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The role of the paraprofessional in education has increasingly become that of an instructional assistant. This writer concluded in a recent study of paraprofessionals that teachers, teacher aides, and college professors of teacher trainees are in general agreement that the most important function of a paraprofessional is to reinforce and extrapolate what the teacher does rather than perform clerical tasks. It was discovered in a recent survey that paraprofessionals currently spend the major portion of their working day in an instructional role. Similar findings had been reported by Manias, Hicks, and Bowman and Klopf, in studies using dissimilar research techniques. These findings suggest the emergence of a new role for the teacher. The general philosophy of the School of Education at Baylor University acknowledges this new role for teachers in the following way:

It is generally believed ... that the prospective teacher is not presently prepared to diagnose learning needs or to prescribe a remedy from alternatives. It is also thought that prospective teachers possess too few viable options to remedy a learning need even when a diagnosis can be made. If teachers will become expert in the diagnosis of the individual learning needs of students, then they can serve as a catalyst for both devising and implementing a curriculum to meet such needs. A diagnostic/prognostic role for teachers calls for them to evaluate and plan children's progress. Paraprofessionals can carry out the actual procedures outlined by the professional in charge. For example, a teacher may have discovered by means of systematic observation of children's behavior that several students have a reading problem characterized by a short attention span. This problem would compound any other reading problems that may be present. The teacher assigns a paraprofessional to supervise several paired groups of such individuals. The paired groups are instructed by the paraprofessional to read out loud to their partners until told to stop. Emphasis in this case is
on increasing attentive ability rather than comprehension or phonetic accuracy. Each day the time period for this particular activity will increase slightly. The activity has been planned by the teacher as a foundation for reading improvement; the teacher aide has carried out the plan.

Paraprofessionals can supervise a variety of prescribed activities which have been developed by the teacher to facilitate the improvement of previously observed learning weaknesses in students. Such activities could include having a paraprofessional serve as a model for proper breathing for singing a song; the teacher aide could lead a small group of students in the practice of a particular dance step that has not yet been mastered for an upcoming school program.

Or consider another example where a teacher, competent in assessing learning styles, has planned activities supportive to the assessed individual styles which are to be carried out by a teacher aide. Results of the Illinois Test of Psycholinguistic Abilities (ITPA) revealed that a particular child has an apparent deficit in visual association. Specifically, the child is having difficulty identifying second-order relationships (finding a specific relationship to match one already given); it is planned by the teacher to have a paraprofessional present to the child a set of pictures that includes: (1) a basketball player throwing a basketball; (2) a baseball player throwing a baseball; (3) a baseball player batting a ball; and (4) a tennis player hitting a ball. Each of these would be considered a first-order relationship. To help the child find a second-order relationship, the teacher aide would give the child one of the above-mentioned pictures and ask him to find a comparable picture from the other three (an example borrowed from suggestions offered to teachers by Kirk and Kirk). Teachers can utilize and adapt such suggested instructional systems to match assessed learning styles of students. A thorough understanding by teachers of diagnostic information would facilitate this phase of educational program planning.

The school psychologist frequently identifies pronounced learning disabilities in high school students who have never been previously referred for assessment during their school career. When a sixteen-year-old student is able to spell words like "run" and "arm," one cannot help but raise questions such as, "Why is this individual just now being unchallenged?" and, "Why have all his teachers from the first through the tenth grade allowed his learning deficits to go unchallenged?" Results of a study published ten years ago indicated that teachers at that time reported not having been adequately prepared to readily identify learning disabilities or to make diagnostic applications of assessment results provided by standardized tests administered in their classrooms. It is understandable that since teachers have not been prepared for a diagnostic-prognostic role in the past, one can expect to see many secondary students with pronounced learning deficits today.

The increased utilization of paraprofessionals in an instructional role will allow teachers to practice a diagnostic-prognostic role with the intent of undermining the future oversight of learning disabilities in stu-
It has been suggested by Gillespie and Siko that:

If the diagnostic process is in situ, it should focus on the teacher. The teacher should be constantly modifying his/her program based on new information—every lesson can be part of the assessment procedure. The teacher should be able to field problems and to assess the methods and materials used in the educational program. This is a radical departure from traditional diagnostic treatment procedures because it gives the teacher a control role in the diagnostic procedure. The fact that teachers are not really doing anything substantially different today than they did twenty years ago has been well documented by Goodlad and Klein. Popham conducted an experiment in which he found that teachers are no more effective than untrained persons of comparable intelligence and general education in bringing about student learning. This writer recently concluded that the functions a teacher side performs depend in part on what the supervising teacher wants the aide to do and to some extent on the responsibilities an aide is willing to assume. It is, therefore, conceivable that a larger component of the teacher's role can be by the prescription and planning of instructional practices. An expanded instructional role for paraprofessionals will make this new rule for teachers possible. If this is to occur, a training program must be formulated to develop diagnostic prognostic competencies in teachers.

REFERENCES CITED