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The Faculty of Medicine Struggle with the Credit Hour System

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1. The Beginning 1978:

When I Joined the University of Gezira in 1977, the total number of academic staff was less than ten, including the Vice Chancellor and the Deans of Faculties. There were only four faculties: Agricultural Sciences, Economics & Rural Development, Science & Technology (changed later to Engineering & Technology) and Health Sciences (changed to Medical Sciences and later to Medicine under pressure from students of Batch I).

The Credit Hour System was introduced to us in 1978 as a feasible system with many advantages. Given the required resources, it allows students to complete the needed courses and accumulate the required credit hours for graduation, each according to his abilities. Some students can graduate in less than five years while others may need six or seven years to graduate.

The University of Gezira adapted the system to suit the resources available and the local environment.

2. Relative Assessment of Students:

The University of Gezira chose Relative Assessment of students instead of the Absolute System with a fixed pass mark. Being a new University, it was felt than pre-requisites for applying an Absolute System were not there. These pre-requisite include a long history, financial & political stability and a fixed Calendar of Dates. The fixed pass mark requires standard teaching, standard examinations and well-trained staff.

It is well known that the Pass Mark depends on how tough the exam is. In a very easy paper, the Pass Mark may be 60% or more while in a very tough paper it may be 40% or less. Also, under an unfavorable environment, unstable financial and political setting the normal fixed pass mark may be unfair for students.

 The Normal Distribution (Curve):

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Assuming normal conditions, student s performance may follow a Normal Distribution. The mean score achieved by students and the Standard Deviation (SD) were used as a yard stick for grading students into five grades A, B, C, D and F as follows:

	A	Mean + One SD
Mean	B <	Mean + One SD
Mean One SD	C <	Mean
Mean 2 SD	D <	Mean - One SD
	F <	Mean - One SD

(This was changed later to A, B$^+$, B, C$^+$, C, D$^+$, D & F)

3. The Struggle of the Faculty of Medicine (FOM) with the System:

The first problem raised by FOM was how to convert weeks into credit hours. The credit hour was well defined for longitudinal courses as one contact hour of theory per week for 15 week. For practical, a credit hour is equivalent to 2-3 hours per week. The Faculty of Medicine used the Block System where courses are given a certain number of weeks. However, this problem was easily accommodated by computing the number of hours of teaching during the week, two weeks or more and divided by 15 for theory and by 30 or 45 for practical. Another problem arose with the clerkships when a whole Semester may be devoted to one course. The difficulty of converting hours during rounds into credit hours took sometime to be over come. Also training in the rural areas which may extend to more than two weeks was another obstacle. The weight of this in credit Hours was estimated with difficulty.

The second problem was with the grade D. The Faculty of Medicine stood firmly and was dead against including the grad D into their grading system. They convinced Senate from the beginning that the grading system in the Faculty of Medicine was A, B, C, and F without the D grade.

The first Dean of Medicine, Prof. Beshir Hamad, raised many objections to the Relative Assessment. I quote from the minutes of the seventh meeting of senate on the first of September 1979:

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((The Dean of Medical Sciences then expressed concern regarding the proposed grading of students. This caused much heated discussion, the Dean being under the same misapprehension as many of the other staff members regarding the use of the "normal distribution curve". He understood that this was to be the means of fixing the "pass" mark and argued that this would undermine the "Standard" set by the examiner It was pointed out to him that in fact the curve was merely a means of analyzing results and that a student's find grade was always at the discretion of the examiner.))

It is interesting to mention here that the seventh meeting of senate was the first meeting for the Dean of Medicine after arriving from abroad to Join the University.

Also we note that until that time, the name was "Medical Sciences" being changed from "Health Sciences" but not until that time to "Medicine . The seventh meeting of senate was attended by nine members of the total number of members at that time of 12 only. The Minutes were written originally in English.

The Minimum Pass Level (MPL):

The Faculty of Medicine managed to adapt and adopt the adapted Credit Hour System. The Faculty converted weeks into Credit Hour and managed to convert rounds, visits to villages and the clerkships into Credit Hours. The Faculty introduced the Minimum Pass Level to guard against what the first Dean of Medicine showed concern about in his first attendance to senate in the seventh meeting of senate: " Undermine the "standard" set by the examiner".

4. The End 2006:

I would like to end by pointing to the quotation from the seventh meeting of senate in para 4 concerning the use of the "Curve". It shows clearly that from the beginning that the "Curve" is not limiting by any means the examiner's discretion in grading his students. In the same meeting the examiners responsibility for grading was emphasized when discussing examiners meeting, and I quote:

 ((After much discussion it was agreed that there would be a meeting of examiners, at least at Faculty level, but that fixing of grades would remain the responsibility of the individual lecturer)).

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Staff Meeting-10 April 1979

In respect of the use of the curve, the Dean of Agricultural Sciences was asked if Senate was to fix a curve to be used. It was pointed out that to do so would be subjective as there was not enough historical background to predict the performance of Sudanese students in a course/unit system. Besides the idea of the curve was as a tool for lecturers; it should not be rigidly imposed on results, rather the papers should be marked first and the distribution compared to a normal curve, then if it was wildly out the lecturer could look again at the papers.

The following committee's report was presented by Dr. Hussein Suliman Adam: Comments were made that the three curve options given in this paper were all extreme and therefore, all lecturers should be using a skewed curve. However, it was pointed out that regardless of the curve used, this should only be a guide and should be used to see if the marks conform to pattern. The advantage of this system was said to be that the average student could be decided upon after marking, and the one standard deviation referred to was the suggested gap between grades once the average" group had been identified. The meeting was closed at 9:20 pm.

REFERENCE: Senate Minutes

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