

## Letter from Mumbai

### DEEMED UNIVERSITIES

The University Grants Commission Act, 1956 was modified by the addition of Section 3, entitled 'UGC (Establishment of and maintenance of standards in private universities) regulations 2003'.

In a note (No.F. 6-1(11)/2006(CPP-I)) dated December 2007, Mr K. P. Singh specified:

'Section 3 of the UGC Act, 1956 provides as under:

'The Central Government may, on the advice of the Commission, declare by notification in the Official Gazette, that any institution for higher education, other than a University, shall be deemed to be a University for the purposes of this Act, and on such a declaration being made, all the provisions of this Act shall apply to such institution as if it were a University within the meaning of clause (f) of the Section 2.

'This provision has been made in the Act to bring under the purview of the University Grants Commission institutions which, for historical reasons or for any other circumstances, are not universities and yet are doing work of a high standard in specialized academic field comparable to a university and that granting of the status of a university would enable them to further contribute to the cause of higher education which would enrich the institution and the university system.'

The stated objectives of deemed universities under the Act were enumerated:

### '3. OBJECTIVES OF DEEMED UNIVERSITY

'The objectives for which Deemed University is established shall be:

- 3.1 to provide for higher education leading to excellence in such branches of learning as it may deem fit at the Master's or higher degree levels;
- 3.2 to provide for quality research and for the advancement and dissemination of knowledge;
- 3.3 to undertake programmes significantly contributing to the development of society;
- 3.4 to offer employment-oriented and inter-disciplinary courses at the postgraduate level to meet regional and national aspirations and development needs of the country;
- 3.5 to provide for an innovative and flexible system of university level education in order to promote learning and encourage excellence in new fields of knowledge;
- 3.6 to enhance equitable access to quality higher education to all segments of society;
- 3.7 to undertake all such other acts and things as may be necessary for the advancement of knowledge.'

The Hindu *noted on 3 March 2005:*

'In the first 10 years after the enactment of the UGC Act, eight institutions were notified as deemed universities. In the Seventies, the UGC decided that notification under Section 3 should be made only rarely in special cases and three institutions were conferred the deemed university status. There was a slight shift in the policy in the Eighties and 18 more institutions were added under Section 3.

'Between 1956 and 1990, in 35 years, only 29 institutions were granted the deemed university status. In the last 15 years, 63 institutions were declared deemed universities and particularly in the last 5 years, 36 institutions excluding RECs have been notified as deemed universities. It may be argued that the increase in the number of deemed universities is commensurate with the increase in the number of institutions of higher learning in the country. But it should not be at the cost of quality.'

Discussions with educationists in Maharashtra on the deemed universities dealing with medical education in the state yielded shocking information. None of these universities can be accused of promoting learning, 'doing work of a high standard in specialized academic field comparable to a university' or providing for quality research. They have certainly provided innovative systems of education by temporarily moving large numbers of teachers from one institution to another to meet the requirement of inspectors from the Medical Council of India. These teachers are moved back as soon as the inspectors have returned to Delhi.

As regards advancement and dissemination of knowledge, since many of them employ superannuated teachers from public sector teaching hospitals as their heads of departments and administrators and as some of them lack the requisite numbers of teachers and hospital facilities, we can only marvel as to how they manage to provide instruction of the kind necessary for the training of competent doctors. Add to this the fact that most of them are created and run by powerful politicians who charge huge capitation fees from the majority of students on their rolls and you have the makings of for-profit institutions that rank quality low in their list of priorities. Instead of enabling 'them to further contribute to the cause of higher education which would enrich the institution and the university system', granting of the status of a university has only enriched the promoters of these institutions. Far from providing 'equitable access to quality higher education to all segments of society' they have catered to the offspring of the rich and famous, to the exclusion of most of those of meagre means.

Attempts at finding details on the process of selection of institutions for this exalted status, individuals playing key roles in such selection and the means used by the UGC to monitor fulfilment of the goals laid down by it have failed. There is little transparency in the dealings of the UGC with reference to the deemed universities.

*On 25 January 2010, The Indian Express noted:*

'Overruling concerns of state governments or by simply ignoring their views, the University Grants Commission (UGC) granted deemed-to-be-university status to at least 11 of 44 institutes now blacklisted by the government.

'According to the latest audit scrutiny report of UGC records, another four institutes were granted the status despite not meeting minimum eligibility criteria—and against recommendations of committees of experts asked to assess fitness of the institutes—while another four who got it did not even maintain the required corpus fund. Still another five institutes were accorded the status though the required movable and immovable assets were not legally vested with them at that time.

'While the UGC claims that it is the 44 institutes which are in the dock and not the Commission, audit findings of UGC records,

accessed by *The Indian Express*, show there were “various instances of violation of established guidelines and specific recommendations of Expert Committees and state governments for the purpose of declaring an institution as a ‘deemed to be university’ between 2004–05 and 2008–09”.

The present reassessment of deemed universities shown to be substandard will be followed with considerable attention. Many wonder whether this will be an eyewash with a few sacrificial goats to ensure *status quo ante* for the others. It also remains to be seen whether the persons responsible for the grant of the status of deemed universities will be brought before public scrutiny and what steps are taken to penalize them.

#### MAKING ‘GOOD’ ‘BETTER’

Unlike what obtains in the USA, UK and other developed countries, most medical journals in India remain the products of voluntary, unpaid effort. Several are subsidized by large associations such as the Indian Medical Association or Association of Physicians of India. Others are brought out by organizations such as the Indian Council of Medical Research. Earmarked funds for such journals take away a great source of editorial anxiety.

The quality of most Indian medical journals leaves much to be desired. Sloppily produced, pedestrian and uninspiring papers, poorly defined illustrations and erratic schedules deter most readers who flip rapidly through the pages of these journals before consigning them to the waste paper heap.

The few journals that sustain interest in readers and make them eager to study the contents of the next issue have risen above the rest principally due to the efforts of the editors and their dedicated staff. Building an efficient team of like-minded professionals, such editors develop sections within their journal and join them together to form a composite that appeals to a wide range of readers. We need to augment their efforts.

Journals produced by teaching institutions—such as the journal you are now holding in your hand—pose an extra difficulty for their editors. They carry a heavy burden already in the form of duties towards their patients, students and research projects. The labour put into the journal is often one of love. While they strive to build teams, concentrating especially on encouraging senior residents and younger consultants, there is a high attrition as these doctors are attracted to the private sector hospitals or travel abroad. The editor is often struggling to meet deadlines with little help.

Barring the prestige of membership of the editorial team, incentives for attracting youngsters to the editorial round table are few. It is necessary to make editing journals more rewarding.

One means of improving the quality of journals and their timely publication has been successfully demonstrated by Medknow Publications and Media Pvt. Ltd. Started by a young medical graduate out to improve the quality of the medical journal produced by his *alma mater*, it is now a leading publisher of Indian medical journals.

Medknow has pioneered the ‘fee-less-free’ model of open access publishing in India and provides free access to electronic editions of the journals, the majority of which do not charge the author or author’s institution for submission, processing or publication of the articles.

Each journal published by Medknow has its independent website. The websites use the OpenURL standard, making it easy for libraries to link users as directly as possible from citation to the full text of the article.

Medknow has also in place an original electronic manuscript submission and peer review system since 2001. Eliminating the use of postal or hard copy submissions, this online submission and processing of articles has resulted in a decrease in the submission to decision (turnaround) time.

I put forward a few suggestions to improve our journals.

- We must send in our *best* papers to Indian journals. The excuse that foreign journals are indexed is no longer valid as several Indian journals are also indexed and, as noted above, are also freely accessible on the internet. Papers in Indian journals are thus available easily to a wide readership all over the world. It is only when our journals publish the best of Indian medical science that their standards will be raised.
- The institution or association producing the journal must provide adequate staff and other facilities and reward the success of the editorial team.
- Members of the editorial team must be enabled to attend international conferences on editing medical journals. This will allow them to interact with those at the helm of such publications as *New England Journal of Medicine*, *BMJ*, *Lancet*, the group headed by *Nature* and the reputed specialty journals.
- They should also be enabled to spend extended periods of weeks or months as interns or visiting fellows in the editorial offices of such journals.

I am sure readers will be able to make other valuable suggestions.

Many Indian medical journals now fall into the category of ‘good’. We should do all we can to make them better.

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