

# Petition raises hopes for non-EEA students



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Deputy Editor

REPRESENTATIVES from the BMA met with Home Office Minister Liam Byrne and Health Minister Lord Warner at the House of Commons on 27th November to seek medical student exemption from new immigration rules that would effectively prevent existing international students from working in the UK after foundation training.

The international medical student quandary will be familiar to regular *MS* readers. Under the rules introduced in April this year, students from non-European Economic Area (EEA) countries will have to apply for a work permit after their first two years of postgraduate training. Permits will only be granted to non-EEA doctors if suitable EEA candidates cannot be found. This applies to all non-EEA candi-

dates, irrespective of country of training or for UK-trained students, year of graduation, and came into effect a mere three weeks after it was announced.

Bala Karunakaran, Chair of the BMA Medical Students' Committee Conference 2007, and Dr Jo Hilborne, Chair of the BMA's Junior Doctors Committee, presented at this meeting an International Medical Student petition signed by students across the UK, protesting against the new immigration legislation.

The petition, with 2,300 signatories both local and international, reads: "I believe that the government is wrong to apply the new Home Office immigration rules to existing international medical students who are currently studying medicine in the UK, which will prevent them from continuing their postgraduate training in the UK after they have completed their foundation years."

This means that the majori-

ty of undergraduates from non-EEA countries, who came to study medicine in the UK with the belief that they could stay to complete their training, will have to leave. The BMA wants the Government to allow current non-EEA students to complete their training in the UK. Speaking ahead of the meeting with the Ministers, Bala Karunakaran stated in a BMA press release: "Students who chose to study medicine in the UK did so in good faith, expecting to see their training through. Instead, they are facing a real struggle to complete their training. Not only is this situation bad news for current students, it is likely to deter potential students from coming to the UK, which in turn could have serious ramifications for medical education as a whole. The Government must address this deeply unfair decision and allow these students to complete their training."

The BMA is also concerned

that the new rules could have a damaging effect on medical school budgets, as potential non-EEA students are deterred from studying medicine in the UK. Students from these countries pay more than four times the fees of up to £3,000 that UK and EEA students are charged - a whopping average of £13,000 in pre-clinical years and £23,000 in clinical years. Karunakaran, a student at GKT, presented the argument that medical students were recruited to the UK with the implicit promise of the opportunity to gain a British medical training, both at undergraduate and postgraduate specialist levels, and thus the new immigration ruling was thoroughly unfair to them. He highlighted the financial, emotional and social sacrifices incurred by these students and how the UK government are bound by moral obligation to not renege on that initial guarantee of a complete course of training all the way through

to postgraduate level in Britain. Dr Jo Hilborne emphasised that many countries do not recognize UK foundation programmes, placing international medical students at a disadvantage when they return to their countries of origin.

The meeting was also attended by backbench Labour MP for Great Grimsby, Austin Mitchell, who has been calling on the Government to reconsider the immigration rules and to introduce them again only after extensive discussion, modification and a substantial period of transition.

The outcome of the meeting was a promising one. Speaking to *MS* following the meeting, Karunakaran revealed that "Lord Warner conceded that it is unfair that the expectations of international students have not been met." After careful consideration of the arguments put forward, he promised to consult staff in his department on feasible measures to resolve the

issue and very importantly, to write back to the BMA representatives. It is a hugely positive development as this marks the first time Lord Warner has explicitly empathised with the point of view of the international medical students directly affected, a sign that things are moving in the right direction.

The BMA MSC is hoping to go one step further and reignite a public campaign. Medical students are encouraged to contact their local MP to ask them to write to Lord Warner and apply more pressure on the Department of Health. Says Karunakaran, "I hope that we can work in partnership with other organizations such as ULU MedGroup and individual medical student unions in London to promote this campaign. I am also counting on *Medical Student* readers to support this final stage of this campaign the same way they did with the International Medical Student Petition."

## Imperial says yes to NUS



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Guest Writers

IMPERIAL College students have voted 'Yes' in a referendum held by the College's SU over the decision of whether or not to rejoin the National Union of Students (NUS).

The outcome of the referendum was announced on 17th November after strong student campaigning from both 'Yes' and 'No' advocates on campus. Over 4000 votes were cast in what is thought to have been the largest ever voter turnout at the college.

Imperial has not been affiliated with the NUS since 1977, despite being a founding member institution.

The results - while close with 53.26% voting yes and 46.74% voting no - mean that Imperial College Union (ICU) is now affiliated with one of the largest student representation bodies in the world.

The NUS currently comprises 159 higher education and over 500 further education institutions. ICU's affiliation is hoped to be beneficial for students as it brings them access to national representation and other benefits such as the free NUS card, which gives students access to discounts at a range of outlets.

In September this year the NUS launched the NUS Extra card, which for £10 gives hold-

ers access to a wider range of discounts and incorporates the International Student Identity Card, making it valid in many other countries.

Shiv Chopra, student union president at Imperial College School of Medicine, spoke to *MS* about what he views as a positive decision by the student body.

"From my experience with the NUS so far, they have supported me and my executive with cases against College and have provided a lot of advice which they were perfectly entitled not to give.

"The NUS has links with the

BMA within their governance structure, which will allow our medical students to voice their opinions on issues such as fees, MTAS and course structure. The London medical schools, - especially Imperial - have had issues with the BMA in the past and this additional tie will hopefully improve our relationship and strengthen our voice."

In July this year, Imperial College's Council decided to break the college away from the University of London, a change expected to come into effect next summer. The affiliation to the NUS is hoped to be valuable in maintaining student rep-

resentation at Imperial after the college becomes independent.

"I strongly believe that Imperial needs to be part of a support network. It cannot afford to stand alone after we leave the University of London Union (ULU)," added Chopra.

The NUS, for its part, has welcomed its latest addition warmly. NUS president Gemma Tumelty said the organisation was "thrilled that Imperial students have voted to join the NUS...we are confident that NUS membership will be a great boon to Imperial."



Shiv Chopra

Is the grass greener on the other side? Imperial leaves ULU and rejoins the NUS

## NHS cuts



Ferras Alwan  
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THE education of medical students is being threatened by government funding cuts choking the NHS, says the British Medical Association.

NHS Strategic Health Authorities (SHAs) are scrambling for cash after a government announcement earlier this year which said that debts of over £52.5m would not be allowed to be carried into the next financial year. As a result, some SHAs are using money allocated for training and education purposes to shore up their accounts - and academic posts in medical schools are among the victims.

The effects are already being felt in some UK medical schools. Rumours abound that Leicester's medical school could lose up to 20% of its funding for academic posts as their local SHA, East Midlands, attempts to claw back £52m. To put this into context, it would mean twelve members of staff being made redundant.

Similar cuts could soon be made in London, where all but one of the capital's five SHAs is in debt. North West London, the local for Imperial, is worst hit with debts of over £106m reported earlier this year - the biggest debt in the country. This included a £33m debt at Hammersmith Hospitals NHS Trust, the main teaching trust

for Imperial students; whilst two other trusts which take ICSM students, North West London Hospitals NHS Trust and Kensington and Chelsea Primary Care Trust, are both £25 million in the red. GKT students could also bear the brunt of funding cuts soon, with South East London Strategic Health Authority £40m in debt. The only Strategic Health Authority not in debt is North East London, which oversees the hospitals where Barts and the London students train.

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Some SHAs are using money allocated for education to shore up their accounts.”

Professor Michael Rees, chair of the BMA's Medical Academic Staff Committee, warned it could have serious consequences for medical students.

"The effect on medical education is potentially catastrophic. Medical schools are already very short of clinical teaching staff, and cutting these posts would worsen the situation. There could be an impact on patients, because these staff spend a lot of their time working in NHS hospitals."