Medical Schools Offering International Elective Courses: Average Number of Medical Students in International Elective Courses

![Chart showing average number of medical students in international elective courses over three years.](Click to view larger chart online)

The Value of International Elective Programs for Medical Institutions

The international elective experience has become an established opportunity at most US medical schools. As the above chart indicates, nearly all medical schools offer international electives to students. Among US medical schools, an average of 23 students per school participate, and those students predominately do so in their fourth year. The AAMC data from the 2014 Graduation Questionnaire showing students who report engaging in a global health elective ranged from 30.8 percent in 2010 to 29 percent in 2014.

Interest in international elective opportunities has remained consistently high among medical students for many reasons, since these programs:

- offer the opportunity to serve some of the world’s most impoverished communities through the application of their medical skills and knowledge;
• provide a distinctive combination of first-hand medical care experience and total cultural immersion;
• offer unique exposure to the wide range of medical difficulties facing these disadvantaged populations;
• present opportunity to develop a foreign language and culturally diverse medical experiences that are proving to be important assets given changing demographics in the U.S.; and
• allow work side by side with medical professionals, professors and students from the host countries.

The above chart speaks to the numbers of students and schools participating in global health electives, but not to some qualitative aspects of global education: how prepared the students are for this experience, the impact on the host community, and what mutually beneficial partnerships can emerge from a collaborative relationship between the home and host sites(2).

The value to students who receive this clinical contact is profound. It exposes them to an underserved population in developing countries, while they are providing service. But careful preplanning and training for students prior to departure is crucial to ensuring a successful collaboration with the host program. Students will benefit from strengthened knowledge of infectious diseases and an understanding of the societal and economic conditions that exist at their site, but they should be advised to bring with them the appropriate amount of personal protective equipment necessary to ensure their well-being (3). Cultural awareness also plays a role in the student impact on the host institution. Prior to departure, students must be advised not to provide clinical service beyond their training, and to avoid the potential for misunderstanding brought about through language limitations.2 A student can help the host site by bringing along supplies to offset the cost of providing clinical care, such as gloves, gowns or needles, so as not to drain the host’s resources (3).

The educational benefit to students is evident, and calls for improved collaborative opportunities for a reciprocal exchange of students between home and host programs. Schools that send students to international elective programs should consider allocating spots to visiting students from their host sites (2). Such efforts could facilitate an enhanced understanding of medical education across the globe, and lead host programs to offer supportive clinical experiences in their own hospitals. The barriers a visiting student may encounter are not insignificant, but programs could plan to provide support to students as needed and able. This arrangement serves to bond the programs to one another and "encourage the internationalization of medical education" (2).

At Georgetown, the number of students embarking on an international elective during their fourth year averages about 40 per year, totaling over 1300 students to date. Georgetown's Office of International Programs provides mentorship to students being prepared for international service. The experience is not medical tourism, but rather a fundamentally guided immersion into another culture, for the betterment of that community. Students are interviewed to ensure that they have a "have a spirit of service." These programs have been established in support of the Jesuit tradition of service to others, and a well-organized office works to ensure that students acquire a global perspective and provide service to the medically underserved. To ensure curricular quality, each location is continually monitored. Students are expected to have updated immunizations, international medical insurance, and travel protection that provides for evacuation and extraction if needed. Safeguarding students is always the highest priority, and
managing safety concerns calls for a close monitoring of geopolitical hotspots, State Department travel warnings, and ongoing risk assessments.

Last year's celebration of the program's 20th anniversary brought many alumni back to campus, heralding the effect that international service has on their current practice, and many offered that they continue to volunteer by facilitating and / or participating in health care projects in developing countries. One graduate attributed the values-based educational environment that was so much a part of his international training has encouraged him to do more to help others. The program stresses that international service "prepares students to be active in solving the problems of this century—the gap between wealth and poverty." Graduates often characterize the formational impact of their international immersion experiences as "going with the intent to serve, but receiving much more than they give." Georgetown's program is funded through philanthropy, which mitigates student debt, and allows all who are interested to participate. The school feels that assisting the student financially with partial or full subsidies, and providing the curricular time needed to engage, will support the student's professional identity and cultural competency in the near and long term.

The host program director of a highly-valued program in the Dominican Republic suggests to arriving students that "You are not going to change the world in the time you are here, and we don't use the term ‘serving the poor.'" He goes on to tell students they will absorb something that will change their lives. Many of Georgetown's programs are in Spanish-speaking countries, and students are expected to have a basic knowledge of Spanish, but fluency is not required. The same host director explains that "the patients here know how to read eyes. They don't write or read, but they are very incisive. You have to train yourself for that, to look into the eyes of people."

These international educational programs provide formative medical opportunities that enable students to see the practice of medicine in a whole new light, both during their medical school years, and as they enter their graduate training and practice years.

About the Authors

Linda A. Gwinn serves as the Associate Dean for Curriculum Management at Georgetown University School of Medicine.

Irma M. Frank, DDS is the Senior Associate Dean for International Programs at Georgetown University School of Medicine.
References