and children have to say about working mothers?

Don't look for the answers in this survey. The interviews were conducted with women only and the questions asked of them were cursory indeed.

That being said as it must, for a great opportunity has been lost, the survey has none the less compiled a fair amount of useful information. If there is still any prejudice against married women working, it is not held greatly by women themselves. Nearly one half of the married women surveyed were working; nearly one third were responsible for children of school age or younger, and even single women tended to have substantial domestic responsibilities. The birth of the first child, rather than marriage, now seems to be the main factor responsible for a woman's withdrawal from the labour force, but, once out, she tends to want to go back again.

To a surprising extent, working women did not have to pay someone to look after their children. Their husbands deputized a great deal (25·1 per cent of the under-twos whose mothers went out to work were cared for by their fathers) and their grandmothers helped even more. Nursery schools and day-care centres were not relied on very heavily. But they will clearly be needed in the future, as the next generation of grandmothers, accustomed to be at work, are less likely than the present house-bound generation to want to look after their daughters' children.

This survey consistently underestimates the pulling power of money. It emphasizes that although money was the biggest single attraction for getting married women out to work, the desire for company and relief from boredom were also powerful motives. It furthermore observes that non-working women believe that good companions, plus convenience to home, are what makes a job pleasant for a woman. The way to attract these women back to work, the survey concludes, is to meet these conditions. Yet with no mention of male earnings, the survey reports that women's pay on the average in 1965 was 5s. an hour and that only one in ninety earned as much as 10s. an hour. Surely the way to get women out of the home and into the labour force (when the present unemployment crisis subsides) is to offer them a healthy, rather than a derisory, reward for their efforts.

Keele against Todd

The University of Keele is breathing defiance against the report of the Royal Commission on Medical Education under Lord Todd. The report, published last month, says that Keele is unlikely to become a suitable site for a new medical school, of which some four will need to be established in Britain over the next two decades. The university, whose plans to build a medical school date back to 1963, has studied the report and now declares that it "will continue its all-out efforts to promote the establishment of a medical school at Keele at the earliest possible moment".

According to the Todd Report, a university which wishes to build a medical school must support flourishing faculties of biological sciences and have hospitals

and a large population in its catchment area. The university should have at least 4,000 students in order to accommodate a minimum annual intake of 150 to 200 students at its medical school. Keele, it seems, does not fulfil these requirements, nor is it likely to. Its student population, 1,700 at present, will reach 2,000 in 1970. Although strong on social sciences, the university does not possess faculties of physiology or biochemistry. The Todd commission suggests that Keele is "not on present plans likely" to be able to support a medical school that would be "economically and educationally effective". Only if its size and biological faculties increase should a school be built there.

Having studied these comments on its aspirations, Keele is now determined to set up the necessary ancillary faculties as well. The case for building a medical school at Keele rests on the presence of two large hospitals in the area, as well as an available site for development; furthermore, everybody at Keele is agreed that Keele is a suitable site. The fear is that the medical school may go to the University of Hull, about whose potentialities the Todd Report commented more favourably.

Comparing A-Levels

THE way in which A-level examinations in England and Wales are set by a number of independent examining boards has often been a source of criticism. Anxious to iron out any differences in standards between the various GCE examining boards, the boards themselves have been trying since 1953 to pin down just what these differences might be. Various schemes of cross-marking have been tried, with examiners from one board marking the papers from another, but these rather subjective analyses highlighted only the most glaring differences. A deeper investigation is now under way into the comparability of A-level examinations, and results are expected in the autumn. The nine boards taking part cover Northern Ireland as well as England and Wales, but Scotland is not included because the Scots have no A-level examination as such. The idea is to give a series of tests to a number of candidates under each board, and to compare the results with the results of the normal A-level examinations set independently by the boards. 6,250 children from 389 schools were originally lined up for the tests, but final numbers will be slightly less because of last minute withdrawals and absences. After two years planning, the comparability tests will be taken this week, and results will be compared with the A-level papers to be taken next month.

The comparative tests consist of two papers on a common-core syllabus, one being a multiple choice paper and the other a conventional essay paper consisting of three compulsory questions. A third paper on similar lines to that used by the vice-chancellors' investigation (see *Nature*, 218, 410; 1968) will test aptitude. In addition, candidates will be asked to give some background details of previous examination results, interests and ideas for their careers. The results cannot be expected until the autumn, because the essay papers will be marked by A-level examiners who must first finish marking the A-level papers.

The examining boards concerned are contributing a total of £16,000 for the investigation, with the practical

work being done by the test development and research office of the school examination department of the University of London. Similar investigations in different subjects are obviously desirable, but will only be instigated if this first operation is considered to be a success.

No Joy for Doctors

The view that seems to be shared by the British medical and dental professions—that better pay would be a panacea—is strongly but tactfully contested in the latest report of the Review Body on Doctors' and Dentists' Remuneration (HMSO, 6s. 3d.), published on May 7. This is the ninth report to appear since the review body was set up in March 1962 to act as mediator—and to some extent pacifier—between the professions and the Government.

It is in fact surprising that the professions have asked for more, because the seventh report of the review body, published only two years ago, recommended substantial increases, particularly for general medical practitioners, but also for hospital doctors at all levels. The value of distinction awards for consultants was also increased by approximately 8 per cent, and new net incomes were recommended for dentists. Although the Government decided for reasons of incomes policy to phase the implementation of the review body's recommendations on general medical practitioners, the other recommendations were accepted.

The doctors' representatives have proposed an increase of about 8 per cent for the period from April 1, 1968, to April 1, 1970. They suggest that this is necessary to take account of the rise in the cost of living since the seventh report came out, to reward increased responsibility and workload, and to recognize the manpower situation. They also point out that certain fees or allowances should be brought up to date.

The views of the health departments rarely agree with those of the professions, but the review body has done its best to hold the balance between the two. It therefore suggests that if general practitioners could be encouraged to have practices in relatively unpopular areas by increasing the present allowance by about £100 a year, this would probably be justified under the "manpower" criterion of the current incomes policy. It also considers that an increase in the allowance of £175 for pre-entry vocational training might be justified if this acted as an inducement. It proposes that the age limit for general medical practitioners should be increased to 72, provided that the health departments and the profession's representatives can work out a satisfactory method of establishing the continued ability of the individual. The review body does not agree with the profession's feeling that the fee for a night visit between midnight and 7 a.m. should be increased from the present value of £1 to £2 5s. and it dismisses the idea of introducing a new fee for night consultation at a doctor's surgery. As far as temporary arrangements for carrying on a practice are concerned, -for example, following the death or retirement of a general practitioner—the review body feels that this is something that should be worked out by the health departments and representatives of the medical profession, and should not simply be compensated for by financial reward.

The report recommends that from April 1, 1968, a

new scale for medical assistants and assistant dental surgeons beginning at £1,950 and rising by 14 annual increments to £3,525 should come into being. This represents an increase of 5.5-8.5 per cent over previous rates. It also recommends that the weekly or sessional rates for locums in these grades should be raised to £52 13s. a week or £4 16s. a "notional" half day to correspond with the new scale. Another positive recommendation is that the number, but not the value, of distinction awards for consultants should be increased from a total of 3,370 to 3,580. The review body agrees with the health departments that lectures to groups of hospital doctors and dentists should attract a fee (£5), but only when the lecture is outside the lecturer's own hospital group and in cases where the lecture has to be prepared substantially at home. Small increases in expense allowances for general practitioners are also proposed.

Although the recommendations in this rather negative report will probably disappoint many doctors, they are at least assured that the review body will "not hesitate to recommend an immediate general increase in remuneration" if at any time it considers this to be justified. One thing that is made clear, though, is that the medical and dental professions cannot expect preferential treatment, "and cannot escape the realities of the economic situation or the application of incomes policy".

Preparing for the Eclipse

Not only astronomers but also ophthalmologists are planning for the eclipse of the Sun on September 22. Although the eclipse will only be partial over Britain, it will undoubtedly be watched by many people, and the Ministry of Health is worried about possible damage to the eyes. Ophthalmologists say that solar eclipses are notorious for the damage they cause, and some time ago the Ministry of Health asked the Institute of Ophthalmology to suggest the best way of looking at the forthcoming event. Professor R. A. Weale at the institute has tackled the problem by estimating by how much the radiant energy from the Sun needs to be reduced to make it safely visible. He came to the conclusion that a filter of density 4.5, which passes one part in 30,000 of the incident energy, would be suitable. Presumably the Ministry of Health will make an announcement along these lines nearer the date of the eclipse; it will certainly want to discourage people from using potentially dangerous methods of looking at the Sun, such as imperfectly smoked glass or pinholes.

None of the phenomena associated with a total eclipse will be visible from Britain on September 22. Russian astronomers are more fortunate, however, in that the path of the total eclipse will pass across the USSR, east of the Ural Mountains, and preparations for the event are under way (Nature, 216, 950: 1967). The Russians seem to have been particularly enterprising during the total eclipse of February 1961, which passed over the Crimea. On that occasion Soviet scientists, using cloud seeding techniques, were able to disperse a continuous cloud cover at designated places so that the eclipse could be observed. They will presumably be prepared to do this again if weather conditions are unfavourable. British astronomers, on the other hand, will have to wait 30 years for the next