# American Medical Students Abroad: Group Finds Way in French System

Paris. American students unable to gain admission to U.S. medical schools are turning to foreign medical schools in growing numbers and, increasingly, placement services and other go-between agencies are getting them in.

Under one such program, for approximately \$4000, the would-be medical student is flown to Paris, put up for a week of tourism in "old" Paris, lodged for the summer at Cité Universitaire, given an intensive course in French—and guaranteed a place in a French medical school either in Paris or the provinces.

Most official counseling agencies advise students to avoid such programs on the grounds that enrollment in French medical schools is theoretically open to anyone who can figure out the system and that the rest of the package program should cost no more than \$1000.

This advice, however, may not be sound. In practice, it appears that students who pay their money to the Alliance for Franco-American Graduate Studies, Inc., the New York-based organization that offers the package deal described above, are given preference by French medical school deans for places available to American students.

The story of the Alliance is one of symbiosis between Americans who desperately want to study medicine and are denied admission by American medical schools (*Science*, 3 May) and a French medical establishment that wants more contacts with physicians in the United States.

In return for being able to get its students into medical school, the Alliance offers several programs to benefit the French. It gives travel grants under the auspices of the French equivalent of the National Institutes of Health (NIH)-l'Institut National de la Santé et de la Recherche Médicale (INSERM)—and provides externships for French medical students in New York and language laboratories for the study of English. A cram course for French doctors who want to take the Educational Council for Foreign Medical Graduates (ECFMG) exam is also being started.

The idea of a trade, in this case medical education for Americans in exchange for other opportunities in the medical sciences for Europeans, is not unique. One argument used with Congress to justify the channeling of some NIH money to Europe is that a large number of Americans receive their medical education in European schools.

But this type of trade, with the bill footed mainly by American students, is being engineered on a major scale in both France and Italy by a private individual, Albert Schrager, a New York businessman with no previous connections with medicine or medical education. Schrager is director of the nonprofit Alliance and the Italo-American Medical Education Foundation, a similar group in Italy.

The list of Alliance advisers on the group's latest brochure shows a marked imbalance. On the American side are one lawyer, one physician, and two dentists. On the French side, several deans of medical schools are listed, as well as the director of INSERM. The French advisers all spoke warmly of the Alliance and of Schrager, although they seemed to know little about how his group worked, or even that students paid to be included in the program.

Students come to the Alliance directly or through advertisements placed in college and other newspapers by placement agencies. One of these placement agencies, Euromed, Inc., seems to be particularly important. Euromed, Inc., advertises a program identical to that of the Alliance as its own. And while Schrager says that he works with placement agencies since he himself won't advertise, one Alliance student who found out about the program directly from Schrager made out her check to Euromed. Another student, Kenneth Gorelick wrote to the Alliance, but received a reply from Euromed.

There is disagreement about how difficult it is to be accepted on the Alliance program. Schrager says that a committee of doctors and educators examines each dossier and only one of five applicants is accepted: Students feel admissions procedures are much more casual.

The price seems to vary slightly, with higher prices for married couples. (Schrager told *Science* that the cost

per student this year for the Alliance program would be \$3000 to cover the orientation program and a contribution of a minimum \$1000 to help support the Alliance's exchange activities.)

For this fee, which is refundable if the student can produce proof of admission to a U.S. medical school before 1 June, the student is guaranteed placement in a French medical school as well as participation in the orientation program, which includes not only an intensive French course but courses in physics and advice from older medical students. This the Alliance organizes. One Alliance student did not think much of the orientation program but felt that the Alliance was worth the price just to get through the red tape of enrolling. Another, Kenneth Gorelick, a first-year student said, "You couldn't do it on your own for much less money. I had a friend who did, but it took him 6 months."

#### The Perfect Dossier

An important first step is the preparation of a student's dossier, which includes birth certificates, diplomas, international reply coupons, and so forth, properly translated and notarized. Gaétan de Vilmarest, of the foreign student office of the University of Paris, is the first person independent students see in the enrollment process; he also works closely with the Alliance. The main difference between students accepted and rejected last year, he said, was that the accepted students' dossiers were in perfect order, and he commented on the fact that the Alliance prepares a perfect dossier for its stu-

The Alliance does more than prepare a perfect dossier: It seems to have been very successful in procuring places for its students when necessary. In the provinces the process is simple, since there the dean has the right to accept or reject foreign students. Here Schrager negotiates numbers with the various deans and sends the students; several people point out that he has succeeded in getting Americans into medical schools that had previously not accepted Americans.

In Paris, there is disagreement among those concerned as to the process for foreign students. A scientific adviser in the Ministry of Education said that in Paris, too, it is up to the deans to decide, and each dean interviewed tended to confirm this. The Division de la Vie Universitaire of the Sorbonne, however, the body charged with apportioning the students into the

SCIENCE, VOL. 185

various medical schools in the Parisian area, says that the deans have this right only if there are unfilled places after the school term has started. The conflict apparently produced partial victories on both sides last year: The Alliance thought that it could place its students in specific schools but found that placements were scrambled, and the Division de la Vie Universitaire found that certain Alliance students were listed as enrolled without having passed through its office.

It seems clear that, given the power, some deans would prefer Alliance students to independent Americans. The Division de la Vie Universitaire points out that such preference is "contrary to the spirit of French law" and that any student told he must come with the Alliance should complain to the Ministry of National Education. The American student, however, unfamiliar with various French agencies, is unlikely to know a priori where to turn. Of three deans listed as Alliance advisers, one said he made no distinction between an Alliance American and another American; another said that he would give preference to enrolling students who could provide something in return, such as the Alliance exchanges; and a third said he would not accept non-Alliance students at all.

In any case, the Alliance seems to have convinced many well-placed individuals in French medicine of its importance to them. The travel grant program through INSERM reportedly works very well. Last year 11 INSERM fellowship holders received additional grants from the Alliance to enable them to actually live on their grants without, as one INSERM grantee at Harvard was forced to do, washing cars on the side.

The director of INSERM says of it: "It's very important for our exchange program. We consider international relations the most important thing in research, particularly for a country like France. I need only to phone Mr. Schrager, and within 2 weeks he tells me yes or no; and he makes no distinction as to whether the grantee is French, working in the United States, or American, working in France."

The reason the Alliance decided to give externships to French medical students was explained by Ronald Frazee, director of the Fondation des Etats-Unis, the U.S. housing unit at Cité Universitaire, and an Alliance adviser. "Since we were dealing with deans, we thought something should be done for French students. We sent 40 students to five hospitals in the New York area for 3 months [in summer 1973]. This had a very good reception with the deans, and we're going to do the same thing this year."

While the program may have had a good reception with the deans, it appears to have worked less well from the students' point of view. The idea went over well because there are few organized exchanges at the medical-student level. The Alliance, however, did very little organizing but simply put the students into hospitals and let the hospitals keep them busy. The largest group was put into French and Polyclinic Hospital, where the students, some of whom had been highly selected by their deans, were put to work as unpaid stretcher-bearers. In addition, meals were provided in some cases and not in others, and students who had been told they could live for \$30 a week began having financial problems.

When the students tried to protest to Schrager, they found he had gone to Europe and nothing could be done for them. Because of financial problems, a large proportion of the students were obliged to return home early.

When these criticisms were relayed to Schrager, he put the blame on French and Polyclinic, which he says he did not know was in financial difficulties. He also said that meals were provided, the Alliance office had made petty cash loans all summer, and problems, when they arose, arose because the French students did not bring as much money as they had been told to. He advised talking to students from the Cochin medical school, who had been placed in Booth Memorial Hospital and had reported a good experience.

Conversations with four of the five Cochin students revealed that their program had succeeded mainly because

## French Set Foreign Medical Student Quota for 1974–75

The accompanying story on the Alliance for Franco-American Graduate Studies was completed last spring, but publication was delayed because the French government was expected to issue revised regulations affecting foreign medical students in France and because some information on the Alliance was not available.

As far as can be determined, the general requirements described in the story continue to apply to foreign medical students. Variations are possible, however, since French medical school deans appear to administer ministry regulations with some latitude. Medical schools in Paris reportedly will limit enrollment of foreign students to about 300 this year, but there is no indication of how many places will be available to American students. Informed observers say that enrollment of foreign students in all French medical schools is likely to be limited to 5 percent, conforming roughly with the Paris quota.

French government representatives in this country are demonstrating increased sensitivity to the question of foreign medical students attending French medical

schools. A recent order from the French ambassador directs consular officials to refer all inquiries on the subject to the scientific counselor in the Washington embassay.

A financial statement on Alliance operations for the 1973–74 school year was recently furnished to *Science* by Alliance executive director Albert Schrager. The statement showed total revenues of \$431,250 derived exclusively from fees paid by students (125 students each paying \$3150 and 25 wives each paying \$1500). Total expenses were put at \$492,250, producing a deficit of \$61,000. Funds realized from gifts from parents and other sources will presumably reduce the deficit.

Expenses for U.S. students were listed as \$189,250; this included \$30,000 for a New York-Paris charter flight, \$50,000 for language instruction at the Sorbonne, and \$87,750 for housing costs during the orientation program. Expenses for the Alliance's New York and Paris offices were put at \$156,000. The cost of programs for French students and medical researchers totals \$147,000, including \$52,000 for the extern programs and \$50,000 for researchers.—J.W.

the director of Booth Memorial had taken pity on them, arranged to have their meals taken care of, and paid them a small salary. They confirmed the complaints of other students that the program was disorganized, that no arrangements had been made for meals, and that no petty cash loans could have been given since no one was in the Alliance office during their stay.

Programs such as the Alliance's are financed, of course, with that part of the American students' fee not spent directly on the Americans themselves. Just how much is spent directly on the Americans is unknown. Students suggest a maximum of \$1000. For an independent student, certainly, the flight over, lodging at Cité Universitaire, and a language course at the same institute used by the Alliance would be somewhat less. Schrager claims that the cost per student (in 1973) was \$1500 to \$2000, but if he is paying what he says he is for the various parts of the program, he is being exploited. For example, he gave the cost of chartering a plane as \$30,000; yet a student exchange agency that specializes in charters estimates that it could have cost him about \$130 per person, or \$20,000 for the approximately 150 students on the exchange.

### **Emphasis on Exchange**

Schrager claims that the rest of the Alliance's income, as well as an additional large sum in contributions, is given back to the French in the form of fellowships, exchanges, and so forth. He considers that this, too, goes indirectly for the American students: "If there is going to be a place for Americans in French schools, it will be due to the efforts of our exchange program. You cannot divorce one from the other." However, other European countries have had to limit the number of Americans in their medical schools mainly because there were so many. Since the Alliance brought over 70 students last year and 150 this year, Schrager may be accelerating the limitation as much as he is heading it off. In addition, his attempts at getting and keeping students in have created some critics of his activities in French medical education.

Schrager sees nothing at all wrong with the students contributing a fairly large sum to the program. "It is merely a method of saying thank you to the French for making the possibility of a medical education available to students whose own country closed its door in their face."

The catch is that the thank you is said before Americans understand the French system. Unlike American medical schools, where entry is difficult but most students who are admitted finish, the big hurdle in French schools comes at the end of the first year, when a concours, or exam, is given. Students are admitted into the second year according to their rank, which must be approximately in the upper one-third. Those not admitted may try one more time the next year. Because the situation has been in flux for the past few years, it is understandably difficult to provide students with the most accurate information.\*

While Schrager denied that he had been anything less than candid in explaining the French system, he said during the course of the same interview that "before the Alliance, only 5 to 10 percent of Americans passed into the second year and this still holds true for non-Alliance Americans. Last year in the Parisian faculties I got 68 percent of my students through." These figures are misleading in several ways. Most persons within the administration thought it would be impossible to obtain a breakdown of the success rate of Americans, because these figures are not kept. And although 68 percent of the Alliance students in Parisian faculties who actually stayed around to take the examination did pass, Schrager admits that there is a dropout rate of about 25 percent during the first year. He volunteered no information about the showing of Alliance students in the provinces, which others indicated was much worse than 68 percent. When Schrager was asked about this, he said that they were still in the process of collecting data. Yet this figure should be much easier for him to obtain than the overall showing of Americans.

Said Joanne Imperial, a first-year student enrolled in a school where none of the Americans passed last year: "I wouldn't have left the graduate program I was in in Colorado had I known more about the situation."

It cannot be said that Schrager doesn't try to help his students past the barrier of the *concours*. When none of his students ranked high enough at one Parisian school he offered to pay part of the extra cost to the school if students whose grade had

been passing but whose rank had not been high enough were nevertheless accepted into the second year. Some of Schrager's French supporters were dispatched to the Ministry of National Education with this proposition, apparently arguing that since the number accepted into the second year was based on projected medical needs of France, it wouldn't hurt to make a few exceptions for the Americans. The ministry gave a flat "no," explaining that the number of places was based not on the projected medical needs but on the ability of the French system to educate. To admit Americans who had scored lower than the cutoff would mean that the original cutoff had been too high. Many of the strikes among French medical students have been on behalf of French students in the same position; to give the precious places to Americans who ranked lower than the French students who were refused them would have been political dynamite.

## Strengths and Weaknesses

While some observers of the Alliance interpret its strengths and weaknesses according to a mercenary model, others believe in Schrager's basic altruism if not his respect for facts and figures. Barry Jordan, an American who came with the Alliance last year and worked as an orientation counselor this year, says, "I think that he himself really believes the figures he cites about the number of his students who passed the concours. Part of the problem is that he never wants to disappoint anybody by telling them about the high failure rates."

Admitting that he may have a more positive view than others, having passed the *concours* with flying colors, Jordan still says, "I wouldn't be on my way to being a doctor if it weren't for Mr. Schrager. It's costing the French a lot of money to educate me, and he's made it more worth their while to admit us. The French are gaining something, the Americans are gaining something."

For while many of Schrager's practices sound at least unorthodox, he must be given credit for having identified and to a degree met complementary needs that legitimate channels have not: the desire of young Americans for a medical education, and the feeling of the French that they should in some way be compensated for providing it.—LYNN J. PAYER

The author, a free-lance medical writer, is now living in Paris.

<sup>\*</sup> Schrager told Science in June that 65 percent of the first group of Alliance students who took the concours in the 11 Paris medical schools passed into the second year. He said this compared with 25 percent of French students and 17 percent of all foreigners who were successful.