



crowded public sector. In that country, government plans to eliminate a subsidy worth about US\$50 million to private health insurers have sparked fierce criticism from opposition parties and the companies themselves, but government supporters in Congress still hope the measures will pass.

During this year's state-of-the-nation speech, Chilean President Eduardo Frei announced he would eliminate the subsidy, which allows workers access to private insurance programs. The Chilean health care system, like Canada's, is modelled after Britain's National Health Service.

Widely available public health insurance pays for care in public hospitals and a network of primary care clinics. However, the military government that ruled from 1973 to 1990 cut spending on the public system and at the same time created private health insurers, which now cover the wealthiest 25% of Chile's 14 million people.

Because the economy grew steadily over the past decade, health problems have shifted away from the traditional ones that dog underdeveloped nations toward the pathologies North Americans are familiar with: stress-related addictions and depres-

sion, cancer, AIDS, ulcers and back and cardiac problems.

But economic growth has not brought benefits to everyone. According to the World Bank, the UN's Economic Commission and other authorities, Chile has the worst income distribution on the continent after Brazil, and poverty remains a pressing problem for almost 1 in 4 Chileans.

The country's private clinics often offer state-of-the-art technology and catering worthy of a 5-star hotel, but many of those who, in theory, are covered by private insurance use public services when they're ill be-

## Students get gritty introduction to reality of HIV/AIDS

A summer pilot project that brought AIDS patients together with nursing, pharmacy and second-year medical students from the University of British Columbia "had a huge impact" on the undergraduates, says Dr. Andrew Chalmers, the university's associate dean of undergraduate education. "I'm quite proud that we accomplished something as unique as that." The program's success means that a new interdisciplinary course is being planned at UBC for next winter.

The students spent 3 weeks getting a firsthand look at the complex issues surrounding HIV and AIDS. The research took them to 5 hospital and community clinics in Vancouver, ranging from the Palliative Care Centre at St. Paul's Hospital to the Oak Tree Clinic for women and children.

Project coordinator Paul Perchal, the director of education at AIDS Vancouver, says "learning breakthroughs" occurred in several areas

as students were introduced to issues such as the predicament of women in poverty and the impact of new drug treatments. Chalmers says exposure to the seamy Downtown Eastside, with its mix of sex-trade workers and intravenous drug users,



Medical student Cam Bowman: exposure to a different world

helped the students understand "the broad social determinants surrounding HIV/AIDS, the role of addiction and the need for sexual counselling." It also resulted in their "overwhelming frustration with the system," he says. [The Downtown Eastside is a ripe breeding ground for disease. It

is estimated that 25% of intravenous drug users in the area are HIV positive. — Ed.]

Cam Bowman, one of the medical students, says the summer program provided "a really great grounding in the scope of HIV/AIDS." Bowman, who continues to work at a downtown clinic once a week, says many of the area's patients "just don't care anymore. If they don't care, none of [the education and clinics] really matter."

UBC's new course will be a 4-to-6 week elective for nursing, pharmacy, nutritional sciences, social work and theology students, and second- to fourth-year medical students. Chalmers says HIV/AIDS "provides an excellent model" for teaching about delivery of health care by a team and addressing real-life issues, such as reasons why some people feel marginalized. He considers the course a prototype for a series of interprofessional electives being developed at the university. — © Heather Kent