Abstract

Effective teaching conducted by teachers becomes one of the affecting factors toward students’ learning achievement. Effective teaching and learning here is teaching learning process that is locally and educationally relevant and meaningful to the students. However, it is not easy for teachers to fulfill this and that is why they need to do self-evaluation for keeping them moving with the process of adopting, adapting, and mediating the current views in teaching, current needs of the students and the current condition of the school. This paper proposes a practical model for providing clinical supervision to help teachers build their instructional ability by fostering teachers to do self-evaluation of their teaching. This paper also describes the challenges, problems, and practical solutions and strategies for helping teachers build their pedagogic competence in terms of providing English instruction.

Keywords: effective teaching, self-evaluation, and clinical supervision

Introduction

As the learning organizer, teachers hold responsibility to ensure that learning takes place in accordance with the aims and objectives of the lesson. A teacher has to design a set of learning activities facilitating students to gain their best achievement. Teacher’s ability in designing learning activities here is just one aspect of the whole processes of constructing English instruction for students’ effective learning. Teacher’s instructional ability covers preparing instructional plan accommodating students’ condition, organizing and using appropriate instructional materials and strategies, modifying instructional activities to accommodate learner needs, constructing instrument for assessment, and also assessing students’ progress (Ornstein, 2000:51-52). These whole aspects must be prepared and organized well in order to provide students with learning experience that is not only actively engaging but also providing exposure and scaffolding for successful mastery learning.

Language teaching and learning in twentieth century was characterized by the changes and the development of language teaching policies and practices. Its development was also accelerated by the massive growth of the technology and the rise of internet. Facing these phenomena, teacher also needs to be critical, adaptive and creative. According to Ornstein (2000:70-71), just knowing the latest theories and research on teaching does not guarantee that a teacher will become a good teacher. In this case, teacher has to use his/her knowledge and keep moving with the process of adopting, adapting, and mediating the current views in teaching, current needs of the students and the current condition of the school. In other words, teacher should be able to develop learning activities that is locally and educationally relevant and meaningful to the students. However, it is not easy for teachers to full fill these conditions and that is why they need to expand their reflective thinking and self-evaluation. This article discusses a way to give support to teachers for helping them cope with classroom challenges and demands. The proposed support is a clinical supervision, cyclical formal monitoring and assessment system, facilitating them in providing effective English instruction.

Teachers’ self-evaluation for building English teachers’ instructional ability

Basically teaching and learning process presents opportunities for self-evaluation. It is a process of personal reflection and evaluation where teachers evaluate their instruction to increase the learning of all students. According to Good and Brophy in Ornstein (2000:515), self-evaluation can serve as initial step in an ongoing attempt to improve
teaching and instructional procedures. In general, self-evaluation does not only assist teacher to improve educational experiences for his/ her students and identify the professional education that he/ she needs to further develop his/ her capacity to teach but it also helps teacher to assess his/ her readiness to apply for promotion and tenure (Ornstein, 2000:519).

Based on the explanation above, it can be inferred that teachers’ instructional development is to a large extent influenced by whether they are honest about their own strengths and weaknesses, and willing to make changes in teaching. A teacher can be considered as star teacher if “he/ she has internalized his/ her own view of teaching, his/ her own organization of subject matter, and his/ her practices through experience and self-discovery (a personal pedagogy) and also reflect on what he/ she is doing in the classroom, why they are doing it, and the best way to do it” (Ornstein, 2000:59). In this case, the teacher who does a good job and knows it automatically has the satisfaction of seeing students’ progress, feeling their attention, and obtaining the appreciation from the society.

Method for doing this self-evaluation is very practical. Teacher just needs to prepare a checklist of aspects of instruction perceived as important as the focus of the evaluation. Bringing this checklist, teachers should monitor themselves while teaching. After each teaching session teachers should ask themselves whether they have met their determined goals and objectives, and evaluate the good and the to-be-improved aspects of the session. Besides, it is suggested for the teachers to write a log book to track their own progress and record the information which is particularly important to them over time. The data collected from the self-evaluation process then could be brought to the larger scope of discussion with colleagues that allows teachers to seek advice from colleagues on how to improve the effectiveness of their teaching.

Concerning the importance of self-evaluation for effective teaching and its practicality, teachers ideally are willing to engage in and getting involved in the cyclical process of self-evaluation. In fact, this self-evaluation is hard to do. “Looking back to teaching and learning process and examining it then confronts his or her own concerns and believes with the other alternatives is not easy to do” (Ornstein, 2000). Besides, the data obtained from the observation and interview with some teachers show that teachers feel that they have poor understanding of what is expected of them, lack knowledge of the current trend in teaching English, and lack support or help from colleagues and school contribute to teachers’ feelings of reluctant to do the self-evaluation. Moreover, doing self-judgment that is totally fair and objective is considered difficult by some teachers. They are afraid of making misinterpretations of students’ reactions that may interfere with the effectiveness of the evaluation. To make up this condition, school may initiate a more formal evaluation-situation guided by a supervisor called as clinical supervision to help teachers build their instructional ability by fostering teachers to do self-evaluation of their teaching.

**Clinical supervision for building English teachers’ instructional ability**

Guided with its vision to provide effective instruction for students, school needs to promote a more formal self-evaluation program for its teachers. According to MacBeath (2006), the implementation of self-evaluation historically comes from three main directions, i.e. from the top down (where political pressure, both national and international, ensures quality and cost-effectiveness), from the bottom up (encouraged by schools looking for strategies and tools for their own improvement), and from the side (researchers and theorists, especially studies on school efficiency that have for more than a decade explored why schools are efficient and what contributes to their improvement). While it is believed that teachers in general do excellent job, continued supervision is necessary to not only maintain standards, but also to ensure that students continue to be exposed to improved teacher instruction (Brenenn, 2000). In this paper, the more formal self-evaluation is focused on clinical supervision. It is an organized, systematic and cyclical process in which supervisors work with teachers in a collaborative way and provide expert direct assistance to teachers to help them improve instructional practices and teach more effectively.

Moreover, there are some benefits of clinical supervision in the context of improving teachers’ classroom instruction. Clinical supervision helps to diagnose instructional
problems and provides valuable information which can lead to solving such problems (Glatthorn, 1984 & Brenenn, 2000). The process of data-collecting and pattern-detecting also provide opportunities for both the observer and the observed to gain awareness of their professional practice (Glatthorn, 1984). In this case, under the circumstance of clinical supervision, both supervisor and teacher will interact better, share their knowledge, and achieve the goal either solving the teacher’s problems or finding innovative ideas for better learning instruction leading for chances for promotion and professional growth.

This paper proposes a practical model for providing clinical supervision to help teachers build their instructional ability by fostering teachers to do self-evaluation of their teaching. In general it refers to the general outline of the three-step process covering (1) pre-observation conference, (2) observation; (3) post-observation conference (Ornstein, 2000). This paper also underlines basic interaction pattern referring to the ideal roles of supervisor and teacher for effective result of clinical supervision and also the importance function of teaching log book as the medium for recording plan, progress and information which is particularly important over time and supporting the process of clinical supervision.

A Practical Model of Clinical Supervision for Teachers

The modified outline of three-step process of the clinical supervision is as follows.

1) Pre-observation conference

In this step, supervisor meets with teacher to acquire with school and teaching programs. Ideally supervisor also informally visits the class for short periods of time to learn about teacher’s style, abilities, and needs. Supervisor then helps the teacher plan lessons, suggests appropriate materials and media, and provides curriculum suggestions aimed at improving the teacher’s classroom behavior, specifically instruction techniques. Both supervisor and teacher also make an observation guide and instrument and set appropriate observation strategies for data collection in the observation.

2) Observation

After conducting pre-observation conference activities, at the teacher’s invitation or by a mutual agreement, the supervisor observes a complete lesson designed previ-}

ously by both the supervisor and the teacher. In the process of observation, referring to the observation checklist, the supervisor records all things happening in the classroom. Supervisor also takes notes about what was good about the lesson, what can be improved, and what are the teacher’s strengths and weaknesses. After delivering the lesson, teacher then does a reflection and writes it into the teaching log book. The data obtained in this observation will be the material for the following step of this clinical supervision.

3) Post-observation conference

Post-observation conference is time to discuss the data obtained in the observation and evaluation of the lesson. In detailed process, both supervisor and teacher look at the match as well as the mismatch between teacher’s impressions of what happened in class with the supervisor’s record. They are carefully going through each category in the observation checklist developed together. After reviewing the result of observation, together they evaluate the teaching process, underline the good points and find strategies to overcome problems and challenges found in teaching. Specifically for teacher, having the opportunity to observe as well as be observed by supervisor (expert), and discuss with the supervisor about good professional practices will help him/her apply
theory to practice. Then, they need to formulate new plans which will aid in improving future teacher instruction. In this case, they can make adjustments where necessary before the cycle begins again. Basically this exercise is intended to train the teacher in building teachers’ self-evaluation and self-supervision techniques for effective teaching and personal development (Brenenn, 2000).

Basic Interaction Pattern for Effective Clinical Observation

It is a common phenomenon that teachers, even experienced ones, worry about being observed. Some teachers thought that it tends to be a formal assessment to “inspection” since the attitude to supervision was more judgmental than developmental. According to Brenenn (2000), to ensure that clinical supervision takes place on a constructive and consistent basis, supervisors must work with teachers in a non-threatening way to move instruction from what it is (ineffective) to what it should be (effective). In this context, the kind of supervision proposed is related more to ‘coaching’ and more concerned with peer assistance. A clinical supervisor is a facilitator—one who works with the teacher to meet the goal which is to improve teacher instruction.

The Importance of Teaching Log Book for Effective Clinical Observation

Teaching Log Book records all events and happenings in the processes of planning teaching instruction, delivering lesson and also doing teaching reflection. It can be used to investigate how the study has progressed, and why certain choices or decisions were made or to retrieve the history behind important decisions and solution made. In this case, teacher draws on experience both in rational planning and in intuitive actions, resulting in what Connelly (1985) refers to as ‘personal practical knowledge’. It recognizes that knowledge is shaped and reshaped during experience and leads to a personal reconstruction of meaning. Besides, it is also essential as the basis to continue the work.

The common challenges, problems, and practical solutions and strategies in providing English instruction

Data obtained from the process of clinical supervision process reveals the teachers’ common challenges and problems in providing English instruction and shows its alternative solution and strategies as the following.

<table>
<thead>
<tr>
<th>Phase of Teaching</th>
<th>Challenges/ Problems</th>
<th>Practical Solutions/ Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Teaching</td>
<td>Knowing what to teach and how to teach the “what”</td>
<td>In planning/designing the lesson, teachers identify what they will teach and how they will do it. The content of the lesson plan should be based on specific instructional objectives derived from syllabus. Moreover, in learner-centered teaching, the learners’ needs and experience becomes the central of the education process. “Students’ learning experiences and their responses to them should be at the heart of the instruction” (Harmer, 2001).</td>
</tr>
<tr>
<td>While teaching</td>
<td>Just engaging students in learning is not enough</td>
<td>Research has supported the idea that more learning occurs in classrooms where teachers consistently ensure that students are actually engaged in learning to the greatest extent possible (Haynes &amp; Jenkins, 1986). However, the success of teaching cannot be derived only from this indicator, students’ engagement in learning. Teacher needs to pay sufficient attention to the language’ skill/element taught to students.</td>
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<td></td>
<td>Providing appropriate feedback for students’ learning</td>
<td>Teacher’s feedback should be clear, leading the students to know whether their response is correct or not and stimulating mind to think further about the basic concepts taught</td>
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</table>
Conclusion

The main goal of clinical supervision is to improve teaching instruction for effective learning by fostering teachers to do self-evaluation of their teaching. In a non-threatening three-step process of the clinical supervision, the supervisor and the teacher work collaboratively to diagnose instructional problems, share their knowledge, and achieve the goal either solving the teacher’s problems or finding innovative ideas for better learning instruction leading for chances for promotion and professional growth. According to Ben Harris in Ornstein (2000: 521), the teacher can learn to assume increasing responsibilities for each step in the processes in clinical observation. As the teacher learns to analyze and interpret observational data and confronts his or her own concerns and needs, he or she should become less dependent on the supervisors and more capable of self-evaluation and self-analysis for betterment in teaching. In the same time, as teacher instruction improves, students will be more motivated to learn and a better atmosphere for promoting learning will exist. It is therefore important to note that providing supervision for teachers needs preparations and management system to maintain its’ effectiveness to achieve effective instruction for successful mastery learning.

References


Companies, Inc.