

## From the BMA

### BMA opposes student loans proposal

The BMA has strongly criticised the government's proposal (see below) that students will be able to take out loans to top up their grants.

When the Secretary of State for Education and Science, Mr Kenneth Baker, announced the white paper last week the association forecast that many medical students would face an ever increasing debt as grants remained frozen and loans took their place. Medical students would be particularly hard hit because their courses were so long. The five or six years it took to qualify and the longer university year of clinical students could leave the majority facing a bill initially of £2000, which would go up with inflation. As a result many would be doctors would rethink their career choice.

According to the Department of Education the real value of the student grant fell by 21% between 1982-3 and 1986-7. Parental contributions increased by 86% in the same period, but 35% of students who should receive a contribution from their parents do not get it in full. Half of all students expect to end the academic year in debt, and loans average £341.

Mark Callaway, chairman of the association's medical students group and a final year student at Southampton, warned, "The loan system will mean that a career in medicine will increasingly become restricted to those students whose parents can afford to compensate for the falling value of the grant. A lot of potentially good doctors will be discouraged from entering medicine." The BMA wants to see an adequate non-means tested grant system.

The government plans:

- To introduce an interest free loan facility from the academic year 1990-1; the loan would be £420 (average) in a full year and £310 in a student's final year
- To hold steady (in cash terms) the parental contribution and grant from the academic year 1990-1
- To increase the loan facility each year to take account of this reduction in real terms in the parental contribution and the grant
- To defer repayment of the loan when a graduate's income is low.

The white paper lists the main purposes of the scheme: to share the cost of student maintenance more equitably between students, their parents, and the taxpayer; to



Kenneth Baker, Secretary of State for Education

increase the resources available to students and to reduce the contribution to students' maintenance which is expected from parents; to reduce direct public expenditure on grants; to reduce students' dependency by removing them from the social security benefits system; and to increase students' self reliance and economic awareness.

### Authority refuses to reimburse defence subs

The BMA is to take legal action against the special health authority which manages the Maudsley Hospital in south east London if it continues to refuse to reimburse defence subscriptions. The authority's personnel officer has told a member of the medical staff that it will not reimburse the subscriptions until it has got "a commitment from the department to fund it."

Under the terms and conditions of service health authorities are obliged to reimburse two thirds of the subscription as an expense to all whole time employed practitioners and to part time employed practitioners who work wholly for the NHS. The BMA's industrial relations officer for south east Thames, Mr Philip Tucker, has told the authority that it is in breach of contract and he has given it 21 days until 29 November to arrange for reimbursement.

In order to claim reimbursement from the employing authority a doctor has to produce proof of payment and certify that the costs

will not be otherwise reimbursed. Reimbursement should be made by health authorities in instalments, the first instalment covering the period 1 January 1988 to 30 June 1988, and the remainder in monthly instalments to the end of the year.

### BMA supports parental leave

The BMA is supporting a private member's bill which would allow parents to take three months' paid leave during the first two years of their child's life.

Nine European Community countries provide some form of parental leave, but Britain and Ireland lag behind. The BMA believes that parental leave provision would make a positive contribution to the overall charge to society of the care and early social education of young children. Although many companies offer paternity leave (the BMA offers its staff three days) the country's largest employer, the NHS, makes no provisions for parental leave. If fathers wish to take leave it must be annual or special leave, which is discretionary and rarely granted. So the BMA is starting negotiations through the Whitley Council machinery for health authorities to offer parental leave to NHS staff.

Mr Harry Cohen, who introduced the bill, hopes to influence the forthcoming Queen's Speech so that it contains better child care and family provision. Mr Cohen believes that parental leave must accompany other advances, such as better maternity provision, paternity leave as a statutory right, leave for family reasons, such as a child's illness, a government boost to workplace nurseries and local authority child care provisions, and improved child benefit to combat child poverty.

### Correction

#### Revised criteria for appointing associate specialists

The first sentence of the last paragraph (5 November, p 1201) should read: "Applicants shall have served for a minimum of four years in the registrar grade, at least two of which shall have been in the appropriate specialty, and for a minimum of 10 years since registration by the General Medical Council (to include limited, temporary, or full registration but not provisional registration)." We apologise for this editorial error.