Preservice Teachers’ Reflections on their Home-School Clinical Teaching Experience: Evidence to Support An Alternative Field Experience for Teacher Educators

Brett Everhart and Robert McKethan

Abstract
Teacher education programs continue to search for alternative field experiences for pre-service teachers. Whether the public schools are overloaded with interns or a break from certain schools is recommended for various reasons, it is important to identify appropriate alternative practice teaching opportunities prior to student teaching. With the continued increase of home-schooled students, it appears that the homeschooled population would be able to benefit from appropriate physical education instruction if those who instruct meet the conservative group’s criteria for working with its children. In addition, it appears that preservice teachers can work with real students in a consistent, on-going teaching experience if home-schooled students were to come to the teacher education program for instruction. Physical education teacher educators have begun to organize various clinical programs with home-schooled students. These practice opportunities enable the preservice teachers to plan, teach, and assess student learning on a regular basis before reflecting on the teaching-learning process which has taken place. This paper is designed to provide evidence that a clinical teaching experience with homeschooled students is an appropriate, alternative field experience. Because reflections of preservice teachers are similar to the reflections from other field experiences in the literature, the authors suggest that the home-school clinical teaching experience meets needs of teacher education programs as an alternative field experience.

It is clear that home-schooling is increasing rapidly in terms of student numbers all around the country. The numbers of students have grown from 300,000 registered home-schoolers in 1986 to close to 1.5 million today (Guterson, 1998; Kantrowitz & Wingert, 1998). With that increase have come concerns for the students’ needs for opportunities to socialize with other young people as well as for the quality of the education they receive. Programs are springing up all over the country to involve home-schoolers in various educational assistance efforts. Cooperative groups work together to provide academic expertise in an arrangement which allows parents to share expertise to enable students to have access to more effective and appropriate instruction. Also, universities and churches are providing resources and programs to assist curriculum and instruction in academic areas as well as provide extra-curricular experiences for students educated at home. Physical education is often overlooked as an organized academic experience for these students. Many parents opt for their children to participate in city recreation leagues or professional establishments designed to teach one specific activity such as swimming, dance, or gymnastics. Such arrangements often count as physical education
credits for the home-schoolers. With the increase in students being educated at home, teacher education programs now have an opportunity to provide more teaching experiences for preservice teachers (PTs). Having PTs plan and teach physical education lessons to home-schooled students would help all involved. It would provide a worthy service to the home-schooled community and children as well as providing teaching experience and practice for PTs. An influx of field experiences continues to be a problem many teacher education programs face. Using an alternative field experience is something that would help these programs provide more teaching opportunities, but the experience needs to be appropriate. Comparing a home-schooled experience with other reported field experiences would be a method of determining whether or not an alternative field experience would be appropriate. What would such a field experience consist of with home-schooled students?

Appalachian State University is in the sixth year of providing organized physical education classes to a local home-school association (Everhart, 1998; Everhart & Harper, 1997; McKethan, Everhart, & Herman, 2000). This program, known as the ASU Home-School Physical Education Program, not only has provided home-schoolers with appropriate physical education experiences twice a week at the university, but it allows PTs to gain quality teaching practice prior to student teaching. The literature has focused on the initial set up of the clinical program the first year, the perceptions of parents, students, and PTs about the program, and how to integrate other teacher education courses within the clinical program. Is such a program worthy of implementation by other teacher education programs? In order to begin to answer this question, this paper is designed to (a) demonstrate how the reflections of PTs in this program are similar to those in other field experiences (public-school, peer, etc.) and (b) show the types of reflections which come out of such a program in terms of student outcomes and teaching analyses.

Over the course of a year, PTs who planned, taught, and assessed within the clinical K-12 program were required to keep reflective journals. From these journals, reflective categories were developed from recurring themes and trends in their reflections were placed within the specific categories. The following is a description of the reflections of the PTs about their personal teaching performances. The common categories which emerged from 20 PTs’ journal reflections were divided with quotes, paraphrased comments, and summaries being included within each category. The categories include: (a) peer and self-assessment; (b) student enjoyment; (c) behavior, (d) lesson reflection; and (e) student performance. By reading what the PTs think about their teaching performances, perhaps teacher educators and others can begin to get an idea whether or not this alternative clinical population is one to pursue for training teachers. These reflections were compared with the journal entries of students who were involved in teaching experiences at a public high school and in a peer-teaching lab experience. The reason for the comparison is to highlight the similarities of the different types of field experiences so as to demonstrate that the home-school program is an appropriate alternative for those needing more field experiences in the teacher education program. We believe that the reflections are similar to those in other field experiences reported in the literature, but in this time in which colleges of education and others are clamoring for more appropriate field experiences, the home-school clinical teaching program would fit in nicely within a teacher education program.

Categories and Reflections

The first part of each section will be solely generated from the current home-school clinical program. After describing the perceptions and reflections of the PTs, a section follows with
credits for the home-schoolers. With the increase in students being educated at home, teacher education programs now have an opportunity to provide more teaching experiences for preservice teachers (PTs). Having PTs plan and teach physical education lessons to home-schooled students would help all involved. It would provide a worthy service to the home-schooled community and children as well as providing teaching experience and practice for PTs. An influx of field experiences continues to be a problem many teacher education programs face. Using an alternative field experience is something that would help these programs provide more teaching opportunities, but the experience needs to be appropriate. Comparing a home-schooled experience with other reported field experiences would be a method of determining whether or not an alternative field experience would be appropriate. What would such a field experience consist of with home-schooled students?

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Over the course of a year, PTs who planned, taught, and assessed within the clinical K-12 program were required to keep reflective journals. From these journals, reflective categories were developed from recurring themes and trends in their reflections were placed within the specific categories. The following is a description of the reflections of the PTs about their personal teaching performances. The common categories which emerged from 20 PTs’ journal reflections were divided with quotes, paraphrased comments, and summaries being included within each category. The categories include: (a) peer and self-assessment; (b) student enjoyment; (c) behavior; (d) lesson reflection; and (e) student performance. By reading what the PTs think about their teaching performances, perhaps teacher educators and others can begin to get an idea whether or not this alternative clinical population is one to pursue for training teachers. These reflections were compared with the journal entries of students who were involved in teaching experiences at a public high school and in a peer-teaching lab experience. The reason for the comparison is to highlight the similarities of the different types of field experiences so as to demonstrate that the home-school program is an appropriate alternative for those needing more field experiences in the teacher education program. We believe that the reflections are similar to those in other field experiences reported in the literature, but in this time in which colleges of education and others are clamoring for more appropriate field experiences, the home-school clinical teaching program would fit in nicely within a teacher education program.

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comments from PT, studied on other field experiences earlier.

Peer and Self-Assessment

Self-assessment and peer-assessment are processes based upon theories and research presented in the specific teacher education curriculum. Formal evaluation of teaching performance is a participatory process initiated by the class instructor and engaged in by the preservice teacher. Formal appraisal tools included the systematic observation software package Behavioral Evaluation System and Taxonomy (BEST) (Sharpe, 1997; Sharpe & Koperwas, 1999) and the North Carolina Teacher Performance Assessment System (TPAS; Edwards, 1998) for appraisal A by-product of class instruction and formal teaching appraisal was the reflective process which took place at the conclusion of lessons by the PTs in the clinical program. Typically the interns reflected upon activity choices, time management, management of student behaviors, game tactics, and lesson pacing. Through the reflective process, PTs are able to identify problem areas within instruction. These reflections assist in improving subsequent teaching. This is particularly clear in the following comments from a preservice teacher who was struggling to balance instruction and active participation.

I am just continually struggling with instructional time. The students end up bored and disruptive, which is not good for anyone’s nerves. I hope to find a way to reduce today’s instructional time by half.

Another preservice teacher commented that the students were put into game play before they were instructed about positions and spacing in floor hockey. She said “All of the kids wanted to hit the ball and it looked like bees following the honey.”

A number of PTs were able to assess the performance of students within each lesson without prodding of the teacher educators in charge of the clinical field experience. That is, some considered it a mural progression to integrate assessment within the teaching process. Two examples demonstrate this clearly.

I utilized many different types of movement patterns to secure the children’s interest and attention. For instance, one time down (the floor) the children had to bear-crawl and then crab-walk back. This allowed me to evaluate all of the students’ movement patterns as well as their muscular strength and endurance.

We moved on (from one activity) to making them dribble while walking. They did well on this but (one child) especially had trouble. She would dribble (way out in front of her) and run after it instead of dribbling straight up and down. She would hit her own feet when she dribbled straight down. I wish we had more time to work with them on these skills.

Student Enjoyment

In our experiences with students with unit plan and lesson plan preparation, indicators of affect are often secondary to psychomotor, cognitive, or tactical objectives. PTs often neglect affective instruction. However, their journal entries illustrate great concern that the home-school students enjoy their physical education experiences. PTs typically used the level of participation or cooperation as an indicator of how the home-schooled students enjoyed the activities within the lessons. The PTs rarely discussed comments made by the students or other non-verbal indicators of enjoyment. Another PT suggested that enjoyment may be derived from effort as well as from successful participation. However, some of the comments appeared insightful and provided a picture of their views on student enjoyment.

We implemented an attitude assessment rubric in this class and I was pleased with
the results. Our class displayed a great willingness to participate and they seemed to be enjoying the days' activities. I saw a lot of improvement during this lesson from the first one. Most of the students who had been struggling were beginning to develop their skills. I think the lesson was developmentally appropriate.

Often PTs drew conclusions about enjoyment through less concrete methods. The following reflection illustrates this point.

(In a jump rope activity) We attempted jumping rope, using two feet at a time. Most of the students were not coordinated enough to achieve this successfully, but had fun trying.

The students bad fun today because (a teacher) does a good job of teaching them and they like him. He makes it fun and interesting.

PTs' reflections rarely discuss comments of students or other indicators of enjoyment. However one might infer from PT reflections here that student activity participation as well as other factors (laughing, smiling, student interactions and rapport) contributed to PTs assessment of enjoyment.

Behavior

According to the reflections of our PTs, student enjoyment is linked to general categories of student behaviors. Also, PTs' reflections appear to link the quality of student behavior to their own enjoyment of teaching. The following reflection depicts the overall attitudes of the home-schooled students as well as the consequences of lessons planned without appropriate progressive pacing.

One little girl (name) is not very talented in basketball. Her interests lie in gymnastics and skating. She keeps her head up, a smile on her face, and keeps trying, though.

Students quickly became bored with the activity and it left them standing around quite a bit. I moved on to talk about control with the students and set up stations to reinforce the concept.

That is not to say that discipline problems were not present. Some behaviors were anticipated while others were rather unexpected.

I had to put (two boys) in time out today. The threatening stage was over. We took action today. I think it straightened out (one boy) but (the other) is in his own world most of the time.

I was about to pull my hair out after today. I was excited about my fitness plan for the day. I did the "race car fitness" game. It is where we run around the track like race cars and stop for a pit occasionally. When we pitted, we did different exercises. (An example would be jumping jacks represent cleaning the windshield). Well, when we were running and racing around, a kid in the front decided to have a wreck. Every other kid piled on and we had a major pile-up. They thought it was funny, but I about (messed) in my pants because I was afraid someone would be hurt.

Lesson Reflection

This category was recorded more than any other category in the journals. It appears that the first thing the PTs think about when writing in their journals is to describe how the lesson felt to them in terms of student success. Sometimes, the descriptions are too vague or general, but some of the PTs provide more detail as to why they felt the lesson was good or bad. It is possible to pin an of the overall attitudes of most of the home-school students also by reading these comments.
The children really liked moving from the small balls up to the larger ones. By moving in this progression, the children saw getting to use of the large ball as a reward for accomplishing the little balls. Success builds success!

Today’s class went really well. Students followed directions, placing the ball in between their feet when I said stop, and all eyes and ears were on me. They were really eager to hear the next challenge. The majority of the students had high success rates handling the ball.

Sometimes the reflections demonstrated a need to adjust a lesson for more student success the next time. The following reflection entry after the adjustment has been made then indicates a more satisfactory response from the preservice teacher.

I was pretty nervous about being observed. This day really did not go so good if you look at my activities. Our students could not even hit the ball back and forth under control. The circle drill I had planned was a complete disaster. The next thing I had planned was a game called “Four Square.” This game really did not go as well as I had planned. This was not the best day for my activities to go bad. I guess that is what can happen on any given day.

(The above PT now refers to the subsequent lesson) I had a game of “Four Square” set up with bigger squares. This helped the students with the idea of court coverage. I could really see the improvement by some of our students. The majority of our students had success with this game.

**Student Performance**

It appeared that the home-schooled students started out needing work in many of the sport-related areas, but with work they made significant improvement. The younger children seemed to pick up on the motor skill activities quickly. This contrast between initial performance in younger and older children may be due to the number of now students in the program in the older classes while all of the younger children are starting from scratch at the same age as kindergarten students in the public schools. That is, many of the younger students were at similar ability levels while the older students had varying ranges of abilities which proved more apparent to the PTs.

Today we started on volleyball. We went over the bump or forearm pass. Most of the kids used good technique but they had problems with how much force to use when hitting the ball. Most of them tried to hit the ball too hard and the ball got out of control. By the end of class, most of the kids had adjusted and were using appropriate force.

Often, the performance of students dictated within-lesson adjustments. The following reflection illustrates the point.

I planned to play a game called “Third Down” where each team has two plays to score. So first we divided the class into two teams. Then with each team we had them work on lining up, playing each position, hiking, running routes, etc... We had them rotate positions each play and let them make up plays. Then we brought them together and played the game. The game was great and they really got into it. They had some trouble completing passes so we let a teacher be quarterback.

Today I was in charge of video... I noticed more with the camera how differently each student moves. When you watch one at a time it is easier to determine what they are good at and what they need improvement on.
Summary of Reflections on the Clinical Experience with Home-Schoolers

Many PTs described the benefits of an experience in which they are in charge of planning, teaching, and assessment. Their positive comments were consistent across the board. Some felt they would be better prepared than other teaching majors on campus because of the practical "hands-on" nature of this clinical experience.

I have enjoyed working with the home-school students this semester. Many education majors never have the opportunity to teach during college. Physical education majors are lucky that we have the hands-on opportunities to teach while in college.

I will miss these children tremendously because this was like my first class. I feel like all of them will be successful and I hope that I was apart of that success. It has been a long semester that is finally over. I am both mentally and physically drained. I guess it is now time to begin preparing myself (for student teaching).

I have really enjoyed working with both the students and my peers. I have found a lot of neat activities that I can use in my own program just by watching my peers and the different activities they used. I feel very comfortable with my teaching. The experience I have received working with the home-schooled children has both raised my confidence in becoming a competent teacher as well as given me many ideas that I may carry with me into my own program as a physical education teacher.

Unexpected Distractions

An area not discussed earlier in this paper had to do with unexpected distractions. It was not included within the common categories since only a few of the PTs mentioned distractions. It was encouraging to see PTs realize that at times they will have to adjust plans for unexpected situations which arise that other subject matter teachers often do not have to address. Examples include school pictures invading the gymnasium for the day, school assemblies and testing interrupting the normal flow of the day-to-day activities of the physical educator. These are some of the realities of teaching that teacher education programs have difficulty simulating; therefore, it was worthwhile to describe what a few PTs thought about the unexpected distractions.

Today was an absolute disaster. I had the main lesson and I was planning to do racket skills. We got a little thrown off today because of the fitness testing. We, of course, have the five and six year olds so we were unaffected by the fitness testing except for the fact that we had to relocate. We were up on the balcony. I was a little paranoid of them getting away and falling off the balcony. We are used to having them confined in the wrestling room. They were much more distractable and my lesson didn’t help much either. There were balls flying all over the place and cramped conditions made it hard to teach. The kids just seemed wild today for some reason. I hardly followed the lesson plan at all.

Other reflections illustrate less dramatic PT response to unexpected changes in instructional environments. The following reflection illustrates this point and provides a philosophical perspective for the need for flexibility.

Today we had to go outside because of a concert in the gym. This made for distraction like people and cars going by and (being) by the creek.

Everyone was in (a different site) because (someone) forgot to cancel lab since the gym was being used (for a different
university function). Since the gym was being used, this caused total confusion. However, we all packed in and had about 10-12 classes going at the same time. This was a good experience for us, because we never know what will happen to us when we get out here and start teaching our own classes.

Often, in clinical experiences, a routine may not allow for students to develop flexibility in dealing with unexpected changes. Unfortunately, unexpected scheduling changes due to unforeseen events do take place. Also flexibility in addressing the unexpected situations improves with experience. When they occur in a clinical setting, PTs have opportunities to experience the need for flexibility.

Comparative Comments from Other Clinical Settings

Whether using experimental teaching units (ETU’s) (Everhart & Turner, 1996; Graham, Soares, & Harrington, 1983; Landin, Hawkins, & Weigand, 1986; Pieron & Graham, 1984) or clinical teaching experiences in the public schools (Allison, 1987; Barrett, Allison, & Bell, 1987; Curtner-Sanitth, 1996; Dodds, 1985; Everhart & Turner, 1996), how PTs view outcomes from those experiences is important. For one thing, it is important in relation to this paper in order to determine the of an alternative field experience using home-schooled students as the “clients.” That is, if perceived outcomes from home-schooled lessons are similar to those reported earlier in the literature, then it may be possible to say that a field experience with home-schooled students is an appropriate practicum in teacher education programs.

Conclusions from previous work suggests that PTs are finding out similar realities in both other field experiences and the home-school clinical teaching experience. Allison (1987) concluded that teacher education programs could teach PTs to analyze skill better and that observations in field experiences can integrate well with the preparation program. Results from more controlled settings (ETU’s, peer teaching lessons, etc.) suggest that PTs can improve various teaching behaviors (feedback, etc.) and student outcomes (ALT-PE related variables) due to teacher educators’ feedback following each lesson (Graham, Soares, & Harrington, 1983; Landin, Hawkins, & Wiegand, 1986; Paese, 1986; Pieron & Graham, 1984). Curtner-Smith (1996) concluded that a well-supervised field experienced based on appropriate theoretical and content-based methods can allow PTs to overcome any negative socialization effects in a public school teaching experience. It is with this in mind that a home-school clinic with real students in a setting conducive to appropriate supervision from teacher educators would enable PTs to “hone their skills” prior to student teaching. This experience does not have to be in lieu of a public-school experience, but nicely supplements that experience.

Comments from preservice physical education teachers have been reported in numerous articles previously. From those recorded comments, it has been possible to determine what PTs gain from various field experiences. However, more field experiences continue to be needed across the country in teacher education programs. By viewing a few sample comments from previous articles depicting reflective thoughts of PTs following other field experiences, it is possible to see whether or not an alternative experience like the home-school clinical teaching program would be a viable experience in teacher education programs. The following are a few comments from PTs reported in other articles:

While most of the students were on task and being productive, there were a select few who never seemed to be doing what was instructed. The more I observed these individuals, the more I realized they were not being disruptive and uncooperative, but they had become bored with the task. These
students were highly skilled and needed more challenge. I learned I must develop variations of every task for those students who get the skill learned rather quickly and become bored. As long as the students are challenged, they stay productive.

* Comment from a preservice teacher following a 4-week unit taught at a public high school (Everhart & Turner, 1996, pg. 64).

The above comment is similar in nature to several of the comments from the home-school clinic in that students were assessing during teaching and noticing that adjustments need to be made so that students are learning appropriately.

Some of the problems encountered in previous experiences, such as the public experience reported by Curtner-Smith (1996) enable PTs to determine what went wrong and why. One preservice teacher reported, “Some aspects of lessons tended to be too simple or complex, pertly because of a lack of knowledge of the skill on my part.” Another comment from Curtner-Smith’s work said described the need to look at notes during a lesson due to the unfamiliarity of the activity. (pg. 244). Finally, Curtner-Smith provided a comment which showed a preservice teacher realizing that a managerial method needed to be adjusted.

I had students spread out over the entire track. This was significant because I could not instruct them without them coming to a certain point to hear me. I need to find better ways to communicate in these situations. (pg. 233).

Many teacher education programs have had peer-teaching experiences for PTs. Even comments from such a controlled setting allow us to see what the preservice teacher says he or she has gained from the experience. In the following comment, the PTs discussed how the experience prepared him for the public schools.

The peer teaching provided me with the confidence in myself to do a better job in the public schools. Unit preparation, daily lesson plans, and most of all, the evaluation of my teaching style and feedback patterns really focused me on where I was weak and needed improvement.

* Comment from a preservice teacher following a 3-lesson sequence with subsequent feedback from the teacher educator (Everhart & Turner, 1996, pg. 64).

**Conclusion**

By studying the comments from PTs after their lessons they taught in home-schooled teaching experiences and other reported field experiences, it is apparent that the home-school clinical experience is an appropriate population group to use for gaining teaching experience for physical education majors. However, this should not be in place of public school field experiences, but rather as a supplement to such experiences. The ASU Home-School Physical Education program enables the teacher educators to determine the specific needs of individual PTs in terms of teaching performance needs, reflective needs, planning needs, assessment needs, or philosophical alignment needs. The benefits of a home-school clinical are multi-fold. (a) home-school students receive appropriate physical education instruction, (b) PTs receive teaching practice opportunities; and (c) teacher educators may assess PTs in a variety of ways not available as easily than prior to such a program. The reflections of the PTs in this paper indicate that the clinical program has assisted many of them in thinking about the act of teaching and the outcomes which follow. These reflections have helped the PTs to modify lessons for subsequent teaching improvement it is obvious that such a program aids PTs in the preparation for the student teaching experience and many PTs indicated that they are not anxious about that
process due to their involvement in the home-school clinical program.

REFERENCES


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