

ICU Perspective on MBBS Bursary Provision

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Introduction

1. Following the Access Compliance Group Meeting on March 24th where a report regarding Imperial Bursary funding for 5th and 6th year MBBS students was discussed, it was requested that a paper be submitted to Provost's Board alongside this report that outlines the student perspective on the matter. This paper summarises key points for extending financial support for 5th and 6th year MBBS students and will refer to the report submitted to the APCG throughout.

The problems

2. As detailed in the APCG report, the Imperial Bursary is currently only available to MBBS students for 4 years of their study, with the option to spread this equally across 6 years or receive it all in their first 4 by default. This 100% reduction in the Bursary available for two years of study is further compounded by a (comparatively smaller) reduction in total government (maintenance loan and NHS means and non-means tested bursaries) support available. The government-backed reduction in support amounts to approximately 17% in year 5 and 24% in year 6 for a student receiving maximum financial support.
3. As demonstrated in table 2 in the APCG report, a student receiving maximum financial support who has not opted for the 6-year payment plan sees a drop of funding of 42% in year 5 and 46% in year 6 (as compared to years 1-4); respectively, 71% and 63% of this total drop in funding is the shortfall in Imperial Bursary funding. In other words, the vast majority of the drop in funding for students is due to the complete removal of the Imperial Bursary, rather than any reduction in government funding.
4. Figures 1 and 2 show how the effect of the removal of the Bursary for years 5 and 6 is that students fall below the cost-of-living threshold who otherwise would not, putting many students into the risk of financial hardship. This will happen to students in different household income (HHI) bands at different times depending on if they're on the 4-year or 6-year plan, but multiple groups fall below the cost-of-living regardless of what payment plan they're on.
5. The 5th and 6th year of an MBBS course are extremely demanding – with placements and finals, students are stretched academically, physically and emotionally just before they qualify and enter their careers as physicians. The 5th academic 'year' is, in fact, 53 weeks long – suggesting, in fact, proportionally greater support is required. Time for part-time work is limited and undertaking this would risk further detriment to the wellbeing of students, as well as impact to their academics. Furthermore, expense associated with long hours on placement and travel raise the cost of living for these years.
6. In the ICU response to the survey of Imperial Bursary recipients for 2019-20, there was a strong feeling that MBBS students are forced to take on part-time work in their final years which negatively impacts their wellbeing and academic performance. This came through in free text comments, also in quantitative data which showed a higher proportion (49%) of medics undertake part-time work compared to non-medics (42%). Furthermore, a number of students commented on the difficulty the drop of bursary causes and questioned why this was applied to them in their most difficult years.

7. There are plans to extend the 6th year of the MBBS course by approximately a month, with no further maintenance funding available. This puts even further pressure on already stretched finances, and many students are very concerned about their ability to cope.

Reasons to continue bursary through years 5 and 6

8. *Fully fulfilling the mission of the bursary:* the purpose of the Imperial Bursary is to support students in need, reduce the stresses of financial hardship, allow students to thrive at our academically challenging institution, and make the College more appealing to students from disadvantaged backgrounds. The bursary provided overall truly is very generous, but there is a significant gap where some students it is aiming to serve are slipping through the cracks. On the MBBS course, the exact students who need financial support the most are those being let down by the current lack of provision at the most stressful time in their courses. It is necessary to maintain the bursary across years 5 and 6 in order to truthfully meet the aims of the Imperial Bursary.
9. *Parity of experience:* continuing to award the Imperial Bursary to 5th and 6th year MBBS students to the same level as years 1-4 offers the most parity as every student receiving the bursary on every course will receive the same funding per year as others in the same HHI band. MBBS bursary recipients will no longer effectively receive 1/3 less financial support per-year from the College
10. *Equal treatment of different length course:* there is currently an inconsistent approach to handling the bursary for 6-year long MBBS courses compared to 4-year integrated Master's and 3-year Bachelor's programmes. For the former, the bursary is treated as a total award across a course whereas for the latter two, the bursary is treated as a yearly award for every year of study. The fact that bursary levels are set according to one year's living costs, rather than in a lump sum, suggests the latter interpretation is more consistent with the College's aims and practices for most students.
11. *Stopping 'pulling the rug':* there is a perceived financial 'pulling of the rug' out from under students in their final years. The fact that this is possible to anticipate does not do much to mitigate against this effect. It must be emphasised that the withdrawal of support is mainly the result of action taken by the College, not the government. As described in point 3, while the government could and should be doing more to support these students, the College is the key driver of the reduction in support, which leads to student hardship and contradicts the institution's duty of care to students.
12. *Competitive edge:* as noted on page 4 in the APCG paper, three of our key competitor institutions (UCL, Oxford and Cambridge) do maintain the same level of financial support for MBBS students in years 5 and 6 as in year 1-4. In a competitive environment for APP-countable students, and ambitious APP targets, the College may very well be harming itself by failing to adopt a similar approach. As outlined in Appendix B, whilst our bursary is undoubtedly more generous (even across just 4 years) than UCL's, the same is untrue for Oxbridge. Narrowing in on students with HHIs under £16k (39% of total bursary recipients), the total support over 6 years at Imperial is £20k, whereas at Oxford it is £30k (with the Crankstart Scholarship) and £21k at Cambridge. At the next highest HHI band (£16k-£25k, a further 14% of bursary recipients), Imperial's total bursary funding falls to £16k over the 6 years, whereas it remains the same at Oxbridge. In raw numbers, Imperial is falling behind two of its main competitors. This is even more significant in the context of the far lower cost-of-living in Oxford and Cambridge compared to London. Considering this, the oft-touted claim that Imperial offers the most generous bursary package in the country becomes less clear.

Potential alternatives

Following discussions at the APCG, the following alternative options/ways of thinking have been considered. This section outlines counterarguments against alternative options.

13. *Rebalance the current 'pot'*: the notion of a set 'pot' that is rebalanced is inconsistent with, and potentially undermines, the current approach to the bursary for all students. The current model is not one of a set defined 'pot' – it is one that has defined the need of individual students in different circumstances and the total spend fluctuates year-on-year depending on the number and mix of students. Furthermore, specific ideas to 'rebalance' the funding between different students may be less feasible than they first appear. The most palatable options involve redistributing away from non-APP-countable students with higher HHIs – but since these are fewer in number and receive less support in the first place, the pool is quite limited.
14. *Encouraging private loans*: this is an impractical and problematic suggestion. Despite upcoming long-term sustainable employment, borrowing options for 5th and 6th year MBBS students will be limited and any loan would incur significant interest costs. Additionally, any risk of driving students to short-term payday loans would be highly damaging and reflect poorly on the College. It is also morally questionable to encourage the students from the most underprivileged backgrounds at Imperial to take on yet more debt in lieu of sustained financial support from the College, which it freely offers to other students.
15. *Offering additional funding short of extending the bursary*: while this would be a positive step and would go some way in helping alleviate financial issues faced by the students, it would likely not go far enough. Figures 4 and 5 show that, under the proposal of a flat reduction of bursary to just £2,000 for all bursary recipients in their 5th and 6th years, many students would still fall below the cost-of-living line (both on and off the 6-year payment plan) who otherwise wouldn't if the bursary was fully sustained over the final 2 years. It is worth reemphasising here that the bursaries are set in such a way as to provide funding based on yearly student need, so any part-funding is effectively accepting student need isn't being met. The optics around this could well be negative as students could perceive this as the College acknowledging an issue but only going part-way to solving it.
16. *Options geared towards cost-saving*: naturally, the most expensive option is to fully maintain the bursary for 5th and 6th year students. However, it is worth noting that costs to the College would not go totally unrecovered. It is likely that extending the bursary would reduce the burden on financial hardship funds – it is already noted in table 3 that £79k of hardship funding was allocated to 5th and 6th year home students. Additionally, savings in any option of rebalancing the 'pot' (as in point 10) would not be realised for some time due to the inability to reduce funding to any current student.
17. *NHS Bursary vs Imperial Bursary*: one might reason that the NHS bursary replaces the Imperial bursary, and the shortfall in funding is due to the drop in maintenance loan from the government therefore it is down to the government, not Imperial, to fix the problem. Whilst it is true that the government should improve support for all MBBS students through maintenance loans, for Imperial bursary recipients (the matter at hand), the NHS bursary is what replaces the drop in maintenance loan. Government funding, which NHS bursaries certainly fall under, is not the significant driver of reduced funding. The primary driver is instead the total reduction of support from the College, as outlined in point 3.