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"Mutually Beneficial": Developing a Clinically-Based Teacher Education Partnership with K-12 and University Partners

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Abstract: This paper analyzes the collaborative efforts of one school of Education and leaders from three of its local school districts to design a shared clinically-based teacher education experience. Intentionally foregoing any initial planning, leaders from each sphere spent a year meeting monthly to design each aspect of the program through shared decision-making. Using a sociocultural approach together with Cultural-Historical Activity theory, I share an initial analysis describing features of how the group worked to define effective teaching, set goals, design a program, create assessment tools and, ultimately, enact their desire to create a mutually beneficial program, one that would strengthen both K-12 and university learning goals through input, influence, and action from each other.

Key Words: Clinically-Based Teacher Education, K-12- University Partnership

The field of teacher education is undergoing large shifts. A focus on dismantling traditional theory-practice divides (Feiman-Nemser & Buchmann, 1985; Zeichner, 2010) that have often characterized teacher training has led many institutions to call for the design of programs that more intentionally link the theories and practices taught in universities to the on-the-ground work of teaching and learning (Darling-Hammond, 2006, 2010; Gutierrez & Vossoughi, 2010). Yet the development of such programs – often called "clinically-based" models (Levine, 2010) – is not always simple. History, tradition, logistical constraints, and, at times, egos, have too often kept professionals working in these separate but intricately-linked spaces from interacting much beyond the student teaching semester (Sykes et al., 2010; Labaree, 2008). In the face of such common barriers, it is important to share instances when professionals from both environments choose and are institutionally supported to work together to design mutually beneficial clinical experiences for pre-service teachers.

This paper shares the collaborative efforts of one school of Education and leaders from three of its local school districts to design a shared clinically-based teacher education experience through a Cultural Historical Activity theory (CH/AT) perspective (Cole and Engestrom, 1993; Cole 1996). Intentionally foregoing any initial planning, leaders from each sphere spent a year meeting monthly to design each aspect of the program through shared input and decision-making.

By examining how the collaboration was formed as well as the content of its meetings, I share an analysis of some features of how the group worked to define effective teaching, set goals, design a program, create assessment tools and, ultimately, enact their desire to create a mutually beneficial program, one that would strengthen both K-12 and university learning goals through input, influence, and action from each other. To that end, I asked: What features of the collaboration (tools, subjects, objects, rules, division of tasks, community) encouraged and stalled progress around shared goals?, and How did group members' different activity systems of origin (university or K-12 environment) influence their perspectives?

THEORETICAL FRAMEWORK

The theoretical framework of this analysis employs a sociocultural perspective (Vygtosky, 1978) and Cultural Historical Activity theory (CH/AT) (Cole and Engestrom, 1993; Cole 1996). Through these lenses, I examine the ways participants from different institutions created and used tools in the space to accomplish shared goals; developed communal, yet evolving, rules to govern interactions; divided tasks; and built a sustaining community for ongoing collaboration (Engestrom, 1999). The creation of this collaborative team provided a unique activity system to study. Because the meetings took place monthly over the course of a year, each meeting affected subsequent interactions and the history of the group itself mixed with the personal contexts of each participant to create a distinctive unit of analysis. A CH/AT perspective views contradictions as important sources of change and development, and, thus, this unit of analysis provided rich ground for studying how members with multiple points of view and sometimes contradictory perspectives can negotiate within tensions to achieve shared goals.

METHODS

All members of the collaborative team agreed to be participants in this study. The participants included district level professionals from three local school districts, principals from each school site where pre-service teachers would be placed, and one of the teachers that would be mentoring pre-service teachers onsite. Participants from the university included Deans of Education, Methods course faculty, Field Coordinators, Department Chairs and two appointed clinically-based program design "chairs" from both the Elementary department and Secondary department. The author of this paper served as the Secondary chair for the clinically-based project, thus taking on the role of a participant observer. Halfway through the year, the large group began to split into elementary and secondary teams after an initial gathering.

Primary sources of data included recordings of the conversations at monthly meetings, recorded interviews with group members halfway through the year, artifacts from meetings (e.g. agendas, brainstorms, shared definitions), and analytic memos written after each meeting. This was a case study using ethnographic tools as a participant observer (Hammersley & Atkinson, 2007; Holy, 1984). This role afforded both greater access to and insight into group dynamics while also raising the possibility of researcher bias. Data analysis included coding transcriptions of all recordings by noting patterns that related to research questions, using codes to identify key features of the partnership, and writing detailed memos about themes and patterns, the frequencies of those patterns, and to document representative examples.

FINDINGS

Analysis demonstrated factors that both propelled and stalled progress towards the creation of this clinically-based teacher education experience.

CHARACTERISTICS OF PARTICIPANTS AND SHARED INVESTMENT

Most participants were enthusiastic about the possibilities of clinically-based teacher education and were happy to accept invitations to help design the program. The Dean of the School of Education invited university faculty and school district personnel who he felt would be receptive to the concept and interested in the intellectual challenge of an innovative, shared design process. The Dean's influence on the makeup of the group was paramount. District personnel, in turn, invited principals who they felt would be open to the collaboration who, in turn, invited interested teachers. As the net of necessary participants grew, group members discussed the importance of creating "investment" in the concept and making sure that all participants, regardless of when they joined the meetings, felt their voices were vital to the creation of the program. Most participants noted their enthusiasm for the clinically-based concept, their enjoyment of the process of collaboration, and their pleasure at engaging in intellectual discussions of teaching and learning with a group beyond their usual colleagues. In interviews, district principals shared comments such as, "I love these meetings; they are my intellectual break from the daily stress," and, "Looking back to where we started to where we are now, we're comfortable with one another, people are able to speak how they feel and know their opinions will be accepted...I hope that some of these relationships continue when we're not meeting on a monthly basis anymore."

BIG IDEAS FIRST

Initial meetings focused on big ideas and creating shared language around effective teaching before moving on to the details and logistics of how the program would work. The first meeting included discussion of what it means to experiment, design iteratively, and move beyond traditional notions of how teacher education and K-12 learning should be enacted. Subsequent meetings involved brainstorming shared definitions of effective teaching, researching other clinically-based models, and imagining best-case scenarios before sharing potential reasons why those ideas might not work. Beginning with big ideas seemed to allow participants to get to know each other's values and experiences in education before more difficult design questions surfaced, and also created shared tools that participants' could draw on when bumping up against ideas that ran counter to current university and K-12 systems. Participants noted that, "Doing the research was fascinating to me, to just see what's going on in other parts of the country." Another shared that, "How we just broke everything down and just started, from the very beginning – let's get acquainted with each other – and then let's figure out each perspective, I loved that. And then, even, making the graphic...it's been great to see what it is and know the thought process behind it ...and getting the language, it's cool."

INSTITUTIONAL CONCERNS AND CONSTRAINTS

Even with a concerted effort to forgo concerns over existing institutional structures at both the university and K-12 levels, integrating innovative design elements into existing university and school systems proved difficult. From the beginning, logistical concerns and institutional practices and policies entered into most "Big Picture" thinking activities, showing how the design of the program was situated within social contexts and mediated by entrenched tools within those

contexts. Particular group members often brought up institutional policies and systems that had the potential to conflict with the design team's plans. Although these were important concerns, they often derailed planned conversations into discussions of the intricacies of each system's bureaucracy. During an exploration of different models of Professional Development Schools, for instance, a faculty member noted that "one small group... didn't want to stop talking, but wanted to dive straight into logistics." At one point, a district principal noted that "bus schedules and lunch schedules rule the world."

K-12 PARTICIPANTS SAW FEWER CONSTRAINTS; UNIVERSITY CONCERNS WIELDED MORE POWER

District personnel were often more willing to see possibilities and to consider flexibility in program design. University personnel often seemed more concerned with the implications of changing course work, timing, and recruitment procedures. University participants brought up more constraints more regularly, and K-12 participants asked about University constraints regularly, giving university practices more perceived power during the process. One district principal noted, "It's been interesting to see all the potential difficulties that could get in the way and how you have to logistically work through all of those. Where in the beginning I would have been thinking, 'Okay, you create your program, and let's go do it.' But it's not that easy....I think [K-12 Schools] have fewer restrictions."

BEHIND-THE-SCENES WORK

Although decision-making was shared, the Secondary chair of the clinically-based team did considerable drafting work between official meetings once the groups split into elementary and secondary teams to facilitate the specific logistics of each program. Once the secondary group mapped out big program goals, she took on the work of creating initial drafts of the competencies pre-service teachers would be accountable for each semester and the curriculum for each semester's classes – the major tools of the clinical experience. This allowed the larger group to critique and revise these documents at their monthly meetings rather than writing them from scratch. This behind-the-scenes work had the benefit of allowing the group to work more efficiently; however, one person's interpretation of group ideas (a university participant) became the starting point for the embodiment of those principles into a concrete curriculum.

DISCUSSION

In this overview, I share details of a messy, yet potentially instructive journey of educators from two different spheres working together to create a mutually beneficial partnership to enhance teacher education. Members of the collaborative team found that it took time, money, investment from administration, and the willingness both to share and to negotiate the ways they, individually, envisioned the program. Although difficult at times, group members overwhelmingly described their enjoyment of the process and the positive experiences they had intellectually engaging with colleagues from across the "theory-practice divide." Groups who are interested in similar collaborative work should consider the following suggestions while preparing for partnership work:

• Prepare for systematic constraints to be a constant part of the process despite intentional focus on keeping them out. Developing patterns and protocols to deal with the surfacing of potentially derailing constraints is suggested, especially early on in the process.

- Consider how to balance the need for a strong facilitator and the need for shared investment. Decide how shared tools will be created in advance.
- Consider ways to sustain community over iterations of the program.

At a time when many schools of education around the country are faced with similar imperatives to design teacher education spaces that purposefully link the theoretical and practical worlds of teaching, sharing the successes and failures of this collaboration is both timely and useful. It can offer an example ripe for revising in other contexts, as well as a model for the professional benefits of engaging beyond the walls of our own institutions with those colleagues whose work is intricately linked with our own.

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