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Developing a Clinical Literacy Experience That Improves Outcomes for Students and Preservice Teachers

Abstract

Improving literacy outcomes so more students graduate from high school career- and college- ready is critical in today's society. There is a wealth of evidence-based practices for teachers to utilize and yet student literacy outcomes fail to improve. This article provides an example of how a clinical model literacy clinic, housed in a partner elementary school, improved learning outcomes for preservice teachers and the at-risk students they instructed. During this twice weekly, semester-long literacy clinic, the preservice teachers explicitly taught all five critical literacy components to support struggling readers with the focus on using high-leverage practices for instruction. This taught the preservice teachers both the "what" and "how" to teach struggling readers. This program supported the needs of a partner school while developing new teachers confident and prepared to meet the literacy needs of struggling readers.

Keywords

literacy, high-leverage practices, preservice teachers, explicit instruction

Cover Page Footnote

Susan Keesey, Charley Jo Allen, Madison Loy, and Amanda Schaefer, School of Teacher Education, Western Kentucky University. Correspondence concerning this article should be addressed to Susan Keesey, School of Teacher Education, College of Education and Behavioral Sciences, Western Kentucky University, 1105 Gary A. Ransdell Hall, 1906 College Heights Blvd. #61030, Bowling Green, KY 42101. Email: susan.keesey@wku.edu High-Leverage Practices (HLPs) in Special Education were developed as the result of a large-scale collaborative effort of special education organizations and professionals searching for the key practices essential for effective special educators. Educator preparation programs are charged with developing meaningful learning opportunities for preservice teachers to develop and integrate these 22 critical skills in their teaching practices (Sayeski, 2018). This article provides an example of how HLPs can be incorporated into a literacy clinical experience that supports learning for both the preservice teachers and the at-risk elementary participants.

Critical Need for Teachers Equipped to Reach All Students

Developing new teachers with strong knowledge of HLPs and evidencebased practices for effective literacy instruction is critical in meeting the challenge to graduate more college- and career-ready adults. Currently, only 37% of high school seniors are proficient in reading, a percentage consistently below the original data recorded in 1992 (National Assessment of Educational Progress, 2016). Even more concerning, this percentage does not include the many struggling readers that never make it to twelfth grade.

There are differing opinions as to why so many students continue to struggle; however, teachers, including both general and special educators, consistently report feeling underprepared to meet the instructional needs of students struggling with reading, writing, and language (Moats, 2009). This uncertainty is confirmed when analyzing teachers' knowledge of language and literacy (e.g., Moats & Foorman, 2003; Spencer, Schuele, Guillot, & Lee, 2008) and the problem is compounded because it is difficult for teachers to successfully teach what they do not truly understand (Moats, 2009). Furthermore, teachers often overestimate their literacy knowledge and those struggling with literacy instruction often fail to implement best practices (Cunningham, Zibulsky, K. Stanovich, & P. Stanovich, 2009). This lack of knowledge regarding language and literacy is consistent for both novice and experienced teachers; veteran teachers are no more knowledgeable than their beginning colleagues (Brady et al., 2009), confirming the importance of preservice teachers graduating with the skills to meet the literacy needs of struggling learners.

Educator Preparation Programs Making the Difference

Educator preparation programs must take responsibility for developing preservice teachers with the pedagogy, skills, and confidence to effectively teach *all* students, including exceptional students and those from diverse backgrounds. Research is very clear regarding the essential instructional components required to support struggling readers. The meta-analysis completed by the National Reading Panel (NRP, 2000) provided research consensus for the five critical components that must be taught to prevent reading difficulties (i.e., Phonemic Awareness, Phonics, Fluency, Vocabulary, and Comprehension). Research continues to confirm the NRP findings and provides evidence-based interventions to support learning in these key areas while also highlighting the importance of explicit instruction that is systematic and cumulative (e.g, Coyne & Koriakin, 2017; Ehri, 2014; Keesey, Konrad, & Joseph, 2015; Moats, 2010).

Similar to the NRP charge to determine what to teach, in 2014, the Council for Exceptional Children and the Collaboration for Effective Educator Development, Accountability and Reform (CEEDAR) Center partnered to define the skills and practices special educators need to effectively teach and support exceptional students. A 12-person writing team selected 22 high-leverage practices (HLPs) divided into four main areas (i.e., collaboration, assessment, social/emotional/behavioral practices, and instruction) that "represent the essence of effective practice in special education" (p. 12, McLesky et al., 2017). The goal in developing these HLPs is to provide those teaching and supporting beginning educators a cohesive focus for instruction.

Incorporating High-Leverage Practices in a Clinical Setting

High-leverage practices were developed under the context of two key ideas. First, learning occurs best when provided lots of targeted, and repeated, practice opportunities with support and feedback so preservice teachers can improve their craft under the guidance of experienced coaching. Second, special educators must be problem solvers that can effectively use evidence-based practices and monitor student performance using the data to make instructional changes as needed (McLesky et al., 2017). Clinical teaching models should be designed to incorporate both these ideas while nurturing the development of HLPs in the preservice teachers' experience. An example of the union of HLPs and the NRP recommendations regarding literacy instruction for struggling learners is a literacy clinical experience housed in an elementary school that is highly diverse with 100% free and reduced lunch. The purpose of the partnership is to improve learning outcomes for both the preservice teachers providing instruction and the elementary school participants.

The preservice teachers instructing in the literacy clinic are seniors completing their final clinical semester prior to student teaching. They are dual majors, seeking certification in both elementary and special education, having completed two prerequisite literacy courses and this final literacy course focuses on explicit instruction for struggling readers. The students receiving one-on-one, semester-long instruction, are first and second grade struggling readers; they may be English Learners and/or have a disability. Each preservice teacher is paired with a student and they work together twice weekly, in 45-minute sessions, for the entire semester. There is a maximum of 10 student-teacher pairs in the clinic at one time and the instruction is supervised by a special education professor.

The preservice teachers spend half their class time in literacy clinic and the other half focusing on learning the English language structure and how to effectively implement evidence-based literacy practices. Balancing instruction with practice opportunities is key. A preservice teacher explained, "The English language is extensively taught to every preservice teacher. Thanks to this program I now understand how the English language system works and have strategies to teach it effectively." The school principal commented that this format allows the preservice teachers to "contribute to the learning in the classroom while learning the skills they need to be successful professionals." It also supports the learning environment recommended for HLPs by providing repeated practice with feedback along with problem solving opportunities by progress monitoring the effectiveness of evidence-based practices and making instructional adjustments based on student performance (McLesky et al., 2017).

More specifically, the format of literacy clinic teaches the preservice teachers to incorporate evidence-based practices from all five components recommended by the NRP (2000) into their 45-minute lessons while practicing HLPs from all four areas. The preservice teachers begin by collaborating with their student's classroom teacher to learn about their new student (HLP1). Next, this information is combined with multiple assessments to determine the student's strengths and areas needing improvement (HLP4). Formative assessment is used throughout every lesson to measure student learning, determine the effectiveness of the evidence-based practices, and decide when to move on or intensify instruction (HLP6). Developing these teaching skills requires considerable coaching, practice, and self-reflection. A pre-service teacher explained, "Preservice teachers improve on self-reflection and can then make appropriate adjustments to instruction in order to maximize student success."

Setting up the appropriate learning environment and promoting positive behavior is also critical in improving student outcomes. The format of literacy clinic is consistent throughout the semester providing both the preservice teachers and their students an instructional routine with many practice opportunities (HLP7) and the preservice teachers constantly provide positive and constructive feedback to their students (HLP8). Creating this positive learning environment allows the preservice teachers to focus on the fourth area of HLPs, instruction.

Instruction begins by developing learning goals (HLP11), translating the goals into student-friendly language, and sharing the high, but achievable, expectations with the student. Once goals are set, the preservice teachers create an aim line with their students and develop systematic and sequential instruction to

meet the goal (HLP12). Lesson plans are developed and instructional changes are made as needed (HLP13) based on data collected through progress monitoring. "Not only do we collect data throughout the lesson, we teach our students to self-monitor their progress to provide motivation for them to continue to work hard."

Teaching new skills to the students is achieved through explicit instruction utilizing the "My Turn-Together-Your Turn" format (HLP16) with scaffolding (HLP15) faded as students demonstrate learning. Students are constantly engaged (HLP18) in this intensive instruction (HLP20) and new skills are incorporated with previously learned material (HLP21) to help support new learning while maintaining previously mastered skills. This intensive learning experience results in gains for both the preservice teachers and their students because of the constant feedback provided to all the learners (HLP22). A preservice teacher explained the impact of this type of intensive, targeted clinical experience:

Literacy clinic completely changed who I am as a teacher. I can create effective 45-minute literacy lessons individualized to meet unique student needs. My ability to progress monitor is something I am comfortable with, a critical skill as I begin teaching special education this Fall. I cannot think of an experience that had as much of an impact on me.

Another preservice teacher commented, "The program really allowed us to learn and grow as educators." This is critical as educator preparation programs work to develop teachers prepared to improve literacy outcomes for all students, especially struggling readers.

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