Submission in Response to the Australian Universities Accord Panel Discussion Paper

My name is Gedalya Lederman, and I am a currently studying postgraduate Dentistry at Sydney University. The submission I would like to make is in regard to the HECS-HELP system, and more specifically to the lifetime limit on FEE-HELP loans that exists. This issue pertains to a number of questions raised in the discussion paper that I would like to address here. As background to this issue I would like to present my personal experience that has led me to feel so passionately about this issue and ultimately led me here submitting this response to the panel. Whilst I may not have access to Australian statistics and the resources for research, this is the best I can do with the situation and I have given much thought, time and personal research in this issue, and I have provided as much information as I can.

Growing up in Australia, I felt an immense sense of pride in our education system, one that puts students first with a fantastic HECS program, allowing hundreds of thousands of students to achieve the dream of tertiary education, something that is not a given in other countries around the world. That being said, I do believe there are inherent flaws in the HECS-HELP system that require fixing. For the most part, between HECS or HELP loans, the vast majority of students are covered throughout their education and they don’t have to think about taking out student loans, or looking to family or other finance options to get through university. These students go through university, graduate with their respective degrees and once they enter the workforce only then do they begin to make repayments toward their student debt. There is a limit that exists on these HECS-HELP loans ($113,028 in 2023) but for the vast majority of students, this does not affect them as most undergraduate degrees do not reach these limits due to the large quantity of CSP positions that are given out in undergraduate courses as well as the nature of the fees of most undergraduate courses, which are typically not as expensive as postgraduate courses.

The same cannot be said about postgraduate courses.

Postgraduate students in specialised and critical fields like Medicine and Dentistry are particularly affected by the current lifetime limit on HECS-HELP loans. The 2023 lifetime limit for such students is $162,336, which is far below the cost of postgraduate studies. This is the personal situation that I currently find myself in. As a full fee-paying student, I have reached the HELP limit after only half of my course, and I am now struggling to fund the remainder of my education. The cost of my four-year dentistry course amounts to approximately $280,000, leaving me about $120,000 out of pocket. This is an incredibly difficult obstacle to overcome as a full time student.

It's unfair and inconsistent that students in dentistry or medicine have a limit on the loans they can access, while undergraduates in any other profession such as accounting, teaching, music or computer science, have their entire tuition covered by HECS-HELP, surely by the nature of the way this system is established.

I am not alone in this issue. I have spoken to many of my peers in my cohort at university about this and the experience was similar amongst students. Beyond university, I wrote about this on dental forums online, one in particular on Facebook which is a community of approximately 20,000 dentists and specialists around Australia. I asked about peoples thoughts and experiences with this issue and how people dealt with the tremendous fees, how people thought it could change and just generally what the consensus was on this issue. I had a lot of support from this so I decided to make a petition to get as many signatures as possible, with the objectives of removing or increasing these lifetime limits. I sent this petition out to my university as well as to other dental universities around Australia, and at the time of writing there are 275 signatures on this. This of course is representative of the postgraduate dental community however this issue is not only representative of this degree but for all postgraduate degrees, including medicine, PHD students, research students and many other important education pillars that make up a vital part of Australia’s future.

Below is an excerpt of this petition as I believe it explains this situation quite clearly.

“Postgraduate students in specialised and critical fields like medicine and dentistry are particularly affected by the current lifetime limit on HECS-HELP loans. The 2023 lifetime limit for such students is $162,336, which is far below the cost of postgraduate studies, which for Dentistry for example, can amount to a total of $280,000 over 4 years. As a result, many students in these fields have to rely on their families for financial support as there are limited scholarships and bursaries available, and bank loans are almost impossible to obtain for full-time students with no solid income or security.

It's unfair and inconsistent that students in dentistry or medicine have a limit on the loans they can access, while undergraduates in any other profession such as accounting, teaching, music or computer science, have their entire tuition covered by HECS-HELP.

These lifetime limits on HELP loans were implemented to encourage informed decision-making and limit student debt. However, this system disproportionately affects motivated and high-achieving students in fields such as dentistry and medicine. These students have already demonstrated exceptional academic ability and commitment to their chosen profession, yet they are burdened with significant financial barriers. Ultimately, these students will contribute positively to society, giving back to the Australian community, and not to mention they will eventually become high tax payers.

In addition, the number of Commonwealth Supported Places (CSP), in which the government sponsors approximately 85% of the course fees, are limited. At Sydney University, for instance, there are only around 10-20 CSP positions per year, leaving roughly 100 students paying full fees. This situation perpetuates a demographic imbalance in these professions, favouring those who have the financial means to pursue postgraduate studies and limiting access for those without family financial support.

So, to become a dentist or doctor in Australia it basically comes down to either; tick all the boxes to get into a limited CSP position, or have the means to pay the difference for a full-fee position. This is obviously discriminatory and means that there are significantly less dentists from lower socioeconomic backgrounds, which impacts public health, and furthers a class divide in society.

We urge you to take action and abolish or increase the lifetime limit for postgraduate students studying in critical fields such as medicine and dentistry. By doing so, you will ensure that all students, regardless of their financial background, have the opportunity to pursue their dreams and contribute to our society.”

(<https://www.change.org/p/abolish-or-increase-the-lifetime-limit-for-fee-help-loans?recruiter=969535376&recruited_by_id=9377c790-8c25-11e9-99e4-9de1b4a40e71&utm_source=share_petition&utm_medium=copylink&utm_campaign=petition_dashboard>)

The discussion paper mentioned the Bradley Review recommendation that “by 2020, 20% of undergraduate level enrolments should be people from low SES backgrounds”. What better way to begin addressing this issue than by ensuring that the future of these important fields are represented with students from low SES backgrounds and not those who purely have the means to pay for their tuition. Becoming an effective, evidence based, altruistic, empathetic healthcare professional should have nothing to do with your SES status.

I believe that this issue covers many of the questions raised in the discussion paper, a few of which I would like to specifically address:

* “Q11 How should Australia boost **demand** from people to study in the higher education system?”
* “Q15 What changes are needed to grow a culture of **lifelong learning** in Australia?”
* “Q16 What **practical barriers** are inhibiting lifelong learning, and how can they be fixed?”

When we think of lifelong learning, this is exactly where postgraduate studies play a part. Students go through the tertiary education ladder, from undergraduate, to postgraduate, to continued professional development (CPD) courses - many of which are required to upkeep registration as a healthcare professional in Australia. In order to boost demand, there needs to be the correct infrastructure to support these students. Otherwise the demographic just gets filtered out to allow the students with the means to afford study to chase that path. With these limits in place, students are unable to achieve lifelong learning. Perhaps a dentist has graduated and has been working for a year or two and now wants to go back to university to specialise, however they have reached the limit on their HECS-HELP loans and they cannot afford the tuition. That is a serious practical barrier inhibiting lifelong learning. Again, let’s compare the student who just graduated high school and wants a government loan to go and study, and this high achieving dental student who wants to go back to university for another 3 years full time to study. The high school student has no barriers, other than meeting the eligibility requirements to get into university and receive HECS, the budding dentist however has reached the limit and cannot go further at this stage. This may seem like a superficial comparison, however from the governments perspective, looking to build the future, this seems like a serious barrier to lifelong learning in Australia.

* “Q28 What is needed to increase the number of people from **under-represented groups** applying to and prepared for higher education, both from school and from other pathways?”
* “Q30 How can governments, institutions and employers assist students, **widen opportunities and remove barriers** to higher education?”

This issue of the HELP lifetime limits is predominant amongst under represented groups. These groups are already facing other barriers such as financial, language, geographic and sometimes physical disabilities that act as barriers. Ironically, I believe, that to build a strong Australian future, these are the groups that we need in the Australian healthcare workforce, as these groups provide diversity and they understand what it means to be on the receiving end of healthcare. For these groups, these limits on HELP loans are another incredibly difficult barrier to overcome if they desire to gain a higher education degree specifically in the postgraduate field.

* “Q48 What principles should underpin the setting of student contributions and **Higher Education Loan Program** arrangements?”

According to the discussion paper, “HELP removes the upfront financial barrier that would otherwise exist for entry and opens the doors to higher education for many Australians.” Based on the above, I would have to disagree with this statement.

Yes, it ‘opens the door’ for **many** Australians to enter higher education in **undergraduate** courses. However, it falls short of removing the ‘upfront financial barrier’ for **many** Australians who want to enter into **postgraduate** studies in important fields such as dentistry and medicine.

To generalise and group these categories together is a mistake in my opinion and leads to false conclusions. So whilst the HELP system is a fantastic one that is an integral part of Australian society, it needs to be fixed before the future of Australian healthcare and lifelong learning is affected.