreciate that and I didn't mean to have you answer within the framework of my definition.

EISENBERG: No, but I have asked that question, because I was curious about many people, particularly younger people. But also, younger people are turning more religious and that also has fascinated me in theoretical ways. I have asked those questions to myself and to other people when I could trust they will tell me exactly how they felt. It's an increasing use of the word spiritual and an increased number of religious beliefs and oncoming fears.

ROSOLOWSKI: You know, I realized that there's a question I didn't ask you, which is really quite -- it seems like a detail but it's actually quite important. You became a naturalized citizen and when was that and what was that like for you, to leave behind your Argentinean citizenship?

EISENBERG: I became a citizen in 1949 and I remember that date because three times, my passport was stolen, and since then, I walk behind my husband, one of the few times I don't open my mouth, because they have those things in the

computer, they have to give. My computer now is from Zimbabwe, where the last time I got -- my passport was stolen. So I am registered as somebody, I got a passport in Zimbabwe. So they always ask me questions and I always get one of the earlier fears I used to have, that they won't let me come into this country, because one time they did not let me come into this country. Anyway, I remember the date because I have to respond so very often when they begin to ask me, and I had to answer, then of course I have to answer. Was that difficult? No. I was very proud to become a North American citizen, and I am in love with the United States. I feel that people that complain all the time, they don't realize how good they have it, in spite of the temporary upsetting things that are occurring politically, in spite of the difficulties we are having, and I said we as North American citizens, have had even more so earlier in the history.

I read North American history, a lot in recent years, and it wasn't a problem. In fact, I don't know how much was the function that I was in my late twenties or early thirties, or whatever I was, that reentered the country, I felt more North American than Argentinean, although I feel very strongly, my ties, human ties, [05:05:00] to

Argentina; the beauty of the country and the language and the poetry and all kinds of other things. I'm not critical of Argentina, but I've been happy in the United States, because I achieved the things I was aspiring to. So how much was my maturity finally occurring and how much was the United States or how much was the many more opportunities that in Argentina that were denied to me or given with a great deal of complaints. I don't know, all those factor in.

And then I learned, on my first trip to Argentina, as a matter of fact, that I would maintain my Argentinean citizenship, which I did not know, I didn't know I have a dual citizenship. I learned that when I returned and they wouldn't give me an exit permit because they felt I was still Argentinean and I did not vote in the elections. When I left Argentina, women were not allowed to vote, and I never voted and I would not know who to vote for from here, because I did not know the political climates in detail.

ROSOLOWSKI: When did women get the vote in Argentina?

EISENBERG: I don't know, it was after I left and I left in '45. It must have been in the '60s or '70s, I don't know. Interesting, I don't know. I didn't mention one thing to

you which to me is important. When they asked me, going back to one of the earlier questions, about human rights, by then, two of my most closest out of three, male friends from the medical school there, had two of their children killed by the Gestapo, what I call the Gestapo, is the Argentinean police. I kept hearing from them and what my family was telling me, the one that I had left. At one point, I was a member of the American Psychiatric Association committee on emerging issues and they asked the women to be new members of the committee, and there were three men. I wish we had the time, so I could tell you what that first interview was like, because I said, they had been working together for a long time and we were the first two women.

ROSOLOWSKI: If you'd like to take some time to talk about that.

EISENBERG: Well, there's two of us. One was strapping, much taller, six-feet-three maybe, African American woman with a full military outfit, and Carola Eisenberg. They told us to tell them something about our lives, so we looked at each other, the three were there and we were on the other side of the table, just like I've been many times. This time, I felt comforted because another woman, so I said, "Please, go ahead," and she went and told me one of the

most incredible -- not me, the whole group, story. She had been raised in the Bronx, I don't know what part of New York City, a very sad family history. She was living among drug addicts and prostitutes and people sleeping in corridors because they were homeless. Some teacher, I've heard since, that many, many times, thought she was very bright and encouraged her to apply to college, and she did. I can make the whole story of her life, as long as she made it when she told this story. She ended up graduating from medical school and becoming a psychiatrist and being there, when I met her that day, as well as my colleagues, a psychiatrist that was in charge of all the psychiatrists in Southeast Asia during the Vietnam War. She was so impressive that I really thought after she finished her story, that my story was going to be a bed made out of roses, you know? [05:10:00] To lie down and smell the roses, and then I decided -- and my story, as you know it, wasn't all that easy, but by comparison, a family that was united and enough to eat. But I told my story, but at that time I was so upset by what was happening in Argentina, I'll tell you more detail of that, and they were horrified, the other psychiatrists, including her. And then afterwards they called me and they asked me whether I will go to Congress and tell them, a subcommittee of course, I

forgot which one, and tell my story, because what I knew was horrifying. I said I would. It would have made me nervous but I would. And then after I said I would, I thought you are out of your mind. Your family is still living there, they are going to be after them. Two of my neighbors already had been sent to jail because they were in the opposition to Peron. They were let out but no one was tortured. So I retrenched the invitation, but I felt terribly frustrated, because I couldn't speak up. So when they asked me to be in PHR, that's what came immediately to mind, now we can talk. I can talk about other countries. That was an important decision making.

The other thing that I thought that was funny. When we finished the whole day with this committee on emerging issues, and I thought this was a terrible emerging issue in Latin America, the woman psychiatrist, the new member, began to talk to me, and I related very warmly toward her. You know, we began to talk about each other's life and the usual thing that women talk more freely than men. Men play tennis and after 20 years, they don't know whether the other men have children and are married or not. Women immediately know all of the details and some of them quite intimate. But anyway, this woman began to tell me about

her life and I told her about mine. I was then at MIT, when this all was happening, and there were some students that were protesting because MIT was involved in this and the other thing, of building something.

Anyway, at the end of our prolonged conversation that she and I had, by now alone, without the men, she said to me, "Would you like to join the Army?" I laughed at first, I thought she was joking. I said, "Me, in the Army, why? No, I don't want that at all." And she said, "Why not?" I said, "I have a life, I have a husband, I have children, I have a job. Why will I take a chance? Why will I want to join the Army and be separated from the things I love?" She said, "Well, I can place you in a place near Boston, where you could..." Blah-blah-blah-blah. We need psychiatrists, in the name of military conduct. We used to have, maybe we still have them, but much smaller of course. I kept saying no, I am not interested, and she kept pushing and pushing. It will be wonderful, those are the kind of people and women in the military are right in a position of power here, will be. And she was pushing, then the woman professional that I believe very strongly about it, but God forbid, in the Army, not then and not now. So I finally had to stop all this barrage of questions and so I said to

her, "Give me one reason why I should join. I told you all of the reasons why I shouldn't join." And she thought for quite a silence and then she said, "You don't have to think what you are going to wear in the morning." (both laugh) I thought that was the one laughing moment. She was right. You know in the morning, how sometimes we think will this go with that and will this still fit from last year. Anyway, that was the funny moment of that, getting far, far away from what you asked, which by now I forgot.

I just wanted to mention my commitment to PHR and how we started, because I have become interested in that subject and many times, when I asked the students why do you want to take that [05:15:00] course, as I ask the members of the board of PHR once in a while, if I get to a personal conversation, which happens seldom, why, there are very different reasons for different people. As I asked the students early, why did you choose medicine, for some maybe they had a member of the family who died and they saw how important the doctors will be, and they wanted to continue to do research because examining or finding a new something. Anyway, there are different reasons, that's why I cannot generalize. I learned that from psychiatry and

from patients and from people. What other questions do you have?

ROSOLOWSKI: I know you don't like generalizations, so I'm hesitant to ask this, but I'll do it anyway.

EISENBERG: Please don't. Feel free, I will tell you yes or no.

ROSOLOWSKI: When you consider the successful women that you know in medicine, are there some qualities that they have in common?

EISENBERG: Yes. You're surprised.

ROSOLOWSKI: There we go.

EISENBERG: They're intelligent, they are hardworking, they have a commitment to what I consider a higher cause. They have compassion, most of them. I'm talking about most of them, because there are always exceptions to that. They are good reasoning people.

ROSOLOWSKI: They are good?

EISENBERG: Reasoning ability. They know how to evaluate situations and make their best judgment. I don't know whether most or some have a little, or a larger, internal security that makes them, particularly the earlier ones, that makes them propel, with some anxieties, but move on. I realize that as I am talking about those things, that

many of those are common with the men as well, maybe more to women, some of them.

ROSOLOWSKI: Do you see women of different generations who have succeeded, are there some differences in generations?

EISENBERG: Oh, yes, oh, yes. And I think that they are connected to two factors that are quite clear in the society, there are places where things have changed, not enough as I keep repeating, but they have changed. They have more support from some men and for some women. So they have the ability that -- I know, I'm talking about myself, maybe other women are similar or different. They plan ahead much more carefully. I told you yesterday, about the things that I did not know when I went into medicine and why I went into medicine, but never planned where or how and where I'd be ten years from now. Women plan much more carefully now than they used to and good for them. If they cannot make it in what they have planned because circumstances outside of them or not, then they will have an alternative plan. I never had any of that and I don't know that my friends that are my age that are physicians, I don't know what the answer would be, but yes, there definitely are generational differences, and not for the plus, plus, except that some remain the same, and those

are the ones that people can fight. Yes, I think I have answered that question. What other questions do you have?

ROSOLOWSKI: Just a couple more. [05:20:00] What needs to be done to keep women in the sciences and in medicine in particular? You've mentioned a number of things, but do you feel are still on the agenda?

EISENBERG: Math and science teaching.

ROSOLOWSKI: Math and science teaching.

EISENBERG: I think that there are lots of problems with that, particularly in most of the schools for boys and girls. I think boys and girls mature at different stages. I think that for the majority of boys and girls, parents to start with, are slightly different and parents encourage them, but I think the teaching of math and science is terribly important for little girls, you know from kindergarten on, a massive effort should be made, very definitely. Some don't need it and again, I run into the numbers problem, but some do and could make potentially wonderful scientists.

ROSOLOWSKI: This is kind of a complicated question, I think, but I felt it was important to ask each of the women for this oral history project, this particular question, which is really about the fact that you and the other women who have been the recipient of the foundation's award, received

that award because you excelled or you had an impact on many different areas. In your case human rights, gender equality, the issue of ethics. And that really struck me because we live in a culture that's very much about narrow specialization.

EISENBERG: Right.

ROSOLOWSKI: I find it just incredibly admirable that there are people who insist on spreading themselves not thinly, but working very deeply in multiple areas, and I wondered what you think that says about medicine, that when people can work in these different areas, and then what it says about people's capacities in general, and women in particular.

EISENBERG: I guess you should ask the question of the people that wrote the regulations for the award. It strikes me as funny that should be calling the renaissance award, because that's not how I find myself as a -- I don't feel myself as a renaissance woman. They should answer that question. I thought that was very interesting, when I heard that, and in fact I have suggested a couple of times, women that were not to receive the award, because I think their path was a little bit too narrow, and I knew that. I thought it was very interesting and very good that they put both things, but I don't know what the motivation was or who wrote those

requisites for those awards. I think you lose and you gain when you do all the things. I am not a full professor, for instance. If I would have devoted more time. I don't know whether I would have made it or not, but I would have had more energy and more time to think, this is what I want. I didn't care about that and I still don't care about that. When I was young, I guess I cared more, because then it was more important. My whole future was opening up at Hopkins and I was more challenged, but later on, I completely lost interest in all of these academic demands that people are putting to be accelerated. I admire and respect most of the people that make it, but that wasn't a personal interest of mine. I now know what was motivated mean, they're just different directions. As a physician, there were mixed roles and human rights and all of the other things. That's who I am and those were my main interests and continue to be. So, if I would have been ambitious, and I have met many of them and I respect them, people have different goals. Mine was not one of them. [05:25:00]

ROSOLOWSKI: Is there an area -- and I kind of see the palette of interest that you have, is kind of this really interesting spectrum on which you have self-expression, and it's self-expression that has an impact on people's lives in a very positive way, in guiding, educational programs,

and in human rights and in gender equality. I'm wondering if you had the time and all the energy in the world...

EISENBERG: Which one I will pick?

ROSOLOWSKI: Or, is there something you would have added, is there another area?

EISENBERG: Oh, lots of things I would have liked to add.

Interesting. I still, once in a while, I would like to go and do, well since recently. Well, I have a little bit, as much as I like, that I am wasting energy and time on something that's personally very rewarding, but I am not fully satisfied with that. I have been exploring different ways by which, with my training, that I could be useful, and therefore, I thought of a few things. I get a little bit scared when I think about that. I am so old and I don't want to promise something if I won't be able to deliver it. How long will I be able to deliver those projects of mine? It was part of the reason why I stopped seeing patients, with some pain at that time, because I thought, I cannot take more patients. How old will I be until I see this person recovering, and it will be difficult for the patient to have to transfer at that time.

So, I am limited by time, but what I would have added now, is what I keep thinking what should I do, early, in

different stages, I could have other things. I wanted to, for instance, to learn more, to have the time to indulge myself in learning, and that's why I returned from Harvard Medical School, I began to take courses with Harvard, and forget about those courses for retired people, where they teach each other. I didn't want that. I wanted the real McCoy and I got it, I would typically go to a professor.

ROSOLOWSKI: What did you take?

EISENBERG: I am a faculty member at the school of medicine, I just returned, and I would love to audit your course, is it all right with you? Not a single one that told me no. So I have a group of friends of mine and all of these white haired ladies.

ROSOLOWSKI: Which courses did you attend?

EISENBERG: We heard from some of my friends' children and grandchildren, which ones were the -- first of all, we didn't take seminars that are limited in numbers. We didn't want to take, or if they would have given us permission, I don't know, but we didn't even apply to seminars or small courses. So we took the required courses with a large number of students, and we were selected, what we will get before the beginning of the semester, and then a nice lunch, the four or five of us. One of the women was the one we met yesterday, that was going to the bank, and

one that lived, and she died since then, on the fifth floor here. And they will have wonderful lunches and I would be seeing patients and stop and write to the class. Imagine, we decided which courses to apply to? And then I will ask permission, usually for all of us, because I was the faculty member. I was never denied permission and they were interesting, fascinating courses with excellent teachers, mostly in the music department, because I wanted something different than science, and I wanted because the teaching was not that good in Argentina. We went to a prolonged high school, as I told you, right to the university, so whatever I learned through life, I learned on my own, but I wanted more regimented learning. Some things I was curious, music I did take for a long time, but I did know some of the aspects of music. So I took music, I took political science, I took literature. I took mostly music [05:30:00] and I was just... All of the courses were excellent.

I took one in political science, I forgot what it was called, but there were three people teaching it. One was the president of the university that left, because he thought that among other things, that women were not as able as men in science. One was the best professor in

political science and one was Thomas Friedman, that just recently wrote a book that's on the best seller list, and is a correspondent for the *New York Times*. They would disagree on basic issues and they would have a discussion that was amazing, a two-hour discussion among them.

Amazing, amazing courses. Last year, I didn't take a course and I didn't give a course at Harvard Medical School and I missed it a lot, partly because of the leg, partly because of the move, partly because now, I am closer to the university and I don't have a place to park. Before, I was further away, but I would drive to the university, select courses, among other things, that were given around noontime, and I would either walk to the university eating my yogurt in between patients, because then, when you ask about numbers, I didn't think of the number of patients. After I stopped the medical school, the numbers were much larger of course, because I saw patients afternoon and mornings, practically all except when I was going to classes, those numbers were incorrect.

Anyway, I loved those courses, but now it's more complicated, because I cannot park. I used to park in front of the house of an acquaintance of mine that lived on a cul-de-sac that was private owners. I asked him for

permission I could park there and I could walk to the university, three or four or five blocks, and it was easy. Now, without asking me if I gave him permission, he sold that house and moved here, right above us, on the fourth floor. I tease him because after he sold the house, I kept on parking there, because nobody was living there and they were rebuilding. So I put a sign and explained when I arrived and when I was going to leave. I never got a ticket, never. But now it's more complicated. I cannot walk as much, long distances. I don't know, I have to decide whether I'll continue.

My good, good friend that was the one with whom I started, died, right here, on the fifth floor and I don't know whether I will continue. But that, I loved to do and I regretted having to stop. But I feel that both with my continuing education and the things I am doing now, I am pampering myself. I should be doing more, we'll see. Maybe I have to have a conversation with my son. When I first moved her and said, what do you think -- I did ask him, what did I think. And interesting, because Larry, my older son, on his own also told me ma, you are wasting time and you are going to get bored of doing what you are doing. I said, "Well what would you like me to do? I don't know

what I can do more than what I am trying to do." He said, "Well of course continue with Physicians for Human Rights, that doesn't take you full-time and you ought to use your skills of how you connect with people and find something that you will feel you are being helpful." So I thought about that, because I think that he's right. It's not just the skills, it's the training I have acquired over the years that I will like to continue using. So, next time, you ask me for an interview, maybe I have discovered what that might be.

ROSOLOWSKI: We have a few minutes left, because I know you've got to stop soon, so I wanted to ask you if there's anything that you wanted to add at this point. [05:35:00]

EISENBERG: No, nothing that I would like to ask you to ask me, but just a comment that I was quite ambivalent about this. I felt I owe it to the foundation, to comply with the request, because I believe that the oral history of women in medicine ought to be transcribed. I felt very strongly and I was in two committees; in fact the one at Harvard Medical School, in the library, and the one that hopefully, I will join. So, I felt that it had to be done, but I did not know how much I could tell. I was going to fulfill the fantasy that gave me that award that I was a renaissance woman. And also, as I told you several times,

I felt this was like reviewing my whole life in a short period of time, and the difficulties of answering the questions, but I have to repeat again, what I said earlier. First of all, I was impressed when I received some of the questions, which I only glanced. I didn't go into detail, because I thought it was going to kill some of the spontaneous quality of this interview, and I just want to be approximately sure that you were accurate in some of the dates, which I was not, or whoever wrote, some of the years were sort of confusing.

I didn't know who you were and what kind of background you came from. I knew nothing about you. I didn't know what kind of personality I was going to have to respond, so I had a question mark about that and I had a question mark about how helpful it was going to be, I still have that question, for the future women that want to understand the history of women in medicine. I have no doubts that it will be helpful for them. Now, I don't know, but I think it has to be recorded. In fact, talking about my multiple interests, I've been pushing Physicians for Human Rights, and I talked with a professor, history, of science, of getting a graduate student that will want to write a thesis on this subject, because we won't have money to sponsor any

one of those things. But I think it ought to be written up while we are still alive.

So, I do believe in oral history and I am so pleased how the interviews have gone. First of all, I felt completely connected with you and I was enormously impressed by the amount of previous work that you have done to write the questions, which I didn't read really. I was too busy and I didn't want to kill the spontaneous quality, but I was impressed by how much you knew, and some of the things I did not know, like for instance, somebody wrote a letter of recommendation. I don't know where they got him from, I did not remember, I don't remember asking him. They selected just the right person, but I was impressed by the amount of work and reading and writing the questions you have done, and how free I felt with you in asking the questions, and how enjoyable this review has been.

I also noticed in myself, that I stayed away from some of the (pause) painful parts of my life that I could have described more fully. I mentioned them but they were private and they are private. I feel a little bit superficial answering some of those, but it has been wonderful and I hope that they continue [05:40:00] and I

hope that the next interviews will be enjoyable for you and productive for the foundation. It's been great.

ROSOLOWSKI: Good. Well, I've had a very enjoyable time talking with you as well and I've certainly learned a lot and I'm not even in the medical field. So I'm sure that the vast experience that you've had will be incredibly valuable to people in the medical profession as well.

EISENBERG: Maybe the courage to some of the future women that are doubtful about going into the profession.

ROSOLOWSKI: Well, thank you for your kind words about my role in this.

EISENBERG: Thank you very much for your intuitiveness about many of the questions you wrote down. I guess we finished and I will miss you.

ROSOLOWSKI: Oh, I will miss you too and I want to thank you, for myself, and also on behalf of the foundation, for being so generous.

EISENBERG: Thank you very much, thank you.

ROSOLOWSKI: For taking these two days to speak with me.

EISENBERG: Thank you.

ROSOLOWSKI: It is --

EISENBERG: I will be very curious about the few next ones.

I was curious about this one, and about your own professional future, I really would like to hear from you.

ROSOLOWSKI: Oh, thank you.

EISENBERG: I have emails, you know?

ROSOLOWSKI: Ah, yes.

EISENBERG: I am very poor at emailing back, because I never learned how to type. That was one of the jobs in Argentina women could have, they could become secretaries and bring the mate, not the coffee. Please, keep in touch.

ROSOLOWSKI: Thank you. Well, we're concluding this interview at ten of five.

END OF AUDIO FILE