

Letter to Editor

Dear Editor,

The recent Guest Editorial on the need to re-think about the revised guidelines of the Medical Council of India (MCI) for academic promotions raises some interesting issues (1). In this Editorial, the authors have, very rightly, suggested some changes to the latest amendments issued by the MCI pertaining to promotion criteria for medical teachers (2, 3). These suggestions appear reasonable and will surely be supported by the medical education fraternity.

However there exists a more fundamental question that I wish to highlight – *Are the MCI guidelines on appointment and promotions sufficiently broad-based?* The guidelines specify only two criteria – length of teaching experience and number of research publications. Regarding the first criterion nothing has been said about how its quality should be assessed.

My main point is about the second criterion. In the original guidelines of 1998 the requirement of research publications was a 'desirable' attribute. After the several subsequent amendments it is not very clear whether this attribute remains a 'desirable' or is now mandatory (2, 3). Quite apart from this ambiguity, are we not barking up the wrong tree by focusing on research publications as the only adequate measure of academic scholarship in a medical teacher? Should not many other activities that involve academic scholarship also receive consideration?

The qualities that are required for excellence as a teacher are quite different from those needed by an effective researcher. To my mind a good teacher should possess the qualities given below (in no particular order):

1. Adequate academic knowledge.
2. Desire to improve himself or herself.

3. Appropriate attitude towards students.
4. Ability to decide what to teach and what not to teach.
5. Enthusiastic in making the subject interesting and relevant.
6. Ability to frame relevant learner objectives and to effectively assess if students have achieved them.
7. Ability to obtain student feedback and respond to it.

These attributes are similar to those identified by experts in this field (4, 5).

On the other hand the following qualities would make an effective researcher:

1. Detailed knowledge about the research topic.
2. Ability to question and raise doubts.
3. Ability to pick out a researchable scientific question.
4. Ability to design a research project.
5. Ability to write effective research-grant applications.
6. Be able to establish a lab if required.
7. Be able to use instrumentation effectively.
8. Be able to collect data honestly and scientifically.
9. Ability to analyze data
10. Ability to write journal articles based on the research.

Since all qualities that define a good medical teacher, with the exception of academic knowledge, are different from the qualities of a good medical researcher it does not make sense to make research publications the only important criterion for promotion of medical teachers. It is very likely that some medical teachers would possess many of the qualities from both lists. However, to use research abilities as the only marker for academic scholarship is both unfair and unscientific. Unfair because it needlessly pressures teachers into sometimes meaningless research while penalizing gifted teachers who may not have a research publications. This approach is unscientific because research activity is not a valid measure of teaching qualities. The consequences of this are only too well-known and the plethora of predatory journals is proof enough (6).

Medical teachers have widely varying roles. Those in basic sciences, para-clinical disciplines and clinical

subjects have completely different scopes of activities. It is therefore suggested that the criterion for promotions and appointments of medical teachers needs a major overhaul. Assessments should address three major different areas: didactic teaching component, a clinical teaching component, and a purely investigative (research) component. The weightage to these three areas could be based on the primary role of the medical teacher. This would make the promotions criteria more broad-based and equitable. Academic scholarship in all areas should receive their due.

Is it not appropriate to also reward teachers who effectively nurture learning in their students? Research activity and publications should be considered as the icing on the cake and not be mistaken for the cake itself. This requires a change in mind-set amongst us all. A beginning can and should be made. The MCI will, no doubt, eventually respond to changes in the opinions of the medical education fraternity.

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