Submission to the Standing Senate Committee on Human Rights

Study on Antisemitism in Canada

Submitted by: Jewish Medical Association of Ontario (JMAO)

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Executive summary

The Jewish Medical Association of Ontario (JMAO) submits this brief to support the Committee's study on antisemitism in Canada and to provide evidence from clinical and academic environments. We document a sharp rise in antisemitism affecting physicians, learners, and patients, and propose practical recommendations for universities, health systems, and regulators. Headline indicators from a 2024 survey of almost 1000 Canadian Jewish physicians conducted by the Canadian Federation of Jewish Medical Associations (CFJMA), of which JMAO is a member, underline the urgency:

- Before October 7, fewer than 1% of Jewish doctors in Canada rated antisemitism as severe in community, hospital, or academic settings (CFJMA 2024, unpublished data).
- Since October 7, more than 80% of Ontario respondents reported facing antisemitism at work (CFJMA 2024, unpublished data).
    - 73% reported experiencing antisemitism in university or academic settings (CFJMA 2024, unpublished data).
    - 64% reported encountering antisemitism in hospitals (CFJMA 2024, unpublished data).
- Among Ontario medical learners, antisemitism in the academic setting rose from 27.5% before October 7 to 62.7% after (CFJMA 2024, unpublished data).

1. Who we are

The Jewish Medical Association of Ontario represents Jewish healthcare workers and associated learners across Ontario. In this brief we thus focus primarily on data related to Jewish physicians, residents, and medical learners in Ontario.

2. Current situation in medical faculties and hospitals

Across Ontario teaching hospitals and medical faculties, Jewish physicians and learners report organized harassment, intimidation, and exclusion in academic and clinical spaces.

- After October 7, antisemitism in academic settings was reported by 73% of Ontario respondents (CFJMA 2024, unpublished data).

- After October 7, antisemitism in hospitals after October 7 was reported by 64% of Ontario respondents (CFJMA 2024, unpublished data).
- The causes and impacts of this are not limited to interpersonal interactions; respondents identify organizational policies and communications as significant vectors (CFJMA 2024, unpublished data).

3. Impacts on care, learning, and workforce

Care

- 58% of Jewish doctors in Canada are concerned that antisemitic bias among colleagues could harm Jewish patients or lead to substandard care.

Learning

- The exposure of Ontario medical learners (residents and medical students) to antisemitism rose from 27.5% prior to October 7 to 62.7% in the year after, with two thirds concerned for the future of their careers due to being Jewish (CFJMA 2024, unpublished data).
- Over 94% of Jewish doctors across Canada say antisemitism has already impacted the educational environment, with 63% rating the impact as significant or very significant (CFJMA 2024, unpublished data).
- 14% of Canadian Jewish doctors have already decreased their teaching roles as a result of experiencing antisemitism and a further 31% are strongly considering or considering decreasing teaching.

Workforce

- 80% of Jewish doctors in Canada report decreased personal wellbeing due to antisemitism, with 39% saying significantly or very significantly (CFJMA 2024, unpublished data).
- 25% of Jewish doctors in Canada say the period since October 7 has been the most professionally or personally challenging of their life, a statistic which is particularly remarkable given the recency of the COVID pandemic; a further 39% say that it has been a very challenging period (CFJMA 2024, unpublished data).
- 31% of Jewish doctors across Canada are considering leaving Canada, indicating a real retention risk in a strained health system (CFJMA 2024, unpublished data).

4. Systems and accountability gaps

- Reporting pathways are fragmented and often lack independence
- Anti-reprisal protections are unclear
- Universities, regulatory colleges, and hospitals all defer to each other to take action on antisemitism, often resulting in no action being taken
- Decision-making frameworks in EDI and academic governance do not consistently recognize antisemitism or protect Jewish identity and affiliations
- Data collection by medical institutions with respect to antisemitism and the Jewish experience is inconsistent and rarely disaggregated.

5. Recommendations to the Committee

- Recognize antisemitism explicitly in federal guidance to universities, health professions accreditors, regulators, and health systems, including in EDI frameworks.
- Direct transparent, disaggregated collection and publication of antisemitism incident data across campuses, hospitals, and other healthcare-related organizations using best practices for Jewish sociodemographic data collection (see report appended to the Submission to this committee from the Canadian Federation of Jewish Medical Associations (CFJMA)) and following principles of Jewish data governance (in partnership with mainstream Jewish community and health organizations).
- Encourage independent reporting mechanisms and anti-reprisal protections for learners and staff, separate from implicated units.
- Issue expectations for academic events related to healthcare and clinical teaching that prevent politicized targeting and ensure balanced, evidence-based content.
- Fund training on contemporary antisemitism for administrators, faculty, regulators, and clinical leaders, developed with non-tokenized subject-matter experts who represent the experiences and interests of the overwhelming majority of the Canadian Jewish community.
- Request progress indicators from universities and hospitals: incident trends, response timelines, training completion, and outcomes for affected learners and staff.

6. Conclusion

The data indicate a sustained rise in antisemitism affecting the safety of learners, clinicians, and patients. The Committee's findings can help align universities, health systems, and regulators around measurable standards and transparent accountability.

Annex A: Key statistics and source

Source: CFJMA 2024, unpublished data from a survey of nearly 1000 Jewish physicians across Canada, approximately half of whom were in Ontario (all data below is from that survey, more details are available on request):

- Before October 7, fewer than 1% of Jewish doctors in Canada rated antisemitism as severe in community, hospital, or academic settings.
- Since October 7, more than 80% of Ontario respondents reported facing antisemitism at work
    - 73% reported experiencing antisemitism in university or academic settings.
    - 64% reported encountering antisemitism in hospitals.
- Among Ontario medical learners (residents and medical students), antisemitism in the academic setting rose from 27.5% before October 7 to 62.7% after.
- 58% of Jewish doctors in Canada are concerned that antisemitic bias among colleagues could harm Jewish patients or lead to substandard care.
- Over 94% of Jewish doctors in Canada say antisemitism has already impacted the educational environment; 63% rate the impact as significant or very significant.

- 80% of Jewish doctors in Canada report decreased personal wellbeing, with 39% saying significantly or very significantly.
- 25% of Jewish doctors in Canada say the period since October 7 has been the most professionally or personally challenging of their life, a statistic which is particularly remarkable given the recency of the COVID pandemic; a further 39% say that it has been a very challenging period.

Respectfully submitted,

Dr Deron Brown on behalf of the Jewish Medical Association of Ontario (JMAO)