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IMPROVING TEACHER PREPARATION IN MISSOURI:
EXPANDING CLINICAL EXPERIENCES TO BROADER CONTEXTUAL
EXPERIENCES

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A Dissertation Submitted to The Graduate School at the University of Missouri-St. Louis
in partial fulfillment of the requirements for the degree
Doctor of Education in Educational Practice with an emphasis in Leadership and Policy
Studies

August 2016

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Improving Teacher Preparation in Missouri: Expanding Clinical Experiences to Broader Contextual Experiences

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I. Introduction

Teacher preparation and support is under increasing scrutiny as we confront an alarming teacher shortage and an increasingly negative perception of the profession. While professional educators have never held a universal position of high esteem in the United States, the growing social and financial challenges facing our public school system have served to further erode the attractiveness of the profession. Much of the blame for failing schools has been placed on the shoulders of our classroom teachers; this criticism of teachers means that programs that prepare these teachers are being tasked to improve as well. Institutions responsible for the preparation of teachers are facing decreasing enrollment while simultaneously attempting to restructure programming to meet higher standards of teacher education. While our public school system is certainly faced with a great number of challenges to overcome, this work cannot be done without a competent, resourceful, and committed pool of teacher candidates.

Improved teacher preparation programs, coupled with intentional recruitment of well-qualified candidates, can work directly with schools and districts to structure partnerships that are mutually beneficial. One such benefit of these partnerships is the opportunity for teacher candidates to become embedded in school communities, providing them with authentic contextual learning experiences and opportunities to develop professional skills. This increased emphasis on clinical experience opportunities will result in a professional workforce that is better prepared and able to effect positive change in our schools by

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eliminating the learning curve that results when teacher candidates do not have opportunities to learn and practice their skills in actual preschool through grade twelve (P-12) schools (Howey & Zimpher, 2010).

Many stakeholders stand to benefit from clinically based teacher preparation programs. State departments of education are faced with the challenges of overseeing a large number of teacher preparation programs, many of which are not preparing successful teacher candidates; by eliminating low performing programs, state resources can be focused on a smaller number of successful programs and facilitate mutually-beneficial partnerships with P-12 school districts. Institutions of higher education that facilitate successful teacher certification programs will see an increased number of candidates as a result of fewer available paths of certification. These institutions can direct programming at high need areas of instruction and implement instructional strategies, focused theoretical instruction, and tightly connected clinical experiences to prepare highly skilled candidates. Schools and school districts who serve P-12 students will benefit by not only working with teacher candidates through their clinical practices but also by having an improved hiring pool of potential future teachers. Over time, as the number of less effective teachers is reduced and graduates from improved programs are hired, students of our schools stand to see the greatest benefit. Placement in classrooms led by skilled, understanding, and resourceful teachers will allow for students to experience greater academic and social success.

Expansive improvement in P-12 education outcomes cannot happen without intentional change in how we prepare our teachers. The perception of professional

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educators can be improved by altering this preparation to include the same types of clinical experiences that we provide to other professionals who serve to improve the mental and physical well-being of children. Authentic learning experiences that are focused in a smaller number of supervised certification programs will produce over time a shift in the success of P-12 students, professionally satisfied and successful teachers, and improved public perception of educators.

II. Literature Review

For many years, public schools in the United States functioned generally with respect from the public. Teaching as a career, while not seen as particularly ambitious or financially rewarding, was perceived as an honorable way to make a living. As public servants, teachers were rewarded with family-friendly schedules and decent retirement benefits. High school graduates who had a particular interest in the profession went on to attend teacher preparation programs, and many would then assume the career of teaching for the next thirty years or so, just as generations had before them. The teacher preparation programs they attended for certification were also fairly unregulated, judged mostly on the success of program completion and not the long-term professional employment of its graduates.

In stark contrast, the more recent perceptions of public schools and teachers have become increasingly negative. Conversations around education rely heavily on terms such as *accountability* and *standards*; schools and teachers cannot avoid public scrutiny and the constant barrage of initiatives aimed at school improvement.

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Teacher preparation programs, much like the American education system, have remained relatively unchanged and unexamined throughout history; according to Hess, Rotherham, and Walsh (2005) the teaching profession was, for years, “able to draw heavily upon a captive labor force of talented women and African Americans for whom there were few other professional avenues available” (p. 3). This readily available pool of candidates, coupled with little to no attention being paid to teacher evaluation and student outcomes, meant that the profession of teaching went relatively unexamined for many years. However, as Hess et al. point out, the publication of *A Nation at Risk* in 1983, the resulting increased emphasis on standards and accountability in American schools, and the rise of accreditation bodies for teacher preparation programs such as the National Council for the Accreditation of Teacher Education (NCATE)¹ all contributed to an increased focus on America’s teachers, their preparation, and their impact on student outcomes. Once Congress passed the revised Elementary and Secondary Education Act (ESEA) of 2001 (more commonly known as No Child Left Behind), there was no turning back from the intense scrutiny now faced by our schools and teachers.

As we move forward in attempting to solve the woes of our educational system, the focus must shift from short-term, hastily applied strategies for fixing failing schools. Constantly existing in response mode, where we desperately grasp for any and all potential solutions, distracts from a focused effort to address the one factor that has

¹In 2016, the merger of NCATE and TEAP (Teacher Education Accreditation Council) was complete; the newly approved agency for national standards for teacher education is the Council for the Accreditation of Educator Profession (CAEP). CAEP standards for educator preparation are now in full implementation (<http://caepnet.org/about/history>).

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proven time and again to most impact the student in spite of any outside mitigating factors: the teacher.

The Importance of the Teacher

Does the classroom teacher really have that great of an impact on student achievement? What about other factors, such as poverty, race, and early childhood experiences? How can one individual person (or a collective of several of these individuals) really overcome the dire challenges that affect our most at-risk children?

NCATE states that “research over the past decade indicates that no in-school intervention has a greater impact on student learning than an effective teacher” (2010, p. 1). Levine (2010) cites the work of Boyd, Grossman, Lankford, Loeb, and Wyckoff (2009), as she reflects on the impact of teachers who were prepared through programs rich in clinical experience (p.7):

- Teachers whose students make the greatest achievement gains have extensive and well-supervised clinical preparation and experience relevant to their initial teaching assignments;
- Teachers who have had opportunities to engage in the actual practice of teaching in schools have the greatest student achievement gains;
- Teachers who have the opportunity to study and assess local school curricula they will use in their initial teaching have the greatest student achievement gains; and

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- Teachers who have had capstone experience in which action-research or data-focused portfolios are used to make assessments about candidate effectiveness have greater student achievement gains.

Tschannen-Moran and Hoy (2001), while discussing at length models for measuring teacher efficacy, the reliability and validity of these models, and recommendations for future measurements, advocate for preparation programs that will serve to build teacher candidates' beliefs about their efficacy, a practice best served in environments that provide support and mentorship for novice teachers. The authors reiterate that a teacher's belief in the extent that external factors impact a child's ability to succeed can greatly impact the actual success of the child; therefore, a teacher with a well-developed sense of efficacy is less likely to criticize students and more likely to seek alternate methods of instruction and be persistent in their efforts, regardless of environmental factors affecting their students.

If teachers are in fact such a tremendous factor in student success, then we cannot afford to leave their professional preparation in the hands of unexamined, poorly regulated preparation programs, minimal certification requirements and oversight, and poorly implemented state and federal policy. Our children and our schools will be best served when we have a carefully selected and prepared workforce of teachers who are held in the same esteem as other professionals who serve the human needs of our society, such as doctors, nurses, and psychologists. Likewise, we cannot rely on the repair of the current teacher workforce. Such repairs are costly in human capital and are often ineffective, as they are unwanted by the ineffective teacher. While some teachers can be

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motivated and supported to improve their practice, it is more efficient in the long-term to focus on newly prepared teachers. The focus on a systematic implementation of the clinical preparation of teachers in partnership with P-12 schools must become the norm and not the exception.

History

The call for educational reform at the teacher preparation level is not a recent phenomenon. DeMonte (2015) refers to the work of The Holmes Group, a collaborative effort of 100 deans of colleges of education whose aim was to reform teacher education. Among the goals recommended by the Holmes group were two that specifically reference clinical practice (p. 3):

- Connect schools of education with schools.
- Make schools better places for practicing teachers to work and learn.

One cannot discuss the reform of teacher preparation without acknowledging the influential work of John Goodlad and his concept of Simultaneous Renewal, the now commonly held notion that we cannot redesign the principles and practices of teacher preparation at the higher education level without working in tandem with the schools in which these teachers will serve. In his work, Goodlad consistently advocated for intense partnerships such as those that continue to be explored and recommended by today's researchers and associated organizations. Williams and Shaw (2003) frequently cite the work of Goodlad while advocating for urban schools as ideal locations for simultaneous renewal; they also refer to mutual benefit, or how teachers impact the partnership between the school and university. The mutual benefit for these urban school and teacher preparation partnerships exists in that the urban schools provide "valuable experiences to

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preservice teachers who may have never interacted with students from diverse cultures” (p.71). As our urban schools and communities face increased scrutiny due to high rates of unaccredited schools and student failure, the work of Goodlad and his informed perspectives on a tandem revision of our P-12 schools and teacher preparation seems especially relevant and urgent. Howey and Zimpher (2010) contend that in their view, “there are serious structural flaws in our educational enterprise” (p. 15) and the current disconnects between the various sectors and levels of education (pre-K, K-12, higher education) only serve to further demonstrate the need for simultaneous renewal and the need for boundary spanning between educational systems.

Coupled with the idea of simultaneous renewal is the idea of the Professional Development School (PDS), another commonly held model of educational reform. Advocated by Goodlad and other well-known educators such as Linda Darling Hammond, the Professional Development School is described at www.ncate.org as such:

Professional development schools (PDSs) are innovative institutions formed through partnerships between professional education programs and P-12 schools. PDS partnerships have a four-fold mission:

- the preparation of new teachers,
- faculty development,
- inquiry directed at the improvement of practice, and
- enhanced student achievement.

PDSs improve both the quality of teaching and student learning.

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PDSs are often compared to teaching hospitals, which are also hybrid institutions created in the early twentieth century. As practicing professions, both teaching and medicine require a sound academic program and intense clinical preparation. The teaching hospital was designed to provide such clinical preparation for medical students and interns; PDSs serve the same function for teacher candidates and in-service faculty. Both settings provide support for professional learning in a real-world setting in which practice takes place.

Variations in teacher preparation programs have always existed; Whitford and Villaume (2014) cite the normal schools of the mid-1800s, which served as the earliest organized preparation grounds for the teacher workforce of the United States. Although these normal schools came to be increasingly controlled and supported by the States, great variance in programming and expectations existed. "...the duration of these programs varied from 1-4 years" (p. 424), while academic components also varied greatly from a subject matter focus to the inclusion of disciplines such as psychology, history, and methods. The value placed upon clinical opportunities also varied as greatly as today's programs: "Most normal schools included some type of on-the-job training; some offered a student teaching experience after completion of coursework, whereas others integrated work in classrooms throughout the program" (p.424). In 1870, the American Normal School Association recommended "a 2-year program of study for all teacher preparation programs and a shared set of professional coursework" (p. 424). This attempt at establishing uniformity across programs was unpopular and demonstrates the long-

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standing failure to better align America's teacher preparation programs. It is significant to note, however, that early certification requirements were already focused mainly on teacher's subject knowledge and not the application of skill: "The emphasis on credentialing based solely on subject matter indicates that the profession was yet in its early stages in defining the academic content of the pedagogy and undecided on the importance of a clinical component" (p. 424).

Linda Darling-Hammond, in her continued crusade to improve the profession through tightly aligned academic coursework and clinical experience, accurately titled her 2014 article *Strengthening Clinical Preparation: The Holy Grail of Teacher Education*. Darling Hammond argues that while program structure is not the sole determining factor of success for teacher preparation programs, certain program features can make a significant difference. Notably Darling-Hammond advocates for coherency in coursework and clinical experiences, as well the importance of supervision, reflection, and mentorship. The significant program features read specifically as follows:

- a common, clear vision of good teaching that permeates all coursework and clinical experiences, creating a coherent set of learning experiences;
- well-defined standards of professional practice and performance that are used to guide and evaluate coursework and clinical work;
- a strong, core curriculum, taught in the context of practice, grounded in knowledge of child and adolescent development and learning, an

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understanding of social and cultural contexts, curriculum, assessment, and subject matter pedagogy;

- extended clinical experiences—at least 30 weeks of supervised practicum and student teaching opportunities in each program—that are carefully chosen to support the ideas presented in simultaneous, closely interwoven coursework;
- extensive use of case methods, teacher research, performance assessments, and portfolio evaluation that apply learning to real problems of practice;
- explicit strategies to help students confront their own deep-seated beliefs and assumptions about learning and students and to learn about the experiences of people different from themselves; and
- strong relationships, common knowledge, and shared beliefs among school- and university-based faculty jointly engaged in transforming teaching, schooling, and teacher education (p. 548).

She also notes the significance of what she refers to as the “apprenticeship of observation” (p. 548), described as the influence carried by teacher candidates from their life’s experiences as former elementary and secondary students. This testifies to the potential long-term positive impact of well-designed partnerships between teacher education programs and P-12 school systems; as teachers we are certainly impacted by our own school-age experiences and increasing positive educational experiences for both

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students and teachers may encourage more positive professional goals and outcomes for future educators.

Darling-Hammond also speaks extensively regarding the changing role of faculty and traditional instructional practices in teacher preparation programs. Coursework must be closely interrelated and “involve applications in classrooms where observations and student teaching occur” (p. 550). In a more radical departure from current faculty roles in traditional programs, “faculty who teach courses also supervise and advise teacher candidates, and sometimes even teach children and teachers in placement schools...” (p. 550). Darling-Hammond recognizes this would require a significant shift in the current structures of higher education and faculty roles, including a significantly tighter alignment of coursework and applied practice; “securing these features...will take radical overhaul of the status quo” (p. 550). In further elaboration, Darling-Hammond accurately describes typical clinical experience in many programs as “haphazard, depending on the idiosyncrasies of loosely selected placements with little guidance about what happens in them and little connection to university work” (p.552). She also criticizes coursework as being far too theoretical and lacking in the provision of and practice with the tools teachers need in the classroom, such as “knowledge of curriculum materials and assessment strategies” as well as “techniques for organizing group work and planning student inquiries” (p. 552).

Revisiting the notion of simultaneous renewal, Darling-Hammond outlines the great potential impact of developing “state of the art practice” (p. 554) professional

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development schools (PDS) in typically underserved communities; benefits include transforming the future pool of teacher candidates as well as influencing the long-term health and viability of these communities. Darling-Hammond believes that “Such PDSs simultaneously restructure school programs and teacher education programs, redefining teaching and learning for all members of the profession and school community” (p.554).

Similarly, Hands & Rong (2014) explore data related to the success of the Neeg School of Education at the University of Connecticut, a five-year teacher preparation program that integrates a Bachelor’s and Master’s program. In their examination, Hand and Rong state that “partnership infrastructure fosters intentionality” (p.454) while advocating for collaborations between P-12 schools and the higher education institutions that prepare teachers. In order to “advance agendas of mutual interest” (p.454), schools and institutions must collaborate fully to provide authentic experiences for teacher candidates as well as renewed support and strength for local schools.

The Importance of Partnerships

Across the board, recommendations for greater implementation of clinical practice into teacher preparation acknowledge that this task will not be possible without the intentional development of partnerships across education systems. Howey and Zimpher (2010), while acknowledging the historical context for their recommendations, say, “Individual roles and responsibilities will need to be blended while institutional lines are blurred and made more permeable” (p. 6). Teachers serving school-aged children “will be asked to share more fully in the instruction and assessment of prospective teachers”

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and professors in teacher preparation programs will be required to “demonstrate their teaching abilities with P-12 students periodically and participate more fully in the redesign and renewal of P-12 schools” (p. 6). Such statements suggest an exciting professional shift whereby the faculty of our preparation programs are reconnected with the schools where their earliest knowledge and experiences in education were borne, and the teachers who serve our youngest children are raised to a level where their professional expertise and experiences are valued and cultivated. Such partnerships will not be without challenges, however, and Howey and Zimpher go on to define eight principles that they believe will exemplify successful partnerships (pp. 8-9):

1. Developing a clear, mutually agreed upon mission with success for all students at its core.
2. Negotiating a correspondingly clear theory of action or complementary theories of action.
3. Emphasizing shared accountability while often differentiating responsibilities.
4. Exerting strong leadership, often shared and distributed, with authority over budget, personnel and institutional priorities.
5. Making the distinctive properties, strengths, and limitations of each partner as clear and transparent as possible as a means of engendering respect for each partner’s culture and organization.
6. Negotiating and developing boundary-spanning roles and responsibilities.
7. Pursuing integrative change strategies and simultaneous renewal.

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8. Employing continuing assessment and regular reporting to the community while acknowledging and rewarding the contributions of different partners

Howey and Zimpher also state that success in school for all children should be the focus of every partnership, whether these partnerships are binary (between school districts and teacher preparation institutes), trinary (school districts, teacher preparation institutes, and the teachers' unions), or community-wide (all major stakeholders, including "civic, corporate, business, religious, grass roots, and philanthropic sectors, as well as educational partners") (p. 9).

NCATE (2010) has clearly outlined protocol for partnerships as well, and goes as far as to say that the very success of newly redesigned teacher preparation programs rich in clinical experience is dependent upon the thorough development and ongoing revision of such partnerships. The redesign means that "schools, higher education institutions and other preparation providers, teachers and their representatives will need to explore new roles, incentives, and rewards for teachers and faculty" (p. 27).

A Shift in Professional Perspective

According to Levine (2010), "new and experienced teachers repeatedly cite the opportunities to practice as being the most critical element of their preparation" (p. 3). This is not at the expense of theory of education, but because "preparation did not provide adequate opportunity for them to learn how to use what they knew in a supportive, highly mentored environment" (p. 3). Levine goes on to say that "teachers without intensive clinical preparation are like surgeons without practical training" (p. 3). For some, the comparison of teacher preparation with that of a surgeon may be a difficult

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comparison to swallow; this alone illustrates how little importance is placed upon the impact that teachers have on the lives of children. Consider the number of children who must seek the services of a surgeon in their childhood with those who will benefit from the services of a teacher; this asks for a major shift in our societal view of the teaching profession, yet the number of children impacted cannot be denied.

Levine further explores the comparison to medical professions by advocating that teacher preparation “should focus on preparing candidates for practice” (p. 4). Like physicians, nurses, and psychologists, teachers must become adept at mastering knowledge and the ability to apply this knowledge within the practice of their profession. Teacher candidates must “develop skills for putting knowledge into action” and “learn how to exercise professional judgment as they work in diverse and constantly changing environments” (p. 4). Much like teaching hospitals, Levine clearly advocates for the idea of teaching schools, where teacher candidates will learn alongside and benefit from the expertise and feedback of master teachers. Levine does not ignore that this will require a major shift in the perception of teaching as a profession; she refers to the “twelve-year apprenticeship” where “some believe that anybody who has been to school can teach school” (p. 4).

Impact on Attrition

The long-term impact of clinical experience on teacher preparation may also be seen as beneficial for attrition rates. Current teacher turnover rates in the United States are abysmal; a recent report by the Alliance for Excellence in Education states that nearly 500,000 teachers leave the profession annually, at a cost of nearly \$2.2 billion to the

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United States (2014). In a more general sense, approximately 30% of teachers who decide to leave the profession will do so within 3 years and 50% will have exited the field by year 5 (Johnson, 2004). Our youngest teachers are those most at risk of abandoning the profession, and mounting evidence suggests that benefits such as the mentorship and collaborative relationships developed within a clinically based preparation program can reduce attrition.

One study that looked at the impact of clinical preparation on teacher retention was captured by Latham and Vogt (2007). In their study, the authors compared data on graduates from both PDS models of certification and traditional teacher preparation programs. The graduates examined had graduated in the years 1996-2004, and all were prepared for employment in elementary education.

In their research summary, Latham and Vogt acknowledge that teacher preparation programs cannot account for all of the reasons some individuals leave the profession; family decisions, relocations, and other circumstances will occur regardless of how a teacher receives his/her education. However, in terms of professional satisfaction and the inclination to stay committed to the classroom, Latham and Vogt state the following:

Some teacher education programs may, however, better equip students to persist in teaching. Teacher education programs that diminish the gap between theory and practice, provide extensive experience in schools, and immerse preservice teachers in the school climate have the potential to prepare new teachers entering the field for the challenges they face” (2007, p. 154).

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Need for Greater Research Base

As pointed out by Lathan and Vogt (2007), NCATE (2010), and others, the greatest need at this time is for more focused research on the specific factors related to clinical experience that have the greatest impact on improved teacher preparation.

Hess et al. (2005) spoke with a number of policy makers and scholars with regards to the viability of the drastic changes needed to improve teacher preparation and quality. One interview was with Dan Goldhaber of the Urban Institute. Goldhaber ultimately advocates for a well-developed research agenda because “few existing datasets support methodologically rigorous research on this issue” (p. 6). Hess et al. and colleagues repeatedly advocate for further exploration and clarification of the factors that impact teacher quality through research.

Howey and Zimpher (2010) also advocate for further study of the “new phenomena” (p. 18) of systemic educational partnerships that are the basis of their recommendations. They state the major purpose of their paper is to stimulate thinking about how to further advance such partnerships and also point “to where further scholarly activity is needed to guide these future developments” (p. 18).

While existing evidence demonstrates that teacher preparation programs rich in clinical experience have a positive impact on factors such as student success, teacher efficacy, attrition, and other related factors, the specifics of the clinical experience must be further studied and clearly delineated in order to be implemented effectively on a national scale.

III. The NCATE Blue Ribbon Panel Report of November 2010

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Background

In November of 2010, the National Council for Accreditation of Teacher Education (NCATE), published “Transforming Teacher Education Through Clinical Practice: A National Strategy to Prepare Effective Teachers” (hereinafter, the “Report”). The Report summarized the findings and recommendations of the NCATE Blue Ribbon Panel on Clinical Preparation and Partnerships for Improved Student Learning, a committee comprised of educators, state officials, union representatives, educational reformers, and critics who spent ten months examining gaps that exist in teacher preparation programs and the needs of American schools.

According to www.ncate.org, NCATE was founded in 1954 and is a coalition of professional teaching organizations. It is recognized by the U.S. Department of Education and the Council for Higher Education Accreditation as “a professional accrediting body for teacher preparation” and “currently accredits 670 colleges of education,” with many more seeking future accreditation from the organization.

With a historically strong reputation as a body of accreditation, NCATE recommendations are held in high regard by institutions of higher education that assume the responsibility for the preparation of teacher candidates. As such, the guidelines presented in this report serve to provide a framework for such institutions to improve their educational outcomes through a focus on clinical practice.

Summary of Findings in the Report

The Report recognizes that there are exemplary programs in existence that effectively utilize clinical experience as a key factor in producing successful teacher candidates. However, the report advocates for widespread changes that will result in “an entire

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system of excellent programs, not a cottage industry of path breaking initiatives” (p. ii).

The committee identified 10 design principles and a series of steps designed at assisting teacher education programs in developing more effective models of preparation. All recommendations are based on the expectations that teacher preparation programs will work in close partnerships with cooperating school districts and also that candidates for such programs will be carefully selected and closely supervised. The changes recommended in the report are significant in scope and in requirements of implementation. For example, the Report (p. iii) outlines the following calls for change:

- *More Rigorous Accountability:* Accreditation for teacher education programs would be contingent upon how well they actually meet the needs of students in our schools; school districts themselves would play a significant role in the selection and preparation of candidates.
- *Candidate Selection and Placement:* Focused on selection and diversity, programs must work to identify appropriate candidates based personality attributes and other skills; they must also work to best match candidates with schools and then provide appropriate supervisions and supports.
- *Revamping Curricula, Incentives, and Staffing:* This tenet calls for the “close coupling of practice, content, theory, and pedagogy.” Staffing must also be closely examined and redesigned to support these new curricular and professional expectations.
- *Supporting Partnerships:* In perhaps the most challenging call for change, the Panel asks that barriers resulting from state policy be removed and the state and

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institutions work to actively provide financial support and incentives for the development and implementation of clinically rich teacher education programs.

- *Expanding the Knowledge Base:* This tenet essentially supports further research into why clinical experience in teacher preparation is effective. By building the research base, the committee hopes to further identify programming specifics that will assist teacher preparation programs in efficient and effective development of programs, as well as “shape future research” and “public policies on preparation” (p.iv).

The **10 Design Principles** as recommended by the report read briefly as follows (pp. 5-6):

1. Student learning is the focus
2. Clinical preparation is integrated throughout every facet of teacher education in a dynamic way
3. A candidate’s progress and the elements of a preparation program are continuously judged on the basis of data
4. Programs prepare teachers who are expert in content and how to teach it and are also innovators, collaborators and problem solvers
5. Candidates learn in an interactive professional community
6. Clinical educators and coaches are rigorously selected and prepared and drawn from both higher education and the P-12 sector
7. Specific sites are designated and funded to support embedded clinical preparation
8. Technology applications foster high-impact preparation

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9. A powerful research and development agenda and systemic gathering and use of data supports continuous improvement in teacher preparation

10. Strategic partnerships are imperative for powerful clinical preparation

The report cites many examples of successful preparation programs that are increasing the level of clinical experience in their programs and achieving positive results, as well as reflection on both current and previous research that supports the recommendations. As part of the culminating “Call to Action” (pp. 24-26) at the conclusion of the report, an alliance is described between eight states that joined the NCATE Alliance for Clinical Teacher Preparation. State officials from higher education institutes and leaders in the P-12 schools in California, Colorado, Louisiana, Maryland, New York, Ohio, Oregon, and Tennessee agreed to work in developing the policies, partnerships, and pilot sites where the recommendations and design principles as outlined in the Report could be put into practice.

Viability of Findings

The Report over and over again calls for sweeping systemic changes to teacher preparation programming and public support for implementation aimed at increasing and focusing clinical practice of educators. While the recommendations are ultimately about improving learning outcomes for P-12 students, the Panel recognizes that the recommendations will be challenging to implement on a wide scale. The report discusses accountability in greater detail, and state departments of education are called out for their often-conflicting requirements for university and non-university teacher preparation programs. Are we not preparing all of these candidates for potentially the same classroom

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positions? How can one student be required to meet a particular set of criteria to earn a degree and certification while another candidate is not? These conflicting standards illustrate inconsistencies in the quality of institutions preparing teacher candidates and are representative of gaps in educational policy and implementation at the state and institutional levels. Such gaps and the disconnect between policy and practice are my greatest concerns regarding the viability of a systemic change as recommended by the NCATE report. Without strong leadership and systemic reform at the national and state levels, improvements will continue to be seen only at the local level of progressive institutions and will lack the impact of a national movement.

As an educator who has worked with teachers and teacher candidates in a variety of classroom settings, I have witnessed firsthand the positive impact of clinical experience and associated collaborative practices on the success of teachers. As we embark on the journey of reworking an educational system faced with numerous challenges, it is time to stop using ineffective tools such as teacher evaluations as bandages to address professional weaknesses. Rather, we should address the problem of a poorly prepared and unmotivated teacher workforce by starting at the root. By selecting, supporting, and embedding our future teachers in the actual practice of their future careers, we can improve both the educational outcomes of our P-12 students and the long-term professional satisfaction of teachers.

IV. Key Considerations for Clinical Experience

In order to make reasonable recommendations regarding the improvement of teacher preparation and justify the incorporation of extensive clinical experience opportunities, I

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will summarize existing literature and data in consideration of the following additional factors:

Teacher Preparation and Certification Programs

- There is a recognized need for alternative certification programs. This includes programs that award certification to post-baccalaureate candidates and Teach for America. Recommendations regarding alternative clinical experience requirements must be considered as well.
- Many two-year institutions work in partnership with four-year institutions to offer prerequisite coursework for teacher preparation. State requirements for amount and quality of clinical experience should be consistent regardless of the institution where certain certification requirements are fulfilled.
- Ultimately, the number of institutions currently permitted by the state to offer teacher preparation and certification programs is excessive. Fewer programs with more focused programming, sufficiently trained and dedicated staff, and increased oversight would serve to produce better-prepared candidates. The decision to dissolve ineffective programs would be a potentially highly emotional and controversial move for the State.

Community Impact

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- It will be necessary for partnerships between the institutions and P-12 schools to serve a variety of economic and geographic regions (for example, rural versus urban), as well as provide adequate experience for candidates in specialty areas of certification, such as special education and English language learning. In this way, teacher candidates can be placed in highly compatible settings. This will increase the likelihood of success for both teacher candidates and the students served. It will be necessary to consider how to determine compatibility and balance this with teacher shortages in high need areas.
- Clinical experience will provide opportunities for teacher candidates to develop their skills in interacting and communicating with parents, guardians, and students. It is essential that teacher candidates fully grasp the evolved role of the educator and are able to recognize and manage family and student expectations.

Recruitment and Placement

- The development of partnerships may provide multiple benefits to all involved parties. Partner school districts should serve not only as locales for clinical experience of teacher candidates but also as potential future employers. Institutions would be prudent to work closely with human resource departments of partner P-12 districts to

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recommend and place candidates for hire following graduation.

Similarly, the two can also collaborate in the identification and recommendation of high school graduates as potential teacher candidates, particularly to increase the diversity of the teacher work force.

Infrastructure and Supports

- Intensive clinical experience that is mutually beneficial for both institutions of higher education and P-12 schools must be adequately staffed and supported. The quality of clinical experience is greatly impacted by the clinical educators and mentor teachers supporting teacher candidates. Expectations and requirements for structure, staffing, and oversight of clinical experience programs must be clearly delineated.

The State has recently undertaken several key endeavors towards better alignment of teacher preparation, clinical experience requirements, certification, and evaluation. This includes the following redesigned components: the Missouri Standards for the Preparation of Educators (MoSPE), the Missouri Educator Gateway Assessments (MEGA), and the Model Educator Evaluation System (MEES). The State has also formed two key initiatives focused directly on the future of the teacher workforce in Missouri: Missouri's Educator Equity Plan and Missouri Transforming Educator Preparation (MoTEP). These many efforts mark the most dramatic revision of Missouri's teacher preparation and certification system in decades. The entirely revised and aligned

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certification requirements for all areas has resulted in an improved, thorough rewrite that should allow the State to implement the new standards for certification more effectively and greatly improve the capacity for enforcement.

V. Recommendations to the State

Reviews of existing literature and evidence have resulted in the following recommendations for improving the existing teacher workforce and improving student outcomes:

1. Teacher preparation programs must be redesigned in order to dramatically increase the amount of clinical experience at all levels. Early clinical experiences are necessary to determine appropriateness of career placement and candidate competency, while continuing experience will allow for skill development and application of theory.
2. Institutions responsible for teacher preparation and certification should be carefully evaluated and approved by the state of Missouri based upon current measures of success. These measures should include the areas of recruitment, preparation, placement, and retention of their candidates. Programs not demonstrating adequacy should be dissolved. This will result in fewer programs of higher quality, allowing the State to focus resources on successful programs of higher education.
3. Institutions, with support from the State, will work to foster partnerships with P-12 districts in a variety of geographic and economic areas. These partnerships will serve two primary purposes: to establish clinical experience sites for teacher

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candidates and to serve as potential pipelines for both the recruitment of future teacher candidates and the professional placement of teacher candidates upon graduation and certification. By seeking partnerships in varied locations, the likelihood of appropriate placement of candidates based upon competencies is increased. The institutions and partner school districts must assume responsibility for the oversight and support of teacher candidates through clinical educators and experienced mentor teachers.

While existing evidence suggests multiple benefits for a shift to clinically based teacher preparation programs facilitated through school partnerships, it may be necessary for the State to undertake further review before embarking on such a fundamental shift in the approach to teacher certification and placement. The dissolution of ineffective existing programs and comprehensive redesign of remaining programs would require a high level of commitment from the State, the institutions of teacher preparation, and partner school districts. This shift would also require significant investment in the identification and preparation for clinical educators, mentor teachers, and cooperating administrators who would assume key roles in the successful education of teacher candidates.

Exemplar programs and opportunities for the State to further explore the effectiveness of such models do exist. One approach to further evaluate the potential risks and benefits of these suggested reforms and collect supporting data could be to look more closely at one such program. The College of Education (COE) at UMSL has worked diligently in recent years to increase the levels of clinical experience for teacher candidates as well as

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develop a number of successful partnerships with area school districts to support these experiences. The COE also continues to work on improved alignment of coursework and practical experience for educators at all levels. Like many programs across the state and country, however, the UMSL program continues to see challenges with declining enrollment and public perception of the teaching profession. The willingness to adapt and seek new solutions to current challenges facing St. Louis area educators makes the UMSL COE an ideal candidate as a potential testing site for new approaches to teacher recruitment and preparation. The State may seek to partner with UMSL to design and support additional program changes that would align with the recommendations and provide evidence of success following implementation.

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REFERENCES

- Alliance for Excellence in Education. (2014). *On the path to equity: improving the effectiveness of beginning teachers*. Retrieved from <http://all4ed.org/reports-factsheets/path-to-equity/>
- American Association of Colleges for Teacher Education. (2010). *The clinical preparation of teachers: a policy brief*. Washington, D.C.: Author. Retrieved from http://oacte.org/pdf/ClinicalPrepPaper_03-11-2010.pdf
- Boyd, D., Grossman, P., Lankford, H., Loeb, S, Wyckoff, J. (2009). Teacher preparation and student achievement. *Educational Evaluation and Policy Analysis*, 31(4), 416-440. doi: 10.3102/0162373709353129
- Clukey, K. (2016, March 7). As shortage looms, state rethinks how it recruits and treats its teachers. *Politico*. Retrieved from <http://www.politico.com/states/new-york/albany/story/2016/03/as-shortage-looms-state-rethinks-how-it-recruits-and-treats-its-teachers-032004>
- Darling-Hammond, L. (2014). Strengthening clinical preparation: The holy grail of teacher education. *Peabody Journal of Education*, 89(4), 547-561. doi: 10.1080/0161956x.2014.939009
- Deans for Impact. (2016). *From chaos to coherence: A policy agenda for accessing and using outcomes data in educator preparation*. Retrieved from http://deansforimpact.org/policy_brief.html
- Deans for Impact. (2015). The science of learning. Retrieved from http://deansforimpact.org/the_science_of_learning.html

Improving Teacher Preparation in Missouri: Expanding Clinical Experiences to Broader Contextual Experiences

DeMonte, J. (2015). *A million new teachers are coming: will they be ready to teach?*

Retrieved from <http://educationpolicy.air.org/sites/default/files/Brief-MillionNewTeachers.pdf>

Eldridge, D. (2012). *Diversity in educator preparation providers: Implications for standards setting*. Retrieved from www.caepnet.org

Grisham, D. L., Berg, M., & Jacobs, V. R. (2002). Can a professional development school have a lasting impact on teachers' beliefs and practices? *Teacher Education Quarterly*, 29(3), 7-24.

Hands, R., & Rong, Y. (2014). Schools as clinics: Learning about practice in practice. *Peabody Journal of Education*, 89(4), 453-465. doi: 10.1080/0161956x.2014.938592

Hess, F.M., Rotherham, A.J., & Walsh, K. (2005). *Finding the teachers we need*. Retrieved from http://www.wested.org/online_pubs/pp-05-01.pdf

Hollins, E.R. & Crockett, M. (2012). *Clinical experiences in the preparation of candidates for teaching underserved students*. Retrieved from www.caepnet.org

Howey, K.R. & Zimpher, N.L. (2010). *Educational Partnerships to Advance Clinically Rich Teacher Preparation*. Retrieved from <http://www.ncate.org/LinkClick.aspx?fileticket=hccwyqMLISo%3D&tabid=715>

Johnson, S. M. (2007). *Finders and keepers: helping new teachers survive and thrive in our schools*. San Francisco: Jossey-Bass.

Improving Teacher Preparation in Missouri: Expanding Clinical Experiences to Broader Contextual Experiences

- Katnik, P. (2014). A study of Missouri's educator evaluation system and its efforts to increase teacher and leader effectiveness (*unpublished dissertation*). University of Missouri-St. Louis.
- Koedel, C., Parsons, E., Podgursky, M., & Ehlert, M. (2012). Teacher preparation programs and teacher quality: Are there real differences across programs? (*working paper*). Retrieved from <http://www.caldercenter.org/sites/default/files/WP-79.pdf>
- Larson, A.E., & Kyle, D.W. (2014). Introduction to clinical partnerships in teacher education: Perspectives, practices, and outcomes. *Peabody Journal of Education*, 89(4), 415-418. doi: 10.1080/0161956x.2014.938587
- Latham N.I. & Vogt, W.P. (2007). Do professional development schools reduce teacher attrition? Evidence from a longitudinal study of 1000 graduates. *Journal of Teacher Education*, 58, 153-167. doi: 10.1177/10022487106297840
- Levine, M. (2010). *Developing principles for clinically based teacher education*. Retrieved from <http://www.ncate.org/LinkClick.aspx?fileticket=qhv0TxP2Gm0%3D&tabid=715>
- Little, J.W., Bartlett, L., Mayer, D., & Ogawa, R.T. (2010). The teacher workforce and problems with educational equity. *Review of Research in Education*, 34, 285-328. Retrieved from www.jstor.org
- Missouri Department of Elementary and Secondary Education. (2015). *Ensure equitable access to excellent educators*. Jefferson City, Missouri. Retrieved from <https://dese.mo.gov/sites/default/files/Educator-Equity-Plan-Missouri.pdf>

Improving Teacher Preparation in Missouri: Expanding Clinical Experiences to Broader Contextual Experiences

- Missouri Department of Elementary and Secondary Education. (2013). *Missouri standards for the preparation of educators (MoSPE)*. Jefferson City, Missouri. Retrieved from <http://dese.mo.gov/sites/default/files/MoSPEStandards.pdf>
- The National Council for Accreditation of Teacher Education. (2001). *Standards for professional development schools*. Washington, DC: Author.
- The National Council for the Accreditation of Teacher Education. (2010). *Transforming teacher education through clinical practice: a national strategy to prepare effective teachers*. Washington, D.C. Retrieved from <http://www.ncate.org/LinkClick.aspx?fileticket=zzeiB1OoqPk%3D&tabid=7>
- Sawchuck, S. (2014, October 21). Steep drops seen in teacher-prep enrollment numbers. *Education Week*. Retrieved from www.edweek.org
- Tschannen-Moran, M. & Woolfolk Hoy, A. (2001). Teacher efficacy: capturing an elusive construct. *Teaching and Teacher Education, 17*(7), 783-805. doi: 10.1016/S0742-051X(01)00036-1
- Whitford, B.L. & Villaume, S.K. (2014). Clinical teacher preparation: A retrospective. *Peabody Journal of Education, 89*(4), 423-435. doi: 10.1080/0161956x.2014.938590
- Williams, M. & Shaw, S.F. (2003). Simultaneous renewal in the urban professional development school. *The Professional Educator, XXV*(2), 67-75.