

**REPORT OF THE RULES COMMITTEE ON  
THE REPRESENTATION OF CURRENTLY UNREPRESENTED GROUPS  
ON THE UNIVERSITY OF MICHIGAN SENATE ASSEMBLY**

April 14, 1999

In the Fall of 1998, SACUA asked the Rules Committee to examine the possibility of representing Clinical Faculty on Senate Assembly. Subsequently, this was extended to include Lecturers and Instructors. In order to do this we have obtained data on the number of individuals who would be involved, their distribution among the schools and colleges, and how the composition of Senate Assembly might be affected. This report presents the results of this study, together with some recommendations.

### **Groups to be Considered**

The groups who are currently represented on Senate Assembly are:

- Assistant Professor, Associate Professor, Professor
- Assistant Research Scientist, Associate Research Scientist, Senior Associate Research Scientist, Research Scientist, Senior Research Scientist
- Associate Librarian, Senior Associate Librarian, Librarian
- Curator, Curator of Slides and Photographs

For at least the last few apportionments, only individuals with at least a 50% total university appointment have been counted. In the case of Research Scientists, current Senate Assembly rules only count those with 100% appointments. For this study we have retained the requirement of at least 50% total university appointment, but have considered the following groups in addition:

- Clinical Instructor II, Assistant Clinical Professor II, Associate Clinical Professor II, Clinical Professor II
- All Research Scientists listed above with total appointments of at least 50% but less than 100%
- Instructors
- Lecturers

Note that the Clinical Professor I track is by definition for appointments of less than 50%, so is excluded from this study. Since we are considering adding groups with less than 100% appointment, we also included Research Scientists in this category.

### **Source of Data**

We obtained the raw information from Human Resource Records and Information Services, at the same time that they provided the data for the 1999 Senate Assembly reapportionment. It was a snapshot as of January 1, 1999, one file for each of the four groups. Because of the way the University keeps the data, the same individual can have more than one record in the database. It was therefore necessary to remove duplicate records. In doing this, we eliminated anyone who was already in the list with a regular professorial appointment, even if the professorial appointment was smaller than that in one of the other groups. This was done also in the reapportionment, so that the number of professorial appointments may not be a true representation of primary job classification, but it does not affect eligibility for representation. (This was done because it is much easier to identify the individual's unit for professorial appointments.) The university database keeps track of an

*Representation of Currently Unrepresented Groups on Senate Assembly*

Unit	Number of Senate Members	Clinical Professors II	Clinical Instructors II	Research Scientists	Lecturers	Instructors	Unrepresented TOTAL	All TOTAL
Arch & Urban Planning	37	1			3		4	41
Art	29				8		8	37
Business Administration	114				19		19	133
Dentistry	77	20		1	12		33	110
Education	57			1	1	5	7	64
Engineering	388			24	20		44	432
Information	133				2		2	135
Kinesiology	18	2			5	2	9	27
Law	45	18					18	63
LS&A	838			12	232	2	246	1084
Medicine	752	229	131	17	114		491	1243
Music	112	8			16		24	136
Natural Resources & Env	41			2			2	43
Nursing	49			3	35		38	87
Pharmacy	36	18	4	1	1		24	60
Public Health	107			3	3		6	113
Public Policy	4				2		2	6
Social Work	45	1			1		2	47
UM Dearborn	222				37		37	259
UM Flint	172				33	1	34	206
<b>TOTAL</b>	<b>3276</b>	<b>297</b>	<b>135</b>	<b>64</b>	<b>544</b>	<b>10</b>	<b>1050</b>	<b>4326</b>

**Table 1: Distribution of represented (Senate members) and unrepresented groups by unit. Research scientists listed have less than 100% appointments; those with 100% appointment are already Senate members**

individual's unit as used for statistical purposes (i.e. as though the person had the total appointment in that unit), and the unit in which a particular appointment fraction resides. The former does not always indicate which unit to assign to, because it includes entities like centers, office of the president, etc. which do not have direct representation on Senate Assembly. However, in most cases, the combination of these two units allows determination of the appropriate unit in which to assign the individual. In a handful of cases, assignment was made on a best guess basis after looking them up in the university telephone directory.

## Results

Table 1 shows the distribution of unrepresented groups by unit, as well as the distribution of Senate members among the units that was used for the 1999-2002 reapportionment. Included in the Clinical Professors column are Clinical Assistant Professors II (232), Clinical Associate Professors II (51), and Clinical Professors II (14). The Research Scientist column includes those only with at least 50% but less than 100% appointments: Assistant Research Scientist (31), Associate Research Scientist (8), Senior Associate Research Scientist (5), Research Scientist (12), and Senior Research Scientist (8). The Lecturers column also includes Lecturer I, II and III LSA. Finally Instructors are split into two columns, Clinical Instructors II and all others, since the former dominate the numbers.

The average total university appointments of these groups is shown in Table 2 together with the minimum and maximum appointments. As the numbers imply, most appointments are at or close to 100%. (Research Scientists with 100% appointments, by far the majority, are already represented, so the average is much lower for the listed group.) Of the lecturers, 28 out of 544 had appointments above 100%, with the average of these being 118%.

Position	Average Total Appointment	Minimum Total Appointment	Maximum Total Appointment
Clinical Track II (including Instructors)	95.8%	50%	100%
Research Scientists (< 100% only)	68.4%	50%	97%
Instructors (excluding clinical)	95.6%	53%	108%
Lecturers	92.9%	50%	175%

**Table 2: Summary of appointment fractions of the unrepresented groups.**

The figures from Table 1 have been used in two ways to compile Table 3 and Table 4. Both use the "All TOTAL" column figures to do an apportionment of Senate Assembly in the same way as the official apportionment for 1999-2002. Table 3 is the result of maintaining the total number of assembly seats at 73. Table 4 was compiled to see what the effect would be to increase the size of the assembly approximately proportionally to the additional number of individuals who would be represented, giving a total of 96 seats. Table 5, the actual apportionment of Senate Assembly for 1999-2002, is included for comparison.

## Discussion

The unrepresented groups make up a body which is close to a third of the current apportionment count. The figures show that the only unrepresented groups that would really make much difference to the Senate Assembly membership are the Clinical II track of Medicine, and Lecturers in LS&A and Medicine, which comprise about 70% of the total. Including all the rest would make only minor changes at most. If the membership of Senate Assembly is maintained at 73 as now, it would add one or two members to Medicine, and correspondingly, LS&A and Engineering will each lose about one member. Specifically, for the results of Table 3, assembly membership in Engineering changes from 7 to 6, Medicine changes from 14 to 17, LS&A changes from 16 to 15 and Information changes from 3 to 2. Other units do not change.

*Representation of Currently Unrepresented Groups on Senate Assembly*

<b>Unit</b>	<b>Members</b>	<b>Apportionment</b>
Architecture & Urban Planning	41	2
Art	37	2
Business Administration	133	2
Dentistry	110	2
Education	64	2
Engineering	432	6
Information	135	2
Kinesiology	27	1
Law	63	2
LS&A	1084	15
Medicine	1243	17
Music	136	2
Natural Resources & Env	43	2
Nursing	87	2
Pharmacy	60	2
Public Health	113	2
Public Policy	6	1
Social Work	47	2
UM Dearborn	259	4
UM Flint	206	3

**Table 3: Senate Assembly apportionment by Hill's Method with the added groups, keeping the size of the Assembly unchanged. There are 72 apportioned members plus 1 member for Kinesiology. Membership is 1 for less than 20 Senate Members, otherwise it is at least 2.**

One could consider increasing the size of Senate Assembly. (This would require changes in the Regents Bylaws.) As an example, we considered increasing the number of members about proportionately to the increase in people who would be represented. This gives a size of about 96, which is the figure we used for the results of Table 4. Using the same apportionment algorithm we redid the calculation. Engineering changes from 7 to 9, Medicine from 14 to 25, LS&A from 16 to 22, Business from 2 to 3, Music from 2 to 3, Dearborn from 4 to 5 and Flint from 3 to 4, with no changes in other units.

One way of considering the impact of the additional representation is in terms of what it would take to have a majority in a Senate Assembly vote. Currently, Medicine and LS&A combined are 7 members short of a majority. When the size of assembly remains at 73 but with the changes of Table 3, they would be 5 members short of a majority, and with the changes of Table 4, they would be only 2 members short. While these units may not get together in this way, given that Senate Assembly often barely gets a quorum at meetings, both of these units could play a more dominant role

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Nursing	87	2
Pharmacy	60	2
Public Health	113	2
Public Policy	6	1
Social Work	47	2
UM Dearborn	259	5
UM Flint	206	4

**Table 4: Senate Assembly apportionment by Hill's Method with the added groups when Assembly is increased in size proportionately to the added number of Senate members. There are 95 apportioned members plus 1 member for Kinesiology. Membership is 1 for less than 20 Senate Members, otherwise it is at least 2.**

if changes are made along any of these lines. The main problems arise because of the large disparity in numbers between the largest and smallest units, and because most of the unrepresented individuals belong to the two units which already are the largest. The trend appears to be the growth of the lecturer and Clinical Professor II tracks relative to the tenured tracks, mainly in Medicine and LS&A, and these two units may reduce the other units to inconsequence within a few years. Medicine, in particular is poised to increase the clinical appointments fast enough to swamp all the other units.

Throughout this study, we have counted individuals who have at least 50% appointments equally. Another approach would be to count individuals with less than 100% appointments with a lower weight, half for example. This is currently done with research scientists who have zero weight if they have less than 100% appointments. However, Table 2 and the data from which it is derived show that most appointments of unrepresented groups are 100%, so the resulting figures would not change dramatically from those given in this report.

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<b>Unit</b>	<b>Members</b>	<b>Apportionment</b>
Architecture & Urban Planning	37	2
Art	29	2
Business Administration	114	2
Dentistry	77	2
Education	57	2
Engineering	388	7
Information	133	3
Kinesiology	18	1
Law	45	2
LS&A	838	16
Medicine	752	14
Music	112	2
Natural Resources & Env	41	2
Nursing	49	2
Pharmacy	36	2
Public Health	107	2
Public Policy	4	1
Social Work	45	2
UM Dearborn	222	4
UM Flint	172	3

**Table 5: The actual 1999-2002 Senate Assembly apportionment by Hill's Method. There are 72 apportioned members plus 1 member for Kinesiology. Membership is 1 for less than 20 Senate Members, otherwise it is at least 2.**

## **Recommendations**

Given the implications suggested by this study, if it turns out that Senate Assembly has a strong desire to provide representation to Clinical Faculty and/or other groups, there would be less disruption by not increasing the size of Senate Assembly, but just allowing for a larger electorate. It would also be necessary for the units concerned to change their bylaws to extend the franchise to the groups who would be represented. Finally, none of these changes can be made without some changes to the Regents Bylaws.

We also recommend a longitudinal study of the appointment trends and their projected consequences before any major changes are enacted.

We therefore suggest that the findings of this report should be brought up for discussion in Senate Assembly so that it may be seen if there is a sentiment to grant representation to all or some of the

groups discussed here, and to either adopt something close to the procedures discussed, or suggest alternative ways of reaching this goal.

Rules Committee:

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