

UCLA's IMG Program: Breaking the Language Barrier to Primary Care

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California's underserved population faces not only the issues of accessibility and affordability, but also, for many Hispanic populations, a language barrier. "The bilingual physician shortage is very real and with so many monolingual Spanish-speaking patients, that's a big barrier to care," asserts Dr. Michelle Anne Bholat, who serves as the Co-Director of the UCLA International Medical Graduate Program (IMG), in addition to her responsibilities as Vice Chair, Clinical Affairs in the UCLA Department of Family

Medicine. "Through the IMG program, we want to address the gap between what the current physician workforce looks like and what we need in California."

With a 36% Hispanic population but only a 5% Hispanic physician workforce, it's all too common for a patient to have trouble communicating with their doctor, and vice versa. Yet there are graduates of Latin American medical schools who live in California – they just aren't licensed to practice in the U.S. The IMG program provides bilingual (English/Spanish) international medical graduates with the tools and resources to help them successfully pass the United States Medical Licensing Examination (USMLE) and to be eligible to compete for a California Family Medicine residency training internship. The four-step program includes:

1. Pre-Preparatory Courses - Basic Science Review for USMLE Step 1 and English for Health Professionals
2. Program A - Basic Sciences/ USMLE Step 1 Preparation

3. Program B - Clinical Science/ USMLE Step 2 CK and CS Preparation

4. Program C - Clinical Observership

The IMG program then requires that after the participant becomes a U.S. licensed physician, they devote two to three years practicing as Primary Care physicians in an underserved area of California. IMGs must commit to the program full-time and the program pays its enrollees a stipend to help support that. "We learned during our pilot that you cannot work full time and study on the side to get through the requirements," Bholat says. "There's too much material and the demands are heavy. Enrollees take an English for Health Professionals or the IMG-specific ESL course at LA City College, in addition to science courses, taking regular diagnostic tests and eventually working up (Program B) to obtaining Advanced Life Support Certifications." And the risk of taking the test without such thorough preparation? "Many coming from other countries who take the USMLE fail the first time, not understanding what the exam entails," Bholat shares. "Unfortunately, if you fail

the test multiple times, you're putting yourself out of the running, it becomes a barrier."

Dr. Marcos Uribe, who completed Program C in January 2012, feels it has been exactly what he needed to do. "Though I lived in the U.S. until age 8, I grew up in Mexico." He has a family, and says that the no-work requisite meant he had to wait until he could afford to enter, but Uribe doesn't begrudge the requirement. He moved back to the U.S. from Mexico five years ago and really needed to get into clinical rotations here, but says, "It's hard to realize that your home country's training isn't valid here. The UCLA program helps you build credibility, which is huge when you're trying to get into those highly competitive residency spots." Uribe, who entered the program in 2011 with advanced standing due to having passed some of the required exams, now works

at a company doing non-medical work until his residency comes through. "The UCLA program is set up to help us succeed. If you do as they recommend, things really start moving."

Uribe acknowledges that the road can be very frustrating. He cautions other IMGs not to skip steps, highlighting the necessity of thorough exam preparation. He also has an insight to share with physicians who are not bicultural; "Reassure your Hispanic patients that you're paying attention; Latin American consults aren't as short as those in the U.S." He laughs, "My mother's main complaint is that her doctor is always in a hurry."

To gauge program success, consider the 2010 residency match, which had 302 matches for Family Medicine residencies. Of that, 28 were foreign medical graduates, and UCLA's

IMG program was responsible for 13 of those. UCLA shares that 54 of its IMGs are currently serving family medicine residencies in underserved California communities. And in July, Governor Jerry Brown signed a measure that allows the IMG program participants to engage in "hands-on" training while working with licensed California physicians on patient care.

Uribe learns in March 2013 if he has a residency match, and is eager to get "back in the game." He says, "The UCLA IMG program guides you through the exam and sets you on a career path. It helps you so you can help others."

To learn more about the UCLA IMG program, visit: http://fm.mednet.ucla.edu/IMG/img_program.asp

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