

Minority Youth Encouraged To Enter Health Professions

By Jody Vilschick

Closing the Gap, First Summit Packs the House • January/February 2003

The lack of Hispanics in the healthcare professions is the primary focus of ¡ESCUCHA! (LISTEN!) a Latino student network in the Chicago area. Sponsored by the Hispanic Center for Excellence at the University of Illinois at Chicago College of Medicine, the program was designed to bring students together with Latino role models, and aims to educate students about health care issues in the Latino community.

Established in 1992 as a support mechanism for Latino students (although it accepts any student who wishes to become a member, regardless of ethnicity or heritage), ¡ESCUCHA! is a network of 900 high school, undergraduate, and medical students. Members attend public and private high schools, colleges and universities such as DePaul, Loyola, Northeastern Illinois, and medical schools of the University of Illinois and the University of Illinois at Chicago.

¡ESCUCHA! offers opportunities for established Latino health care professionals to mentor Latino students, and that is one of the most beneficial aspects of the program, said Pilar Bautista, assistant director of the Hispanic Center for Excellence. “It exposes member students to various physicians, specialties, and other medical students,” she said. “It also creates a strong alliance of Latino stu-

dents interested in medicine that offers a valuable support network. The early exposure also encourages students to pursue medical careers.”

The ¡ESCUCHA! student network meets on Saturdays, six times a year, at the University of Illinois at Chicago College of Medicine. Each meeting is divided into three parts: the first is information that the Hispanic Center of Excellence shares with students; the second includes a featured guest speaker who addresses health issues related to Latinos; and the third lets students share information about ongoing activities at their schools. ¡ESCUCHA! members also attend workshops, seminars, and other events that promote student academic needs and interests.

“Through the network, we provide students with the resources they need to successfully enter and complete a medical education. As a group, we share the vision of reducing the number of preventable illnesses among the Latino community, as well as increasing the number of Latino physicians in the community,” Bautista said. “As such, we will continue to address the concerns of our communities on the health issues and policies that affect us.”

At first the difficulty was recruiting Latino faculty members and community representatives in health care, Bautista remembered. “They were already pulled in a number of different directions that it was hard to get them to clear space in their already tight schedules,” she said. “But as ¡ESCUCHA! caught on with students, it became easier to recruit them to speak at meetings and become active mentors.”

What’s Working in Indian Country

The Association of American Indian Physicians’ (AAIP) mentoring and shadowing program, the National Native American Youth Initiative, serves Native American high school and university students who may wish to enter the health care field.

“We need Indian health professionals because we have the lowest percentage of minority entrants entering the medical field,” said Carla Guy, coordinator for the National Native American Youth Initiative.

Indeed, the numbers aren’t good. Native Americans continue to be the most underrepresented of minority groups in medicine. According to data published by the Association of American Medical Colleges, of the 66,253 students enrolled in U.S. medical schools in 2001, only 516 were American Indian. Only 103 or 0.6 percent of the 15,778 graduates of U.S. medical schools in 2001 were American Indian.

Native American health professionals are essential because they understand the needs of Native American people, according to Guy. “Non-Indian physicians are less likely to understand the culture and to really know their patient, therefore resulting in inadequate health care,” she said. “A lot of elders do not speak English and are not comfortable being in a clinical or hospital setting. If they are seen by a Native physician, they would be more comfortable and more likely to continue to seek medical treatment.”

The National Native American Youth Initiative brings 50 Native American high school students to

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Racial and Ethnic Backgrounds of Medical Students—Total Enrollment 2001-2002

	Men (#)	Women (#)	Total Number/Percent
African American	1,793	3,119	4,912(7.4)
Native American**	269	251	520(0.8)
Mexican American	938	770	1,708(2.6)
Puerto Rican (Other)	401	393	794(1.2)
Puerto Rican (Mainland)	215	209	424(0.6)
Other Hispanic	737	590	1,327(2.0)
Asian/Pacific Islander	7,127	5,945	13,072(19.7)
All other students*	24,479	18,983	43,462(65.6)
Total	35,959(54.3%)	30,260 (45.7%)	66,219(100%)

*All other students includes white students (not of Hispanic origin), international students, and students of unknown race and ethnic backgrounds. **Includes Native American, Native Alaskan, and Native Hawaiian. Source: Barzansky, B, & Etzel, SI. *Educational programs in US medical schools, 2001-2002. JAMA. 2002;288:1067-1072.*



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Washington, D.C., for 10 days each summer. “They learned so much about what is available to them, about financial aide, scholarships, different programs in different agencies,” Guy said. While they’re in the nation’s capital, they meet with representatives from the National Institutes of Health, the Indian Health Service, the National Naval Medical Center, the Uniformed Services University of the Health Sciences, the HHS Office of Minority of Health, and more.

“The program motivates them to stay in school and continue on in a health field,” Guy said. “The biggest challenge is finding the students, and letting them know this program exists.”

AAIP is also associated with another program: the Center of American Indian and Minority Health (CAIMH), which was established in 1987 at the University of Minnesota-Duluth and later expanded to include an office on the UM-Twin Cities Campus.

The CAIMH’s mission is to raise the health status of the Native Americans by educating Native American students in the field of health care and Indian health. CAIMH encourages Native American students to return to their communities to deliver culturally sensitive health care to their own people.

To help students, the CAIMH has created the Indian Health Pathway (IHP), a program designed to provide students with academic support and individualized assistance as they move through all levels of the educational system, from kindergarten through health professions school. Through one-on-one counseling, enrichment programs, and academic and cultural support, the CAIMH helps students make decisions and choices along their pathway to becoming a health professional.

For more information on the ESCUCHA! program, contact Pilar Bautista via e-mail at pilarb@uic.edu or go to <http://www.uic.edu/depts/mcam/hcoe/escucha.html> on the Web. ❖

For more information on programs for American Indian youth, contact the Association of American Indian Physicians at 405-946-7072 or on the Web at <http://www.aaip.com> ❖



*Minority Youth Encouraged To Enter Health Professions is based on the Summit workshop
Calling All Role Models: The Importance of Mentors and Role Models on Minority Youth, Thursday, July 11, 2002.*

