GIVE US YOUR RICH!

This report has demonstrated, we hope convincingly, that, unless significant changes are made, careers in medicine may not be affordable or attractive within the next few decades, and that applicants from lower socioeconomic groups may choose not to pursue careers in medicine because of their concerns about educational costs.*

Experts claim that the delivery of health care is best achieved when the mix of the medical workforce mirrors that of the society it serves.

However, this balance is under threat in the United Kingdom and the United States, where the cost and duration of medical education are increasingly forming a barrier for students from lower socioeconomic backgrounds. In the US, 60 per cent of medical students come from families in the top income bracket; becoming an MD is apparently beyond the reach of most middle and working class families. And no wonder! A US medical education costs about US$120 000 in public medical schools and US$225 000 in private schools.

With Australia’s recent move towards full-fee-paying medical students, we may well wonder whether we are set to mimic the American way.

In Australian medical schools, fees range from A$31 000 to A$36 000 per year for 5–6-year undergraduate programs and from A$25 000 to A$35 520 per year for 4-year graduate-entry programs. Shackled with these debts, full-fee-paying students, like their US counterparts, are more likely to train in high-income specialties.

America’s Statue of Liberty proudly proclaims the message, “give us your poor”. Paradoxically, the message of US medical schools might now be “give us your rich”.

The American experience is a cautionary tale. Are our current policies an experiment in social engineering, guaranteeing the loss of Australia’s cherished egalitarianism and tradition of the “fair go”?