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I strongly believe that each group of employees in the university needs and deserves representation. But I do not believe that further expanding the faculty senate is the right path towards achieving that goal.

Tenure stream faculty, clinical faculty, LEO faculty, and graduate student instructors all have specific challenges they need to see addressed, specific goals they need to pursue to improve their working conditions. Rather than lumping some of these groups together in one big unwieldy body of thousands, while excluding others—such as graduate student instructors, we should support and empower dedicated forms of representation that come together in solidarity whenever our interests align.

Lecturers, graduate students, and now librarians already are unionized. Clinical faculty are not, unfortunately. And clearly, as Michigan Medicine Senior Associate Dean Zink has said, the clinical faculty in Michigan Medicine are majority female. A key question here is, “Why is Michigan Medicine failing to tenure female practitioners?” If Michigan Medicine truly values clinical faculty, they should give them the appropriate status.

The solution to the problem is not expanding the faculty senate, a body with little invested power; the solution is for clinical faculty to form their own union or representative body, which comes together with other bodies, such as the Faculty Senate, GEO and LEO, to advocate for shared interests.

Currently, the faculty senate is the only body whose majority is constituted by tenure stream faculty, the only group whose contractual obligations consistently include research, teaching, and governance. If clinical and unionized faculty joined the Senate, tenure stream faculty would constitute a minority without gaining any of the advantages that unionization has brought to GEO and LEO members. That would mean that tenure itself, the only guarantor of academic freedom, would lose its voice.

Tenure-stream faculty are the body of faculty who are (by and large) protected from retaliation and, particularly, dismissal. These protections are crucial to maintaining a culture of critical engagement with the university itself. Recall that in a straw ballot, the clinical faculty did not withdraw confidence from Mark Schlissel—perhaps because they did, in fact, support his regime, or perhaps because Medical School leadership urged them to vote against it. It was the tenure stream faculty who were willing to say, “we have lost confidence in the president.”

Another factor to consider: tenure stream faculty are the only group at the university committed to the joint mission of research and teaching. If the Faculty Senate expands, we would be a minority. A senate with a minority research faculty signals that research can be minimized.

Lastly: the majority of clinical faculty can be found on the medical campus. The medical school already has outsized influence at the University, and to further increase that influence runs the

risk of having its labor practices spread – practices that most of us here do not favor and would resist should other colleges seek to implement them. Even if the medical school clinical faculty have a small apportionment in the Senate Assembly, their numbers would completely overwhelm votes in the Faculty Senate.

We, the Faculty Senate, should assist clinical faculty in organizing their own representative body. We should then work with them towards forming an all-university council, whose membership would include representatives of LEO, GEO, the clinical faculty body, undergraduate employees, and staff. Organizing ourselves in that fashion would create fertile ground for solidarity while allowing each employee group to advocate on behalf of their interests.

The question of faculty representation is a complex one in need of careful and sustained consideration. I recommend that SACUA appoint an ad-hoc committee to explore ways to support clinical faculty in organizing their own representative body, and to explore options leading to fair representation of all teaching and research constituencies within the U-M workforce, such as the creation of an all-faculty council.