



A crash course in debt

UNISON National Survey of Health Students

2007

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1. Introduction

- 1.1 UNISON is the largest trade union representing members in the National Health Service and across the health sector. With 450,000 health service members, UNISON has a long history of representing the interests of students across the spectrum of health specialisms.
- 1.2 As the largest trade union and the voice of the healthcare team, we are instrumental in influencing policy at a regional, national and international level. We work with government and other international unions to shape health policy. In addition, we work collaboratively with other trade unions on issues vital to health students.

2. Summary of main survey points

- An overwhelming 92% of respondents believe that health students should be seconded on a salary. This figure has remained unaltered since UNISON began its annual student surveys, reflecting the consistent strength of feeling among students on the issue.
- Approximately 44% of students have considered leaving their course due to financial difficulties. Only 29% of students on secondment indicated that financial pressures forced them to consider leaving their course, as opposed to 52% not on secondment.
- Among the two-thirds of students who are financed through their course by a bursary, the proportion forced to supplement their income by taking on extra paid employment to their standard 37.5 hour course jumped from 61% in 2006 to 71% in 2007. By the time students reach their third year, 78% are relying on this additional income.
- Among those working additional hours, 8% work between one and four extra hours a week, 28% work between 5 and 10 hours, 23% between 11 and 15 hours, 28% between 16 and 20 hours and 10% in excess of 21 hours. As courses progress, students are working more hours on top of their studies with each successive year. The proportion of students working at the top end of the hours scale continues to rise year on year - 27% worked in excess of 16 hours in 2005, 34% in 2006 and 38% in 2007

- For the second year in a row, the proportion of students who believe that time consumed by additional paid employment detrimentally affects their studies has been on the rise, reaching 66% in 2007.
- Around 87% of students are in debt and the average debt faced by students has escalated by 26% over the last year to stand at £7,012. Approximately 30% have debts under £2,000, 18% have debts between £2,000 and £5,000, 17% between £5,000 and £10,000, 9% between £10,000 and £15,000, 4% between £15,000 and £20,000, 5% between £20,000 and £25,000 and 4% in excess of £25,000.
- The proportion of students with debts in excess of £10,000 has accelerated at a momentous rate from 6% in 2003 to 13% in 2005, 14% in 2006 and now 22% in 2007. In the space of just a year, the proportion of students reporting debts of more than £20,000 has almost doubled and for the first time in these surveys, students were reporting debts of over £25,000.
- The proportion of students who were doubtful or very doubtful about their chances of obtaining a job at the end of their training declined from 49% in 2006 to 41% in 2007.
- The proportion of students who joined their courses from outside the NHS fell from 42% in 2006 to 29% in 2007 and the proportion joining from school or college fell from 26% to 10%.
- Among the 31% of students seconded to their course, the proportion receiving 80% rather than full funding has risen dramatically from 5% in 2005 to 23% in 2007.

3. Survey background

- 3.1 A questionnaire containing 28 questions was distributed directly to a sample of UNISON's health student members and indirectly through UNISON's branch network and websites targeted at health students, eliciting 659 responses. The questionnaire attempted to build on previous UNISON student nursing surveys conducted in 2003, 2005 and 2006 to identify trends and sought views from across the health student spectrum to cover nurses, midwives, occupational therapists, operating department practitioners, paramedics and social workers.

4. Composition of respondents

- 4.1 Among the 659 responses to the survey, 86% indicated that they had membership of UNISON, 12% that they had membership of other unions and 2% were not union members.
- 4.2 A substantial majority of respondents (65%) were female.
- 4.3 The age profile of respondents indicated that 2% were between 18 and 20 years old, 10% between 21 and 24, 24% between 25 and 34, 41% between 35 and 44, 23% between 45 and 65.
- 4.4 Approximately 81% of respondents described their ethnic group as White UK, 8% described themselves as Black UK, Black African, Black Caribbean or Black Other, 2% as Indian, Pakistani, Bangladeshi, Asian UK or Asian Other, 5% as White Other and 2% as Irish. The precise ethnic breakdown is shown in the table below.

White	Black Caribbean	Black African	Black other
81%	1%	6%	<1%
Black UK	Pakistani	Bangladeshi	Chinese
1%	<1%	<1%	<1%
Indian	Asian UK	Asian other	Irish
<1%	1%	<1%	2%
White other	Not Stated		
5%	2%		

- 4.5 The living arrangements of respondents indicated that 45% owned their home, 34% lived with their partner, 11% lived with their parents and 21% rented privately (on an average monthly rent of £378). A further 5% stayed in Halls of Residence (on an average monthly rent of £285).

5. Course study characteristics

- 5.1 Around 15% of respondents were in the first year of their studies, 29% were in the second year, 32% were in their third year and 21% had recently qualified.
- 5.2 The survey found that 59% of respondents were undertaking a nursing diploma programme, 20% were undertaking a degree programme, 9% were taking a course in occupational therapy, 2% in midwifery, 1% in training as an operating department practitioner and 1% as a social worker.

- 5.3 Students from Black ethnic groups were much more likely to be taking a nursing diploma than a nursing degree when compared to average results, with 75% on the nursing diploma and just 14% taking the degree.
- 5.4 Among those undertaking a nursing course, 59% of respondents were within the adult branch of nursing, 28% in mental health, 5% in nursing for children, 5% in learning disabilities and 2% in midwifery. The mental health and learning disability results cause continued concern at the depleting number of students entering these fields. More women were concentrated in the adult branch of nursing than men (64% as opposed to 45%) and, conversely, men were more heavily concentrated in the mental health sector (48% as opposed to 21%). The age profile of staff in mental health nursing was significantly higher than in adult and child nursing.

6. Pre-course employment

- 6.1 In excess of half of all students (55%) indicated that they had worked as a health care assistant, nursing assistant, support worker, nursing auxiliary, cadet nurse, OT assistant or other NHS role immediately prior to taking up their course. A further 29% had worked outside the NHS, 10% of respondents had come straight from school or college and 2% had been in receipt of benefits. These figures reflect the importance of student training in offering career development to existing NHS staff. However, the marked fall in the numbers of students coming from outside the NHS and straight from school or college, which stood at 42% and 26% respectively in the survey conducted last year, may reflect a worrying decline in the ability of bursary funded courses to attract new talent into the NHS.
- 6.2 Among those students who were not working in the NHS immediately before starting their course, 23% had worked in the NHS at some point previously.

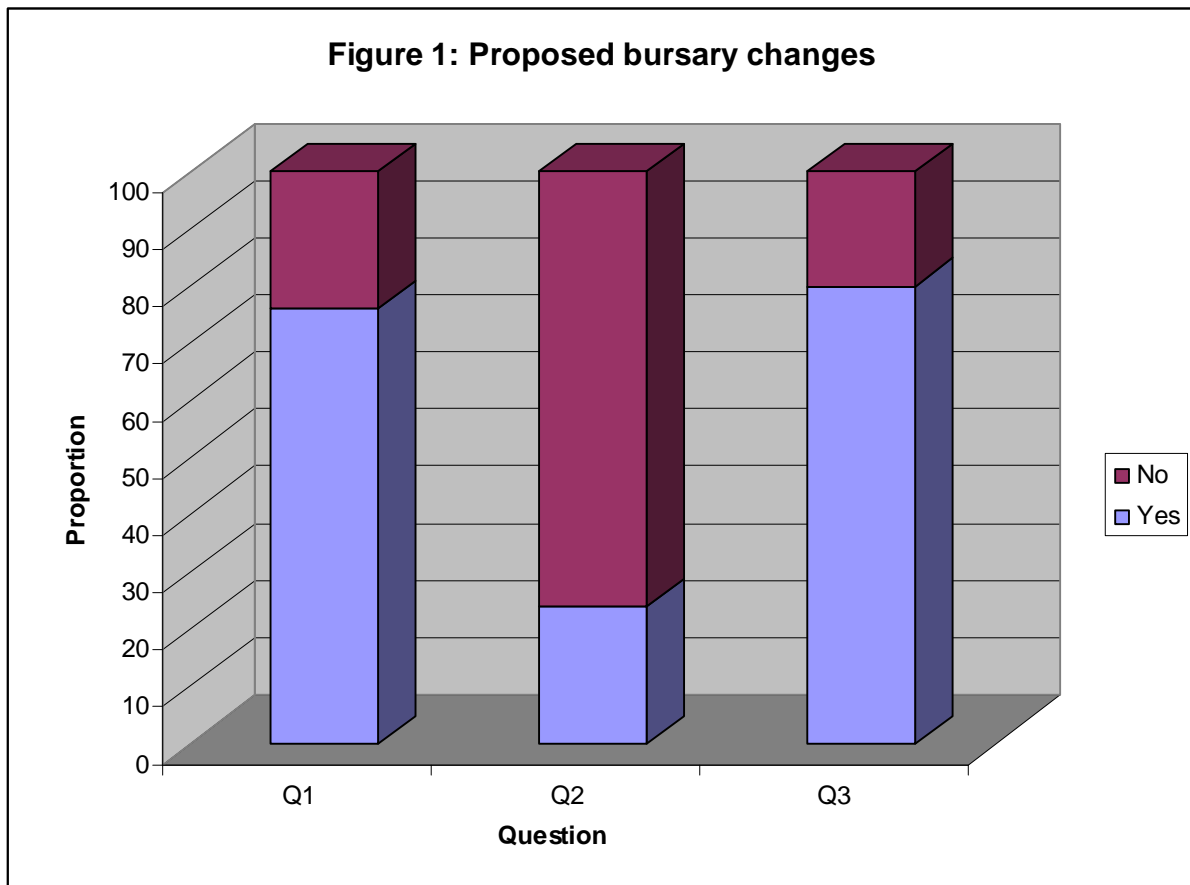
7. Seconded students

- 7.1 The proportion of students reporting that they had been seconded by their employer to their course stood at 31%.
- 7.2 Nursing diploma students (38%) had greater success in securing secondments than degree students (21%).
- 7.3 Older employees were much more likely to be seconded, as demonstrated by the statistic that 8% of students aged 21 to 24 were seconded as opposed to 41% of students aged between 45 and 65.

- 7.4 While 33% of White UK students and 36% of Asian students secured secondments, just 21% of Black students were represented.
- 7.5 Among those on secondment, 71% were on full salary, but the proportion receiving 80% funding rose has risen dramatically from 5% in 2005 to 23% in 2007. The introduction of 80% funding by a minority of Workforce Development Confederations (WDCs) is a worrying practice. The Department of Health makes money available to WDCs to facilitate secondments, however, some WDCs choose to fund secondments fully while others require the host trust to contribute 20%. UNISON believes that partial funding undermines the good practice of supporting professional development and we wish to see an end to this post code lottery of sponsorship.
- 7.6 The proportion of students who applied for a secondment but were refused rose sharply from 5% in 2006 to 14% in 2007.

8. Bursary students

- 8.1 The survey found that 66% of students receive a bursary. The likelihood of students receiving a bursary declines with age, just as the likelihood of a student receiving financial support through a secondment rises with age. Reflecting the diminished chances of Black students securing a secondment, 73% are in receipt of a bursary.
- 8.2 Over the length of their course, 20% of students indicated that their bursary had been altered at some point, usually due to a change in personal circumstances.
- 8.3 The survey found that 39% of respondents had been injured or off sick while on placement.
- 8.4 A number of questions that had not been covered in previous UNISON surveys were asked to uncover students' views about potential changes to the NHS bursary scheme (see figure 1). Approximately 76% of students who expressed a preference believed that the child-care allowance should be available for payment of non-registered child minders while 24% thought payments should remain confined to registered minders. Approximately 26% of students who stated a position indicated that they are currently unable to access the allowance due to inability to find a registered child minder. In the case of students aged between 35 and 44, this figure rises to 31% and for BME students inability to access the allowance reaches 44%. Among those who expressed a preference, 80% supported payment of a fixed amount per person for non-registered childminders.



Q1: Should child care allowance be available for payment of non-registered childminders?

Q2: Are you currently unable to access this allowance to find a registered childminder?

Q3: Would you support payment of a fixed amount per person for non-registered childminders?

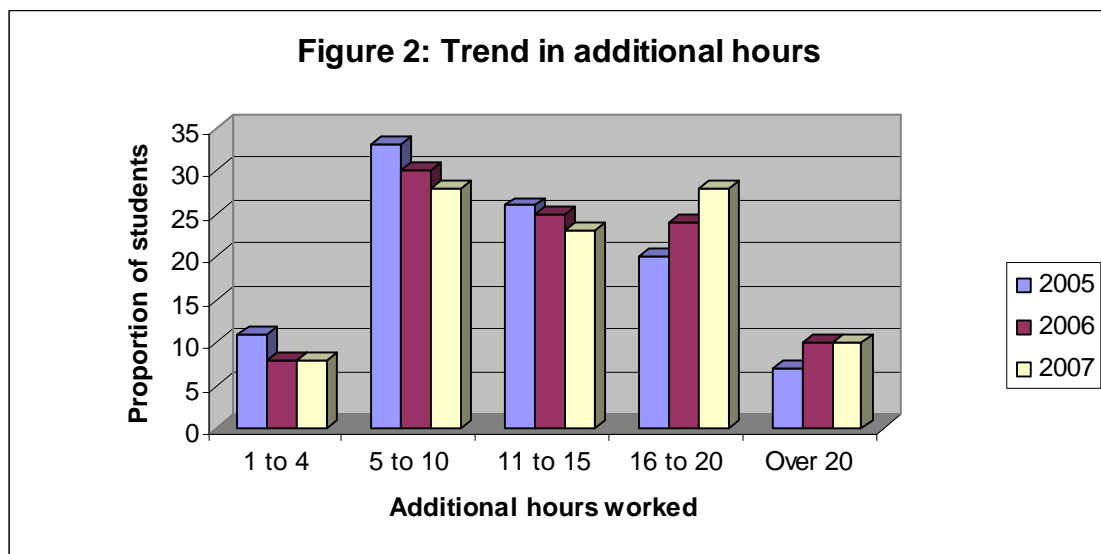
9. Working additional hours to supplement income

9.1 The survey found that the proportion of students on a bursary who supplement their income by taking on extra paid employment to their standard 37.5 hour course week jumped from 61% in 2006 to 71% in 2007. By the time students reach their third year, 78% are relying on this additional income. Black and Minority Ethnic (BME) students rely on additional employment in 78% of cases.

9.2 Of those who supplement their income, 65% do so through taking on healthcare assistant work, 8% through bar/club work and 5% through office work. Reliance on the healthcare assistant role is even greater among BME students, with 72% engaged in this type of work.

9.3 Among those working additional hours, 8% work between one and four extra hours a week, 28% work between 5 and 10 hours, 23% between 11 and 15 hours, 28% between 16 and 20 hours and 10% in excess of 21 hours (see figure 2 below). As courses progress, students are working more hours on top of their studies with each successive year.

- 9.4 The proportion of students working at the top end of the hours scale continues to rise year on year - 27% worked in excess of 26 hours in 2005, 34% in 2006 and 38% in 2007 (see figure 2 below). BME students are also disproportionately represented at the top end of the hours scale. For instance, 44% of BME students work between 16 and 20 hours and 18% in excess of 21 hours.
- 9.5 For the second year in a row, the proportion of students who believe that time consumed by additional paid employment detrimentally affects their studies has been on the rise, reaching 66% in 2007. Nursing degree students in particular feel the consequences, with 77% reporting a negative impact.

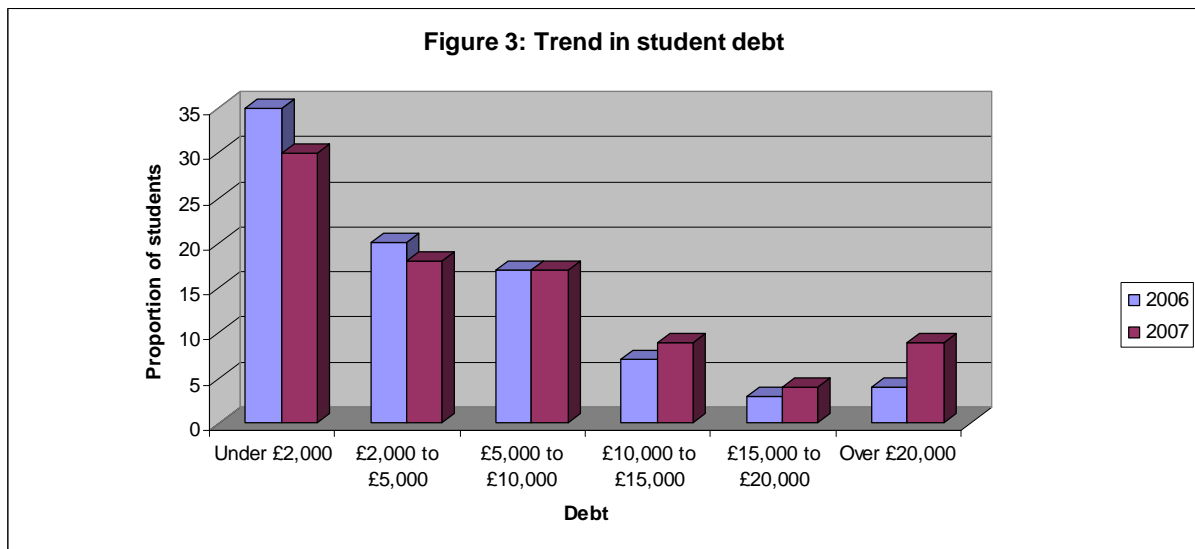


10. Debts incurred by students

- 10.1 Around 87% of students are in debt and the average debt faced by students has escalated by 26% over the last year to stand at £7,012. Approximately 30% have debts under £2,000, 18% have debts between £2,000 and £5,000, 17% between £5,000 and £10,000, 9% between £10,000 and £15,000, 4% between £15,000 and £20,000, 5% between £20,000 and £25,000 and 4% in excess of £20,000 (see figure 3 below).
- 10.2 Students are sinking further into debt with each successive year of their course, rising from £5,949 in year one to £8,090 on qualification. Average debt would be even greater if it weren't for the fact that 11% of students live with their parents – debt for these students stands at £4,412, while those who own their home average £7,700. Average debt for BME students is £9,410.
- 10.3 Debts also rise steadily across age groups from £2,625 for students aged between 18 and 20 to £7,451 between the ages of 35 and 44 as financial

responsibilities for children and housing tend to climb, before peaking at £7,701 for students aged between 45 and 65.

- 10.4 The proportion of students with debts in excess of £10,000 has accelerated at a momentous rate from 6% in 2003 to 13% in 2005, 14% in 2006 and now 22% in 2007. In the space of just a year, the proportion of students reporting debts of more than £20,000 has almost doubled and for the first time in these surveys, students were reporting debts of over £25,000.
- 10.5 Approximately 14% of students receive financial support from their parents and 29% receive financial support from other sources. Unsurprisingly, those on secondment are far less likely to receive parental support (5%) than those without a secondment (18%).



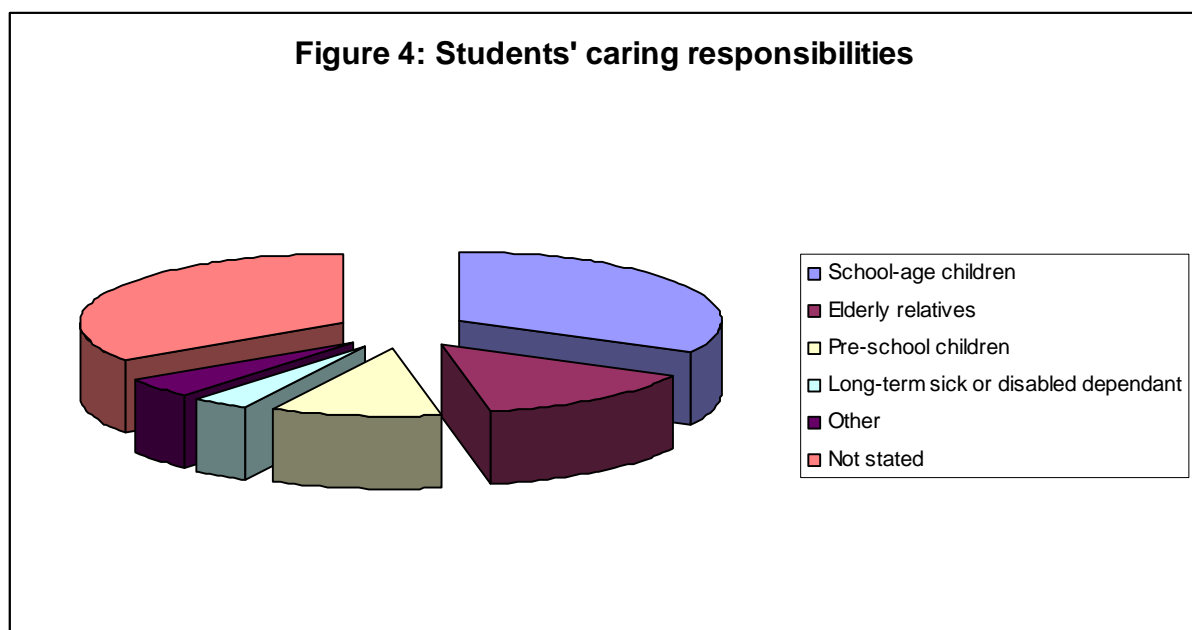
11. Impact of financial hardship

- 11.1 Around 44% of respondents indicated that they have considered leaving their course because of financial hardship.
- 11.2 Students in their second and third years were under particular financial stress, with 58% and 44% considering leaving. Students aged between 35 and 44, also reported a greater tendency than any other age groups to consider leaving.
- 11.3 The financial pressures on students from Black ethnic groups is apparent in that 59% report considering leaving.
- 11.4 Only 29% of students on secondment indicated that financial pressures forced them to consider leaving their course, as opposed to 52% not on secondment.

- 11.5 It is against this background of debt and extra hours that 92% of health students believe that students should be paid a salary.
- 11.6 The precarious nature of the situation faced by so many students, whereby a small change to circumstances can tip the balance and turn a manageable situation into a crisis, is evident in the cases referred to UNISON's Welfare Department. For example, a student nurse who bought a house with his sister to escape the damp in a previous property that was bad for his wife's arthritis was plunged into debt when his sister withdrew from the arrangement. Left to support four children on the bursary, UNISON Welfare was able to help with a grant of £660 for food and essentials. In another case, a student nurse found that his income of £129.15 a week was exceeded by his outgoings of £133.46 a week. Now needing to purchase a replacement for his worn out laptop to complete his written assignment, UNISON Welfare was able to make a grant of £120 towards living expenses to ease his situation and to suggest other nursing charities that could provide further help.

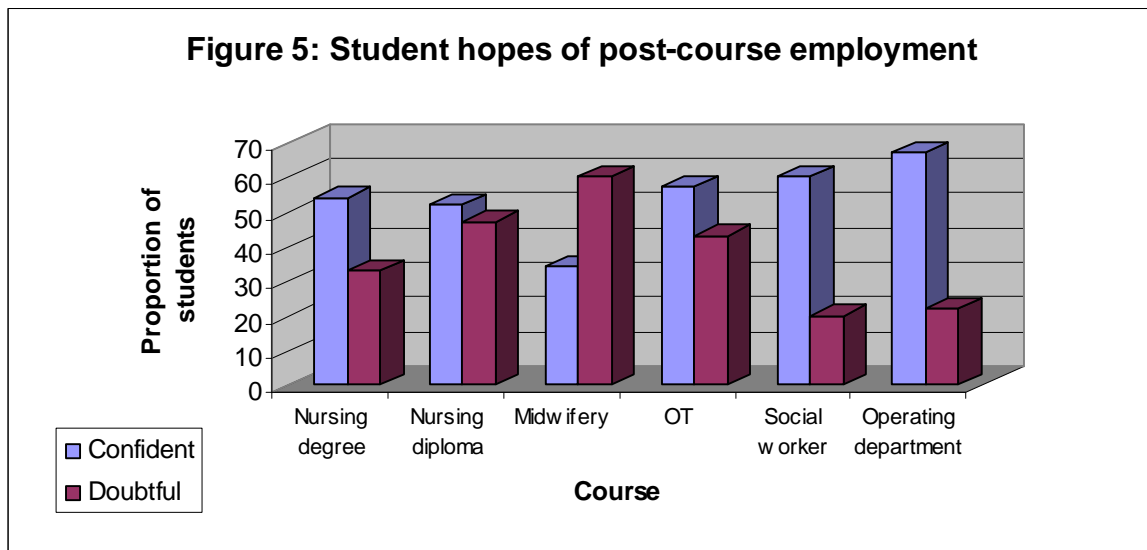
12. Leaving for non-financial reasons

- 12.1 The importance of non-financial factors in forcing students to consider leaving their course grew 6% over the last year to 34% in 2007.
- 12.2 The necessity to care for dependants can contribute to such decisions and the survey found that over a third of respondents (37%) had responsibility for school age children, with a further 12% supporting pre-school children, 12% elderly relatives and 4% long term sick or disabled dependants (see figure 4 below). Just over 60% of students have some form of dependant relying on them and among BME students that figure rises to 83%.



13. Job chances

- 13.1 The proportion of students who were doubtful or very doubtful about their chances of obtaining a job at the end of their training declined from 49% in 2006 to 41% in 2007.
- 13.2 First year students are more optimistic about their chances than later years, with those confident or very confident declining from 67% in year one to 56% by year three and nursing diploma students are markedly more pessimistic than degree students (47% doubtful or very doubtful compared to 33%).
- 13.3 Midwifery students are the most pessimistic of all, with 60% doubtful or very doubtful that they will find work, whereas most other non-nursing students are more confident of employment.



14. Quality of the health programme

- 14.1 Almost two-thirds (62%) of students rated their course as good or very good, 30% as adequate and 7% as bad or very bad.
- 14.2 The non-nursing courses generally gained greater levels of approval than the nursing.

15. Conclusions

- 15.1 The dominant picture that emerges from the 2007 UNISON survey of health students is the relentless deterioration in the financial position of students in

terms of the debt that they are incurring in taking their courses and the hours that they are working on top of their training hours to try to deal with the financial stresses of surviving on bursary funding.

- 15.2 The bursary system is clearly taking a toll of students, who are suffering all the anxiety of dealing with inadequate funding while often juggling many hours of extra work with trying to successfully complete their studies. Students are fully aware that additional work has a detrimental effect on their studies, but bursary funding is leaving them with no choice.
- 15.3 There are a number of groups for whom the pressure is particularly acute under the bursary system. Mature learners with childcare responsibilities, struggling to balance their home and work life, are among the groups with the greatest levels of debt. BME students tend to work longer additional hours and incur greater debts than any other ethnic group, while also finding themselves less likely to secure secondment.
- 15.4 Bursary funding has a consequence for the NHS in terms of the drop-out rate among health students, the resources wasted in training students who do not complete their course (a nurse costs around £11,500 a year to train) and failure to realise the potential of staff enthusiastic to develop their skills. In the field of nursing, this can be seen to have a particularly serious potential impact given the government decision to take band 5 and 6 nurses off the shortage list, cutting the supply of nurses from overseas. In addition, the ageing make-up of the NMC register means that 30% of nurses are due to retire within the next 10 years. Therefore, unless the nettle is grasped by offering all students training via secondments, it is possible to see that the inadequacy of the bursary system will grow ever more acute in dealing with the staffing crisis facing the profession.
- 15.5 The survey indicates that these problems may be compounded by a reduced ability to recruit high calibre staff as the results suggest declining enthusiasm to join courses by both school/college leavers and non-NHS workers.
- 15.6 Health students themselves are virtually unanimous in seeing the solution to the problems exposed by this survey in a return to salary status and employment rights. The validity of this position is self evident in the finding that bursary students were twice as likely to consider leaving their course for financial reasons as seconded students. It is further backed up by the available facts on attrition rates – for instance, the attrition rate among healthcare assistants seconded onto nurse training is less than 2%, while attrition rates for bursary students stands at around 16 to 20%.
- 15.7 In 2007/8, the non-means tested basic bursary for nursing, midwifery and operating department practitioner diploma courses stood at £7,194 in London and £6,122 elsewhere, while the means-tested bursary for degree students was £2,976 in London and £2,422 elsewhere. Therefore, diploma students outside of London are receiving £3.14 an hour and degree students £1.24 an

hour – both groups are well below the minimum wage. If students received a salary at the same grade as payments were made before secondments were phased out as the standard method of funding training in 1993, students could expect to be receiving £14,186 a year. This huge gap exposes the extent to which money has been withdrawn from students, who are now expected to work through years of training on such a paucity of resources.

- 15.8 The improvement in the financial position of the NHS is perhaps reflected in the slight improvement in confidence among students about their chances of obtaining a job at the end of their training. Nonetheless, the high level of doubt that remains can only have a negative effect on student attrition rates and the number willing to give up their salaries to spend three years surviving on a bursary for their long-term ambitions.
- 15.9 In the findings of the 2005 Fletcher, Parkes & Wilkinson case at an Employment Appeal Tribunal, Judge Cox ruled in favour of three student midwives, stating that “they worked in the same environment as qualified midwives, working the same hours and shifts, undertaking the same duties and being exposed to the same risks”. UNISON firmly believes that the same situation applies to all health students, as they are different from other students and should be treated accordingly. It is now essential to review the bursary system and give a clear commitment to these nurses, midwives, occupational therapists, operating department practitioners, social workers and paramedics of tomorrow.

Appendix 1

List of questions the respondents were asked

1. Are you a member of any of the following? (UNISON, RCN, RCM, BAOT, Amicus/T&G, Non-member)
2. Which year of your course are you in?
3. What course are you undertaking?
4. Before you started this course were you in? (Paid NHS employment (as a health care assistant, nursing assistant, support worker, nursing auxiliary, cadet nurse or OT assistant), Other paid NHS employment, Paid employment – other, Student/School/College, Receiving benefits, Other)
5. Were you seconded by your employer onto your course?
6. For those seconded, what is your current arrangement? (Full salary, 80% funded, Resigned and have no sponsorship)
7. For those who were not seconded, did you apply for secondment?
8. If you were not working in the NHS immediately before you started this course, have you ever worked in the NHS?
9. For those undertaking a nursing course, which branch are you involved in?
10. Have you considered leaving your course for financial reasons?
11. Have you considered leaving your course for non-financial reasons
12. Do you receive a bursary?
13. Do you supplement your bursary through extra paid employment?
14. If Yes to Q14, what type of work do you do?
15. If Yes to Q14, how many extra hours do you work?
16. If Yes to Q14, do the extra hours you work detrimentally affect your studies?
17. Do you think that health students should be paid a salary?
18. By how much (excluding mortgage) are you in debt?
19. Do you receive any other financial support?
20. Do you have caring responsibilities?

21. Do you? (Live with parents, Own my own home, Stay in halls of residence (if so, how much is your rent?), rent privately (if so, how much is your rent), Live with partner)
22. Have any of the following altered your bursary?
23. Have you ever been injured or off sick while on placement?
24. How would you rate the quality of your course?
25. How confident do you feel that you will have a job at the end of your training?
26. What is your gender?
27. What is your age?
28. What is your ethnic group?
29. Should the child care allowance be available for payment of non-registered child minders?
30. Are you currently unable to access this allowance due to inability to find a registered child minder?
31. If the child care allowance was available for payment of non-registered child minders, would you support payment of a fixed amount per person?