

What do teacher candidates have to say about their clinical experiences?

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Abstract

Field experiences and clinical practice are considered the most important and most influential component of teacher preparation programs. The National Council for the Accreditation of Teacher Education Programs (NCATE) has established six standards to measure the effectiveness of teacher education programs; field experiences and clinical practice represent *Standard 3*. The NCATE requires that teacher education programs design, implement and, evaluate field experiences and clinical experiences so that teacher candidates can develop as well as demonstrate the knowledge, skills, and dispositions necessary to help all P-12 pupils learn. According to the NCATE, field experiences constitute an integral component of teacher preparation programs because they allow teacher candidates to apply and reflect on their content, professional, and pedagogical knowledge. There is little disagreement amongst professionals about the significance of clinical experiences. However, at the same time, as ascertained by the Education Commission of the States (ECS), in the context of abundant variety that exists in the design, implementation, and evaluation of field experiences, the research is reticent about what exactly makes a field experience desirable and successful. Driven by the need and motivation to capture the salient attributes of a successful field experience, we conducted a pre-experiment. On the basis of existing research literature, we developed a questionnaire that had Likert type items and a few short answer type items. We administered the questionnaire to our Elementary cohort of 28 teacher candidates after the completion of their first clinical experience of approximately 42 clock hours. The findings of our pre-experiment indicate that majority of our teacher candidates agree or strongly agree that the field experience has made a considerable impact on their beliefs about teaching and learning and that it has been a vital component of their teacher preparation. Despite limitations of small sample size and experimenter bias, our study is significant. It has captured the perceptions of teacher candidates about their clinical experiences.

Keywords: Clinical experiences, Field experiences, Internships, Apprenticeship, School/University Collaborations

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Field experiences and clinical practice are considered the most important and most influential component of teacher preparation programs. The National Council for the Accreditation of Teacher Education Programs (NCATE) has developed six standards to measure the effectiveness of teacher education programs. Of these six standards, field experiences and clinical practice represent *Standard 3*. The NCATE requires that education programs design, implement and, evaluate field experiences and clinical experiences so that teacher candidates and other school personnel develop and demonstrate the knowledge, skills, and dispositions necessary to help all P-12 pupils learn. Field experiences represent an integral component of teacher preparation programs because they allow teacher candidates to apply and reflect on their content, professional, and pedagogical knowledge, skills as well as dispositions, in a variety of settings. They facilitate candidates' development as professional educators by providing them with opportunities to observe in schools, tutor, instruct, conduct applied research, assist teachers or other school personnel, attend school board meetings, and participate in school-based events directed at the improvement of teaching and learning including the use of information technology. Clinical experiences should be sufficiently extensive and intensive for candidates to demonstrate proficiency in the professional roles for which they are preparing (NCATE, 2006)

There is very little disagreement about the value of practical experience in learning to teach (Latham & Vogt, 2007; Education Commission of the States, 2003;

Darling-Hammond & Youngs, 2002; Wilson, Folden, & Ferrini-Mundy 2001). School – university partnerships have been suggested as an avenue for improving instruction, pupil achievement, and teacher preparation. The significance of field experiences has been recognized in the recent years by Teachers for a New Era initiative sponsored by Carnegie Corporation of New York (2006) and in the past almost two decades ago by Holmes Group (1986). It remains, unclear, however, what qualities should an effective clinical experience have. The teacher educators have been unable to find any definite answer to the question of how to develop and offer prospective teachers the field experiences that would impact them as well as help them grow into better teachers (Wilson & Floden, 2003).

Different teacher education programs offer different types of clinical experiences. Some are relatively brief and some last for more than a year. Some are based on close university-school partnerships while in others, the relationship between the placement school and the university is minimal. Some are integrated with the teacher preparation coursework and others are not. The current research literature is reticent about the relative merits and limitations of these diverse structures and diverse features of clinical experiences. One can only infer that a clinical experience which is poorly planned, poorly implemented, poorly structured, and detached from the teacher preparation coursework would be less effective (Education Commission of the States, 2003).

Furthermore, due to the variance in the design and duration of clinical experiences, it is difficult to generalize and draw any definite conclusions from the existing body of research about the impact of clinical experience on prospective teachers.

In our search for the *impact of clinical experiences* on prospective teachers, we conducted a pre-experiment.

Literature Review

Metcalf, Hammer, & Kahlich (1996) compared the experiences of 16 teacher candidates who were assigned to student-teaching field placements with 21 teacher candidates who were placed in a campus laboratory experience that involved role playing and simulated teaching. They found that the lab experience was more effective than the field placements in helping prospective teachers identify and explain critical pedagogical events in written case studies. They also found that there was no difference between the two groups in organizing instruction.

Wilson (1996) investigated the clinical experiences of 26 teacher candidates who were majoring in science, mathematics, and technology. These teacher candidates were placed in three different professional schools. As a part of their experiences, the teacher candidates engaged in small group and large group instruction. It is noteworthy that these placements were not student teaching assignments. The findings indicated that as a result of clinical experiences, the teacher candidates experienced an increase in their self-efficacy.

Grisham, Laguardia, and Brink (2000) looked into essential variables that make clinical experiences effective. They reported that following three factors are most essential for the effectiveness of a clinical experience: (1) having university faculty as well as cooperating teachers supervise the teacher candidates; (2) providing more than one

field experience; and (3) ensuring that teacher candidates receive egalitarian treatment from their supervising teachers.

Bullough et al. (2002) studied 21 teacher candidates who were placed in two professional development schools (PDS). They interviewed these teacher candidates and also observed them in their assigned classrooms. In one of the schools, teacher candidates were paired one-on-one with a mentor teacher and in the other school, two teacher candidates were paired with one mentor teacher. The researchers found that the mentor relationships resulted in the increased engagement of teacher candidates in instructional planning. The teacher candidates felt that they had control over what they taught. They also felt connected to their mentor teachers and had better working relationships.

Rock & Levin (2002) conducted a descriptive study of five teacher candidates. These five candidates had been placed in professional development schools. The researchers found that as a result of their clinical experience, the teacher candidates had become more thoughtful and reflective. The clinical experience also provided them with an opportunity to get a clear grasp of theories of teaching and learning. It added to their knowledge of teaching and curriculum and heightened their awareness of learning needs of their pupils.

Malone, Jones, and Stallings (2002) examined a service-learning tutoring program for 108 undergraduate pre-service teachers. They found that the experience helped the pre-service teachers learn more about education. It increased their understanding of the subject they were tutoring. It also helped them develop empathy and gain more tolerance as well as patience.

Reynolds, Ross, and Rakow (2003) noted that pre-service teachers who were placed in professional development schools (PDS) were more confident and tended to engage more in self-reflection because PDS placements are often longer than traditional placements. The PDS graduates also had a greater intention to remain in teaching as compared to non-PDS pre-service teachers.

Castle, Fox, & Souder (2006) assessed the impact of professional development schools (PDS) on pre-service teachers. They compared PDS and non-PDS candidates at the point of licensure. Their data showed that PDS-based teacher preparation produces beginning teachers who are more competent in some aspects of planning, instruction, management, and assessment. They are also more integrated as well as student centered during the processes of planning, instruction, assessment, management, and reflection. Moreover, PDS teacher candidates focus more on their plans, teaching tools, than their own performance. The researches ascertained that since focusing first on one's own performance and then shifting to pupil performance is a typical developmental pattern for beginning teachers, the PDS teacher candidates are further along this developmental continuum at the time they are licensed.

As is evident from the above literature review, not all clinical experiences are alike. Their variety poses a challenge to the researcher and to the practitioner. Their variety prevents us to draw any conclusions. We lack reliable and valid measures of impact as well insights into what specific features of clinical experience are more effective and which specific features are less effective (Wilson & Floden, 2003).

Methodology

Setting

The education Unit of a public liberal arts college which is a member of the Council of Public Liberal Arts Colleges (COPLAC) and is located in the rural part of Eastern Connecticut provided the site for this investigation. The Unit offers graduate and undergraduate certification programs in Elementary, Secondary, and Early Childhood education but only undergraduate program in Health/Physical Education. The Unit was fully accredited by the National Council for Accreditation of Teacher Education (NCATE) in March 2004. The Unit has strong, well maintained, mutually rewarding relationships with various school districts in the region. The field experiences and clinical practices constitute an integral part of all the certification programs. The leading purpose of these clinical experiences is creation of multiple opportunities for the teacher candidates to observe models of best practice, apply content knowledge, develop a connection between theory and practice, cultivate pedagogical skills, identify diverse learner characteristics and have a positive impact on P-12 pupil learning. For both graduate and undergraduate teacher education programs, clinical experiences have been well structured, well designed, and well implemented. The candidates are expected to study and practice their pedagogical skills in a variety of settings that include students of diverse racial and ethnic backgrounds, students with exceptionalities, and students of varying chronological ages. They are placed in clinical settings at grade levels and in subjects for which they are preparing. Each new clinical experience is built on the prior experience which not only provides practice of previously acquired knowledge, skills and dispositions but also offers opportunities for the acquisition of new knowledge, and skills.

The elementary and secondary undergraduate programs in the Unit are offered as cohorts. These programs start in the spring of each year. All teacher candidates are formally admitted to the Teacher Education Program. The Unit maintains a committee of faculty members, the Committee on Admission and Retention in Education (CARE) which is responsible for the admission process. This committee also monitors teacher candidate progress after admission and throughout the program (s).

For admission to Teacher Education Programs, the teacher candidates are expected to have earned grade point average of 2.7 or higher. They also must have three satisfactory letters of recommendation, pass PRAXIS I, and clear a personal interview with a team of education faculty demonstrating positive teacher dispositions, and competence in verbal communication.

In spring of junior year, all elementary teacher candidates are placed with expert teachers in regional local elementary schools. These elementary schools represent different school districts. At the time, the elementary teacher candidates sign up for their very first clinical experience; they also enroll in three other education courses. One of these courses deals with educational psychology, the other course focuses on literacy, and the third course provides information on students with disabilities and classroom accommodations for students who have special needs. Faculty teaching these three courses coordinate the clinical experience. They work closely with the cooperating teachers of placement schools.

The clinical experience is well integrated with the coursework. All of the teacher candidates spend approximately 42 clock hours at their field placement. Each week, they spend 3 clock hours at their placement and write a reflection piece. They explain the

connection between their field observations/activities and their learning in the literacy course. Every week, they also deliver one-on-one reading instruction to one of the pupils at their field placement and reflect upon it. They submit their reflection to the instructor of their literacy course.

During their clinical experience, the elementary teacher candidates write a commentary on the learning community that their cooperating teacher has created in his/her classroom. They describe the characteristics of students with disabilities in their classrooms. They talk with their cooperating teacher and gather information about the pre-referral interventions, accommodations she/he makes for students with disabilities, the IEPs, 504 Plans, the participation of students with disabilities in statewide assessment, the role their teacher might have played in the identification/eligibility process. The teacher candidates are encouraged to participate in Planning and Placement Team (PPT) meetings if the opportunity arises. They also interview a special education teacher at their field placement. They learn about special education teacher's views on inclusive practices, team teaching, and his/her role in the education of students with disabilities. At the end of the clinical experience, they prepare a report of their major accomplishments at their field placements. This report is signed by the cooperating teachers and submitted to one of the three instructors who teach courses concurrent with the field experience.

Participants

Twenty eight teacher candidates enrolled in the undergraduate elementary teacher education program participated in the study. Approximately 90% of the teacher candidates were females and the remaining 10% were males. All of the teacher

candidates were White. These teacher candidates had just completed first of their two required clinical experiences. This clinical experience, EDU 301 carries one credit and is supervised by University Coordinators. The teacher candidates earn a grade of satisfactory/Unsatisfactory in clinical experiences.

Instrumentation

At the end of the first required clinical experience, elementary teacher candidates responded to a questionnaire that had several Likert-type items and a few short answer type questions. The questionnaire intended to capture the perceptions of teacher candidates about their clinical experiences. It included items on teacher knowledge, skills and dispositions that might have been impacted by the clinical experience. The questionnaire was developed by the principal investigator after a thorough research of the literature. Responding to the questionnaire took 15-20 minutes of the class time.

Results

Data were analyzed to find how our *clinical experiences impact* the preparation of elementary teacher candidates. We discuss here the major findings of our research endeavor. Approximately 85% of the teacher candidates agreed or strongly agreed that the clinical experience had changed their beliefs about teaching and learning.

Approximately 89% of the teacher candidates agreed or strongly agreed that clinical experience provided them opportunities to observe models of exemplary practice.

Approximately 85% of the teacher candidates agreed or strongly agreed that the clinical experience increased their pedagogical knowledge and subject matter knowledge.

Approximately 46% of the teacher candidates agreed or strongly agreed that the clinical

experience provided them opportunities to learn characteristics of students with disabilities. Approximately 89% of the teacher candidates agreed or strongly agreed that the clinical experience provided them opportunities to learn classroom management skills. Approximately 93% of the teacher candidates believed that clinical experience played a significant role in their teacher preparation. Approximately 90% of the teacher candidates agreed or strongly agreed that clinical experience had sharpened their observational skills and helped them gain confidence in their ability to impact pupil achievement. Approximately 68% of the teacher candidates agreed or strongly agreed that they perceived themselves as members of a professional team and enjoyed the same status as their collaborating teacher. A significant number of the teacher candidates commented that they would like to spend more time in their field placement and that they would like to do more teaching. Here are some sample comments of teacher candidates.

“It was nice but we did not spend every working moment there, we were there barely enough for it to be efficient”.

“I think it would be more useful to go more times a week. I really got a lot out of It”.

“more actual teaching, more involvement”

“We only get to see half of a day once a week, it is a snapshot rather than the big picture...”

“go more often, get as involved as possible”

The findings of our study should be interpreted with caution. It has limitations of small sample size, sample of convenience, and experimenter bias. Additionally, the reliability and validity of our questionnaire remains unknown at this time. Despite caveats, the study is significant. It has looked at the impact of clinical experiences on our

elementary teacher candidates. Clearly, a clinical experience indeed represents a very fundamental component of a teacher preparation program.

Application for Teacher Educators

Our presentation has relevance for teacher educators. We share with our fellow teacher educators the major elements of our clinical experience. We discuss the findings of our research endeavor with them. Our data suggest that our clinical experience represents a successful practice of teacher preparation. However, as several of our teacher candidates have indicated we need to increase the duration of time our elementary teacher candidates spend in the field. And we also need to help our teacher candidates and collaborating teachers develop more respectful relationships in which each holds equal status.

Relationship to Conference Theme

Our presentation has relevance for the conference theme. Our clinical experiences and research are indicative of University/Schools collaboration. Through our presentation, we send a message that continued collaboration and engagement are essential for the education of all children.

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