

Military dangles big bonuses in bid to attract debt-weary med students

Canada's military recruiters are hoping that newly introduced signing bonuses for medical students that are worth up to \$180 000 will help solve their chronic physician-recruiting problems.

Canadian Forces Health Services, which is currently unable to fill 55 of its 151 openings for junior medical officers, hopes the bonuses will help it cash in on increasing student concern about their



Canadian Forces

Dr. Jim Kile: "At least we're competing."

debt load (*CMAJ* 2003;169[5]:457-8). Students who sign on must wear a uniform for 4 years after completing their residency in family medicine (www.forces.ca/physician/).

Lieutenant-Colonel Jim Kile, the physician in charge of medical recruiting, says the new bonuses top out at \$180 000 for students who are less than 12 months from graduation. Students entering first year are eligible for \$40 000; the remaining bonuses are \$75 000 (second year), \$110 000 (third year) and \$150 000 (entering fourth year). The students also receive salaries.

A 2-year-old program already offers licensed physicians a \$225 000 signing bonus in return for 4 years' service, along with a starting salary of \$102 000. It has attracted 5 FPs in the past year.

Although recruiting and retention of MDs are chronic problems in the Canadian Forces, the situation today is especially difficult because of a booming civilian market for family physicians. Kile says the signing bonuses and recent pay raises for military doctors "at least put us in the same ballpark" as other employers. "The competition can be tough," he says, "but at least we're competing."

This year, only 25% of physicians who reached the end of their 4-year service commitment agreed to sign on for further duty, compared with 40% in 2002.

Kile says he delivers a straightfor-

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ward message when he meets with medical students. Because many of them are facing "mortgage-sized" debt loads, he says, "we're saying, 'why not come and work for us for 4 years, and come out at the other end with no debt?'"

Kile took the military subsidization route while attending the University of Toronto, and has no regrets. "I was more comfortable with owing a debt of time than a debt of money," he says.

Doctors who sign up can expect a lot of travel, because even though a growing number of civilian doctors are being employed on military bases across Canada, only doctors in uniform are allowed to go on overseas missions. The 1900 Canadian troops currently stationed in Afghanistan are accompanied by about 70 medical staff, including 3 medical officers, a surgeon and an anesthetist.

Kile says a third-year medical student has already signed up for the student bonus program, and he's attending as many resident and student days as he can to spread the word.

"At the moment," he says, "I'll take any upward swing." — *Patrick Sullivan, CMAJ*

Medical students to mount campaign against tuition increases

The Canadian Federation of Medical Students (CFMS) says the impact rising tuition fees are having on accessibility to medical education is the best argument for challenging fee deregulation.

The federation argues that deregulation in provinces such as Ontario has led to major fee increases, and its September meeting in Kingston, Ont., was dominated by discussion of fee-related issues, such as debt load and accessibility.

But tackling the issue has been difficult because tuition fees are different at each medical school and student loan limits vary by province (*CMAJ* 2003;169[5]:457-8), said the federation's outgoing vice-

president of medical education. "It's really tough for us to be 100% involved logistically at each site," said Dr. Ben Hoyt.

Student representatives from medical schools across the country confirmed that there are huge discrepancies not only in tuition fees but also in the availability of student loans and bursaries. For instance, medical students attending the University of Toronto pay an annual fee of \$16 207, while their counterparts at the Université de Montréal pay only \$2224.

The CFMS has decided to tackle the issue at the federal level, working with federal politicians to develop a national access strategy instead of leaving the de-

terminations up to provincial governments.

Delegates endorsed a plan to coordinate a campaign over the coming year. Key steps include the appointment of a CFMS coordinator to deal with the access issue and plans for a national lobby day on Parliament Hill. In addition, the CFMS wants to develop a database for each province and to try and gather data to support its contention that as tuition fees rise, so do the minimum incomes of the families of medical students.

In a parallel initiative, the CFMS created a new executive committee position for minorities and under-represented groups. — *Pat Rich, CMAJ*