

## KEEPING FAITH WITH COGAN: CURRENT THEORIZING IN A MATURING PRACTICE OF CLINICAL SUPERVISION

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At the time of the development of clinical supervision in the 1950s and 1960s and even in the early 1970s when Morris Cogan wrote about clinical supervision,<sup>1</sup> most educational inquiry, research, and scholarship were grounded in empirical inquiry. This empirical orientation, or what Schon calls the traditional rational-technical approach to educational theory and practice,<sup>2</sup> is reflected in aspects of Cogan's rationale for clinical supervision. Now, Kuhn's paradigm shift is acknowledged,<sup>3</sup> and interpretive methodologies in educational research receive attention. We can now look at Cogan's rationale for clinical supervision from a different orientation and describe aspects in it that reflect an interpretive orientation to inquiry.

By identifying and reflecting on these aspects in Cogan's rationale, we can gain a perspective on the current state of theorizing about clinical supervision. This perspective offers insight not only into the nature of present theorizing but into how theorizing about clinical supervision has matured since what Cogan called its original state of "natural history."<sup>4</sup>

### ORIENTATIONS TO EDUCATIONAL INQUIRY

I use the terms *empirical inquiry* and *interpretive inquiry* as broad descriptors of philosophical and methodological orientations to educational inquiry, as used by Soltis.<sup>5</sup> A third orientation, critical theory, though not directly relevant to Cogan's work, is apparent in some current writings about

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<sup>1</sup>Morris L. Cogan, *Clinical Supervision* (Boston: Houghton Mifflin, 1973).

<sup>2</sup>Donald A. Schon, *The Reflective Practitioner: How Professionals Think in Action* (New York: Basic Books, 1983).

<sup>3</sup>Thomas S. Kuhn, *The Structure of Scientific Revolutions* (Chicago: University of Chicago Press, 1962).

<sup>4</sup>Morris L. Cogan, *Clinical Supervision* (Boston: Houghton Mifflin, 1973), p. 10.

<sup>5</sup>Jonas F. Soltis, "On the Nature of Educational Research," *Educational Researcher* 13 (December 1984): 5-10.

clinical supervision. Soltis credits Bernstein's *The Restructuring of Social and Political Theory*<sup>6</sup> as the source of this triadic conception of inquiry.

According to Soltis, educational researchers—much like their social and behavioral sciences colleagues—have chosen to “imitate the methods and forms of the natural sciences.” He continues, “This has resulted in the dominance of the language and logic of positivist empirical research in a large segment of contemporary educational theory and practice.”<sup>7</sup> Soltis defends his inclusion within the empirical inquiry category of methods ranging from naturalistic descriptions to control-treatment experiments on the grounds that all are “empirical, objective, and value free—‘scientific’ in the positivist’s sense.”<sup>8</sup> Soltis describes interpretively based educational research as “inquiry into human intersubjective meaning so that we can understand how education initiates us into our culture.”<sup>9</sup> Interpretive methods include linguistic and ethnomethodological techniques and have their philosophical roots in language analysis and phenomenology.<sup>10</sup>

Soltis describes critical theory, the third orientation to educational inquiry, as “a demystification of our educational institutions and practices that will serve our emancipatory interests.”<sup>11</sup> By examining the values underlying educational practice and philosophy, critical theory brings to conscious consideration the normative human consequences of education.

#### EMPIRICAL AND INTERPRETIVE ASPECTS IN COGAN'S RATIONALE

Empirical and interpretive aspects are interwoven in Cogan's rationale for clinical supervision. Although Cogan welcomes interpretive aspects, he implies that they will be subordinate to the empirical aspects and promises that interpretation will be well disciplined by the taskmaster of empirical “science.”

Supervision is not a science, but it is in part committed to science. This commitment follows not from a predilection for science as against art, experience or intuition, but from a need to inform art, experience and intuition by science.<sup>12</sup>

By examining major components of Cogan's rationale, we can understand empirical and interpretive aspects in the context of his cycle of supervision.

<sup>6</sup>Richard J. Bernstein, *The Restructuring of Social and Political Theory* (New York: Harcourt Brace Jovanovich, 1976)

<sup>7</sup>Jonas F. Soltis, “On the Nature of Educational Research,” *Educational Researcher* 13 (December 1984): 6

<sup>8</sup>Ibid.

<sup>9</sup>Ibid.

<sup>10</sup>Ibid., p. 7.

<sup>11</sup>Ibid.

<sup>12</sup>Morris L. Cogan, *Clinical Supervision* (Boston: Houghton Mifflin, 1973), p. 18

### *The Purpose of Clinical Supervision*

Cogan's stated purpose of clinical supervision as "the improvement of students' learning through the improvement of the teacher's instruction" reflects an empirical orientation.<sup>13</sup> This stated intention of improvement implies behavioral change on the part of the teacher and the students. In fact, Cogan acknowledges that the cycle of clinical supervision is "part of a larger strategy to facilitate change in behavior."<sup>14</sup> This statement supports a positivist/behaviorist, or empirical, orientation that seeks behavioral change as evidence of particular treatments on research subjects.

But Cogan qualifies this empirical view by emphasizing that the cycle of supervision represents a strategy that "may be termed *developmental*, in contrast to *episodic* or *discontinuous*."<sup>15</sup> This distinction suggests a focus on the teacher as a person, which Cogan verifies by stating that clinical supervision seeks "the development of the teacher's personal style of teaching."<sup>16</sup> This recognition of teachers' unique identities reflects Cogan's interpretive perspective.

We can view the distinction between empirical and interpretive aspects in Cogan's references to the purposes of clinical supervision in terms of the knowledge that evolves from the process of clinical supervision. From the empirical viewpoint, knowledge is changed behavior brought about by applying traditionally positivistic learning theory. The interpretive viewpoint conceives of knowledge as "understanding." This concept of understanding is a term used in the phenomenologist's lexicon to describe subjective knowledge that develops in a particular situation. Understanding is also construed as knowledge of deep structure concepts or emotions not accounted for by empirical explanation. According to von Wright, this element of "intentionality" in understanding distinguishes it from explanation.<sup>17</sup> Cogan's rationale holds out this interpretively based knowledge as an objective of clinical supervision: "The teacher should, whenever possible and feasible, not only learn new behavior, but he should understand why he does what he does, and why it is better or worse than other things he might do."<sup>18</sup>

### *The Relationship Between Supervisor and Teacher*

Cogan's concept of the "colleagueship" between supervisor and teacher is a central component of his rationale and cycle of clinical supervision. This relationship is dominated by an interpretive perspective that allows meaning

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<sup>13</sup>Ibid., p. 68

<sup>14</sup>Ibid., p. 29

<sup>15</sup>Ibid.

<sup>16</sup>Ibid., p. 72

<sup>17</sup>George H. von Wright, *Explanation and Understanding* (Ithaca, NY: Cornell University Press, 1971), p. 6.

<sup>18</sup>Morris Cogan, *Clinical Supervision* (Boston: Houghton Mifflin, 1973), p. 30

to be developed out of the context of the relationship and the events of the cycle. According to Cogan:

The rationale for the collegial relationship derives from a conviction that both the teacher and supervisor give and receive support. [Through collegiality] professionals help each other and at the same time strengthen themselves professionally.<sup>19</sup>

Cogan also talks about a "chain of events" in which what teacher and supervisor do in each phase of the supervision cycle affects their subsequent actions and perceptions. Cogan expresses this notion with elegant simplicity: The "culture [of the supervisory relationship] is not mechanically created."<sup>20</sup> He suggests that the cycle alone does not constitute clinical supervision. Clinical supervision is also highly personalized.

In Cogan's discussion of the conference phase of the supervision cycle, this interpretive orientation is most apparent. He warns that while the supervisor must prepare for the conference, he must not attempt to "prestructure" it. Cogan cautions:

Its course is unpredictable. The supervisor cannot therefore anticipate in detail how it will develop, what problems will arise, or what will force a change in direction . . . The conference is a shared exploration: a search for the meaning of instruction.<sup>21</sup>

Although the teacher-supervisor relationship is dominated by its interpretive orientation, Cogan's rationale also alludes to empirically oriented aspects of that relationship. These aspects concern the emphasis in clinical supervision on observable behaviors and the supervisor's perspective in observing behavior. If the supervisor and teacher focus on behaviors observed in the classroom, the supervisor may assume characteristics of the role of the positivist researcher. In its most extreme form, the supervisor, like the positivist researcher, maintains a detached stance toward the teacher/subject, implements treatments designed to change the teacher/subject's behavior, and then determines the results of that treatment by assessing behavior changes. Clearly, this practice is not consistent with Cogan's view of clinical supervision.

### *The Role of Data*

The role of data in clinical supervision is the third major component of Cogan's rationale and most strongly reflects an empirical orientation. Cogan's view of data is empirically based, he holds that data must directly support conclusions reached by the researcher during the course of the supervision cycle. "The rationale," he writes, "places emphasis upon the collection, systematic analysis and use of data on classroom events."<sup>22</sup>

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<sup>19</sup>Ibid., p. 69

<sup>20</sup>Ibid., p. 221

<sup>21</sup>Ibid., p. 197

<sup>22</sup>Ibid., p. 17

The rationale also reflects an empirical orientation in its use of observation instruments that prescribe the nature of the data to be collected. Cogan endorses the use of empirically based formal observation systems, particularly interaction analysis systems. Although he cautions against exceeding the limits of these instruments, he encourages supervisors to use them as vehicles for providing teachers with objective information about patterns of teaching and classroom behaviors.<sup>23</sup>

As an empirical approach to data collection and analysis is fundamental to Cogan's rationale, so an interpretive approach is fundamental to how the data and analyses are used in the post-observation conference phase of the cycle. Records of the data and analyses, according to Cogan, provide a "foundation for the inference-play of the post-observation conferences."<sup>24</sup> These records become the basis for a process of hermeneutic interpretation; the teacher and the supervisor use the records not as the end product of supervision, say for evaluating the teacher, but as descriptive material; they share the meaning and understanding of these materials in the post-observation conference. These meanings and understandings then inform the planning for further data collection in the next cycle. Thus, an interpretive view of inquiry influences decisions about the empirical instruments used in clinical supervision to collect and analyze data.

#### CURRENT THEORIZING ABOUT CLINICAL SUPERVISION

Examining Cogan's rationale for clinical supervision and recognizing in it both empirical and interpretive orientations toward inquiry raises an obvious question for the current state of theorizing about clinical supervision. Are the empirical and interpretive perspectives that coexisted in Cogan's rationale reflected in current conceptions of clinical supervision? Simply, this coexistence continues. A closer look, however, reveals a more complex situation. Current conceptions of clinical supervision are dominated by an empirical orientation; predetermined criteria govern the collection of factual data in classroom observations. These data are the sole basis for knowledge about teaching performance and student learning. But conceptions of clinical supervision also reflect interpretive or critical theory perspectives in which empirical facts—what Taylor aptly describes as "brute data"—serve as a foundation for contextually based meanings and understandings about teaching and learning—Taylor's "sense data."<sup>25</sup>

These differing conceptions also raise a more subtle and important question. What do such differing views represent in terms of the development of a maturing theory of practice for clinical supervision?

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<sup>23</sup>Ibid., p. 160.

<sup>24</sup>Ibid., p. 7

<sup>25</sup>Charles Taylor, "Interpretation and the Sciences of Man," *Review of Metaphysics* 25 (September 1981) 3–51.

### Empirical Orientation

May and Zimpher have noted the prevalence of an empirical perspective in clinical supervision. "In its primary emphasis on observable behaviors (and in some instances with regard to the kinds of observation instruments used to gather 'objective' data during observation) the clinical approach could be construed as positivistic."<sup>26</sup> May and Zimpher's focus on the collection of empirical data as the major component of clinical supervision leads them to see clinical supervision as an empirically based process that stresses method over collegiality and collaboration.

The emphasis on empirical inquiry recognized by May and Zimpher is currently most evident in versions of the Hunter model of clinical supervision. Because versions of this model are numerous and because they are conceptually similar, only Hunter's version will be discussed here. Examining the major components of clinical supervision as they are represented in the Hunter model reveals the dominance of an empirical orientation that views teaching and supervision as systematically applied sciences.

Hunter has stated that the essential purpose of clinical supervision is "to help teachers see the cause-effect relationships of what they were doing to how students were learning"<sup>27</sup> Having teachers become aware of cause effect relationships reflects an empirical orientation because such cause-effect relationships have been identified through research and have been made operational in direct instruction methods and experientially derived performance criteria.<sup>28</sup> These methods and criteria then exist as standards against which to measure actual teaching.

The nature of the relationship between supervisor and teacher in Hunter's version of clinical supervision is also empirically oriented. According to Haggerson, this relationship stresses "a direct administrative style in addressing the teacher. The supervisor seems to take charge of the events of supervision and informs the teacher."<sup>29</sup> In the relationship between supervisor and teacher, the supervisor is "assuming responsibility for that teacher's learning even when the teacher is a willing collaborator and an active participant."<sup>30</sup> Hunter

<sup>26</sup>Wanda T. May and Nancy L. Zimpher, "An Examination of Three Theoretical Perspectives on Supervision. Perceptions of Preservice Field Supervision," *Journal of Curriculum and Supervision* 1 (Winter 1986). 88.

<sup>27</sup>Noreen B. Garman, Carl D. Glickman, Madeline Hunter, and Nelson L. Haggerson, "Conflicting Conceptions of Clinical Supervision and the Enhancement of Professional Growth and Renewal. Point and Counterpoint," *Journal of Curriculum and Supervision* 2 (Winter 1987). 153.

<sup>28</sup>Madeline Hunter, "Knowing, Teaching, and Supervising," in *Using What We Know About Teaching*, ed Philip L. Hosford (Alexandria, Va. Association for Supervision and Curriculum Development, 1984), pp. 169-192.

<sup>29</sup>Noreen B. Garman, Carl D. Glickman, Madeline Hunter, and Nelson L. Haggerson, "Conflicting Conceptions of Clinical Supervision and the Enhancement of Professional Growth and Renewal. Point and Counterpoint," *Journal of Curriculum and Supervision* 2 (Winter 1987). 169.

<sup>30</sup>Madeline Hunter, "Knowing, Teaching, and Supervising," in *Using What We Know About Teaching*, ed Philip L. Hosford (Alexandria, Va. Association for Supervision and Curriculum Development, 1984), p. 180.

describes the supervisor's responsibility in behavioral terms. The supervisor is concerned with identifying teaching behaviors that can be "strengthened, eliminated, or remediated."<sup>31</sup> Therefore, the teacher-supervisor relationship places the supervisor in the role of an outside expert and observer who collects and analyzes data on the teacher's behavior and provides the assistance needed to reinforce or change that behavior.

Costa has noted the technological emphasis in Hunter's "categorizing the acts of teaching, learning, and supervising into precisely three decisions, seven steps, and six types."<sup>32</sup> The system leads to an empirically oriented view of supervision as the application of techniques addressing each of these categories. Although Hunter's view of clinical supervision plays down the traditional supervision cycle, particularly the pre-observation conference, supervisors and teachers must possess what Sergiovanni has described as "a certain and common body of knowledge."<sup>33</sup> This knowledge is of an empirically determined model for instruction.

Hunter has described this model in terms of seven basic elements for lesson design. These elements, which teachers learn through inservice training, are used as the basis of supervisory observation and the creation of a "script tape" to identify and analyze data on three decisions about teaching behavior (content, learner behavior, and teacher behavior). Supervisors then choose among six types of instructional conferences the one most appropriate to further a particular teacher's implementation of the instructional model.<sup>34</sup> This reliance on a formal model makes supervision an empirical and essentially mechanistic process for evaluating teaching behavior.

Although Hunter's empirical orientation toward clinical supervision gives the model considerable explanatory power, it is also the source of the model's reductive tendency. Omitting interpretive aspects in Hunter's model denies the complexity inherent in the practice of clinical supervision as Cogan conceived it, therefore, the empirical orientation is a regressive turn in the development of a theory of practice.

### *Interpretive Orientation*

Current theorizing about clinical supervision in which an interpretive orientation prevails retains Cogan's complexity by both incorporating and

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<sup>31</sup>Madeline Hunter, "Script Taping: An Essential Supervisory Tool," *Educational Leadership* 41 (November 1983), 43.

<sup>32</sup>Arthur L. Costa, "A Reaction to Hunter's Knowing, Teaching, Supervising," in *Using What We Know About Teaching*, ed. Philip L. Hosford (Alexandria, Va.: Association for Supervision and Curriculum Development, 1984), pp. 169-192.

<sup>33</sup>Thomas J. Sergiovanni, "Landscapes, Mindscapes, and Reflective Practice in Supervision," *Journal of Curriculum and Supervision* 1 (Fall 1985) 67-78.

<sup>34</sup>Madeline Hunter, "Knowing, Teaching, and Supervising," in *Using What We Know About Teaching*, ed. Philip L. Hosford (Alexandria, Va.: Association for Supervision and Curriculum Development, 1984), pp. 169-192.

expanding on the empirical evidence gathered in classroom observation. This theorizing is characterized by a rational faith that the "sense" of teaching and learning lies not in the acts themselves but in the richly human meanings with which these acts are imbued.

The central component of interpretively oriented theorizing about clinical supervision is the collegial and collaborative relationship between supervisor and teacher. In this relationship, both engage as partners in inquiry into the nature and meanings of the events of teaching. Although grounded in empirical observation data, this inquiry has more the character of a dialogue in which teacher and supervisor seek what Smyth has called a "shared framework of meaning about teaching."<sup>35</sup> Garman has described this process of interpretive inquiry similarly, saying it is an involvement of "genuine participation" that emphasizes "the act of making explicit statements about the shared events so that the participants have a common language and accept each others' perception of the events from a smaller frame of reference."<sup>36</sup>

The inquiry engaged in by supervisor and teacher in these versions of clinical supervision is also interpretively oriented because meanings are jointly created in the context of the supervisory process. The supervisor is a "connected participant"<sup>37</sup> involved in the process of creating knowledge, not an observer whose only role is to impart technical knowledge and the findings of observation data analysis to the teacher.

Views of clinical supervision that reflect an interpretive orientation to inquiry reject the notion that clinical supervision consists exclusively of the methods of a cycle or model. Rather, clinical supervision, from the interpretive perspective, is an approach to supervision guided by concepts embodied in the cycle. These concepts delimit, not define, actual practice. Garman has referred to the supervision cycle as a "metaphor as well as a method."<sup>38</sup> Thus, clinical supervision is not a series of procedural phases but rather a skilled practice in which knowledge of methods is used to develop an understanding of the meanings of educational events.

Sergiovanni and Starret's theorizing about clinical supervision also presents the concepts and ideas represented in the cycle as simply the means for gathering information that teachers can use to understand the assumptions, beliefs, and objectives that direct their behavior. "It is not necessary," they write, "for supervisors to follow a specific or single set of procedures or phases in implementing clinical supervision."<sup>39</sup>

<sup>35</sup>W. John Smyth, "Teachers as Collaborative Learners in Clinical Supervision: A State of the Art Review," *Journal of Education for Teaching* 10 (No. 5, 1984) 33

<sup>36</sup>Noreen B. Garman, "The Clinical Approach to Supervision," in *Supervision of Teaching*, ed. Thomas J. Sergiovanni (Alexandria, Va.: Association for Supervision and Curriculum Development, 1982), p. 45

<sup>37</sup>Ibid., p. 41

<sup>38</sup>Ibid., p. 52

<sup>39</sup>Thomas J. Sergiovanni and Robert J. Starrett, *Supervision: Human Perspectives* (New York: McGraw-Hill, 1983), p. 302

The interpretive orientation presents the purpose of clinical supervision as an understanding of one's own professional actions. This understanding can lead to what Garman has called "professional progress"<sup>40</sup> as opposed to behavioral change. The collaborative development of knowledge by reflecting on the events of teaching and on the meanings these events hold for the supervisor and teacher is an essentially interpretive process because the knowledge is both personal and situational. This knowledge supplements rather than supplants existing knowledge. The importance of this concept of the development of knowledge as understanding has been frequently discussed in theorizing about clinical supervision.<sup>41</sup>

The development of theorizing that stresses the interpretive aspects of clinical supervision represents a maturing and expanding of Cogan's rationale. The historical era of Cogan's work makes his subordination of interpretive to empirical aspects of clinical supervision understandable. The importance of the generally growing interest in interpretively oriented inquiry now, however, makes possible theorizing about clinical supervision in which interpretive aspects enrich and expand our understanding of the meaning of teaching and learning events captured by empirical data.

### *Critical Theory Orientation*

Current theorizing about clinical supervision also reflects a critical theory perspective. In its dominant emphasis on empowering teachers as an essential purpose of clinical supervision, this theorizing represents another maturing development of Cogan's original rationale. Applying critical theory to clinical supervision brings normative considerations into focus as important issues for inquiry and theory.

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<sup>40</sup>Noreen B. Garman, Carl D. Glickman, Madeline Hunter, and Nelson L. Haggerson, "Conflicting Conceptions of Clinical Supervision and the Enhancement of Professional Growth and Renewal: Point and Counterpoint," *Journal of Curriculum and Supervision* 2 (Winter 1987): 156.

<sup>41</sup>Noreen B. Garman, "The Clinical Approach to Supervision," in *Supervision of Teaching*, ed. Thomas J. Sergiovanni (Alexandria, Va.: Association for Supervision and Curriculum Development, 1982), pp. 35-52; Noreen B. Garman, "Clinical Supervision: Quackery or Remedy for Professional Development," *Journal of Curriculum and Supervision* 1 (Winter 1986): 148-157; Noreen B. Garman, "Reflection, the Heart of Clinical Supervision: A Modern Rationale for Professional Practice," *Journal of Curriculum and Supervision* 2 (Fall 1986): 1-24; W. John Smyth, *Clinical Supervision: Collaborative Learning about Teaching* (Victoria, Australia: Deakin University, 1984); W. John Smyth, "Teachers as Collaborative Learners in Clinical Supervision: A State of the Art Review," *Journal of Education for Teaching* 10 (No. 1, 1984): 24-28; W. John Smyth, "Clinical Supervision: Technocratic Mindedness, or Emancipatory Learning," *Journal of Curriculum and Supervision* 1 (Summer 1986): 331-340; Robert J. Alfonso and Lee Goldsberry, "Collegialship in Supervision," in *Supervision of Teaching*, ed. Thomas J. Sergiovanni (Alexandria, Va.: Association for Supervision and Curriculum Development, 1982), pp. 90-107; Thomas J. Sergiovanni, "Toward a Theory of Supervisory Practice: Integrating Scientific, Clinical, and Artistic Views," in *Supervision of Teaching*, ed. Thomas J. Sergiovanni (Alexandria, Va.: Association for Supervision and Curriculum Development, 1982), pp. 67-78.

Smyth's work best exemplifies a critical perspective in its view of clinical supervision as a means for teachers to gain control over their teaching as well as their development as professionals.<sup>42</sup> He argues:

If we are really serious about wanting to reform our teaching practices and assist our colleagues to do likewise, we need to view processes like clinical supervision as a way of posing problems about our teaching (i.e., *problematizing* it) in a way that enables us to challenge taken-for-granted assumptions about how we work. In the process we will likely uncover the manifold contradictions, dilemmas, and paradoxes that plague us in teaching and schooling.<sup>43</sup>

Sergiovanni's discussion of the "clinical mind" in teaching and supervision alludes to empowerment, saying it is essential to the clinical mode.<sup>44</sup> Garman also assumes a critical theory perspective: "Personal empowerment is the essential ingredient for a professional orientation. This is a major assumption guiding the practice of clinical supervision."<sup>45</sup> According to Garman, such empowerment comes about when "supervisors and teachers can collaborate their efforts toward reflection-in-action, that is, formal procedures for studying immediate events in order to understand them and to develop findings for their own useful practices."<sup>46</sup>

#### IMPLICATIONS FOR A MATURING THEORY OF PRACTICE

In part, the issue of what current views of clinical supervision represent in the development of a maturing theory of practice depends on whether we believe current theorizing is based on rival claims. Then, incorporating the varying conceptions of clinical supervision into a single theory is impossible. But if we view the differing theoretical orientations as alternative perspectives on practice, then we can see them as an exemplar of what Jackson has described as the inevitable, unresolvable tension in educational theory between the mimetic and the transformative,<sup>47</sup> with empirically oriented theorizing in the mimetic realm and interpretively and critically oriented theorizing in the transformative. Viewing current theorizing about clinical supervision as a

<sup>42</sup>See the following publications by W. John Smyth: "An Alternative and Critical Perspective for Clinical Supervision in Schools," in *Critical Perspectives on the Organization and Improvement of Schooling*, ed. Kenneth Sirotnik and Jeanne Oakes (Hingham, Mass.: Kluwer-Nijhoff, 1986); "Towards a Critical Consciousness in the Instructional Supervision of Experienced Teachers," *Curriculum Inquiry* 14 (Winter 1984): 425-436; "Developing a Critical Practice of Clinical Supervision," *Journal of Curriculum Studies* 17 (January-March 1985): 1-15.

<sup>43</sup>W. John Smyth, "Clinical Supervision: Technocratic Mindedness, or Emancipatory Learning," *Journal of Curriculum and Supervision* 1 (Summer 1986): 332. (Smyth's italics)

<sup>44</sup>Thomas J. Sergiovanni, "Landscapes, Mindscapes, and Reflective Practice in Supervision," *Journal of Curriculum and Supervision* 1 (Fall 1985): 13

<sup>45</sup>Noreen B. Garman, "Reflection, the Heart of Clinical Supervision: A Modern Rationale for Professional Practice," *Journal of Curriculum and Supervision* 2 (Fall 1986): 17

<sup>46</sup>Noreen B. Garman, "Clinical Supervision: Quackery or Remedy for Professional Development," *Journal of Curriculum and Supervision* 1 (Winter 1986): 155.

<sup>47</sup>Philip W. Jackson, *The Practice of Teaching* (New York: Teachers College Press, 1986)

condition of inevitable tension is not to encourage the development of continually divergent theories of practice with decreasing impetus for those holding one theory to consider the other. This view violates the nature and spirit of scholarly inquiry. Rather, we should consider current theorizing a dialogue among well-informed parties representing differing perspectives on a common issue.

Sergiovanni has outlined a theory of supervisory practice that offers just such a way of looking at what varying conceptions of clinical supervision represent.<sup>46</sup> His theory incorporates considerations of the empirical, the interpretive, and critical views in a reasoned, integrated way. As Sergiovanni describes the theory:

It would recognize the value of both normative and descriptive views and would seek to bring them together as alternate and integrative ways of knowing. Further, a theory of practice would be concerned with the meaning of events. Such a theory would seek to turn the facts of what is and what ought to be into meanings that are important and useful to those involved in the process of supervision and evaluation.<sup>49</sup>

Because it includes the major perspectives on educational inquiry, Sergiovanni's theory of practice represents a maturing view of supervision that affords an appropriate context for examining the distance current conceptions of clinical supervision have come since Cogan's original rationale. This examination reveals considerable disparity in the relative maturity represented among the three orientations to theorizing about clinical supervision.

We can view empirically oriented theorizing as a reversion to a more immature developmental state, because by eliminating the interpretive aspects that Cogan originally included, empirical views of clinical supervision are less able to account for the complexity of teaching and learning. But interpretive and critical orientations to theorizing represent a maturing beyond Cogan. By granting interpretive and critical aspects coequal status with the empirical, both orientations allow the practice of clinical supervision to proceed beyond just the consideration of classroom events to the consideration of the significance and meaning of those events. The ability of a theory of practice to incorporate more elements of the teaching and learning process is in keeping with the spirit of Cogan's initial rationale for clinical supervision. Therefore, a theory of practice incorporating empirical, interpretive, and critical theory perspectives merits continued consideration and application as a framework for theorizing about the professional educational practice of clinical supervision.

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<sup>46</sup>Thomas J. Sergiovanni, "Toward a Theory of Supervisory Practice Integrating Scientific, Clinical, and Artistic Views," in *Supervision of Teaching*, ed. Thomas J. Sergiovanni (Alexandria, Va.: Association for Supervision and Curriculum Development, 1982), pp. 67-78.

<sup>49</sup>*Ibid.*, p. 70.

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Berliner, David C., and Barak V. Rosenshine, eds. *Talks to Teachers*. New York: Random House, 1987. 411 pp. \$18.00.

This collection of speculative essays, written by the students and colleagues of the eminent scholar Nathaniel L. Gage, seriously considers the research base for the art of classroom teaching. Berliner introduces this *estschrift* with a talk to teachers about the contemporary research on teaching and an examination of the ways teachers and administrators think about the application of this research. Each section of the text includes a related set of essays that addresses student cognition; classroom interaction; observation, expectation, and motivation; and instructional goals, testing, and placement. The concluding section, by Lee Shulman, melds the research on teaching and the wisdom of practice in an attempt to realize positive educational change.

—Gregory J. Nolan

Greenfield, William, ed. *Instructional Leadership: Concepts, Issues, and Controversies*. Boston: Allyn & Bacon, 1987. 343 pp. \$27.95.

This book contains 17 articles on instructional leadership by 20 scholars. The perspectives presented differ in the view of leadership as managerial, human relations, political, cultural, and reflective. Thus, the purpose of this book is not to provide a definitive answer on what constitutes instructional leadership. From this purpose is to provide an up-to-date view of the different perspectives. From this updated knowledge base, the authors hope a dialogue will emerge that will address the question, "How might schools be led into the twenty-first century?"

—Robert Vadella

Tomkins, George S. *A Common Countenance: Stability and Change in the Canadian Curriculum*. Scarborough, Ontario: Prentice-Hall Canada, 1986. 497 pp. \$21.33.

Curriculum history as a field of academic inquiry is exhibited at its best in this prodigious volume on Canadian curriculum history. Tomkins' work represents a synthetic and coherent whole stretching from early French and English Canada until 1980, from origins, through nation building, to mass education. This detailed, documented story has immense credibility and appeal.

Ubben, Gerald C., and Larry W. Hughes, eds. *The Principal: Creative Leadership for Effective Schools*. Boston: Allyn & Bacon, 1987. 374 pp. \$32.95.

The authors focus on the principal as the primary force for all that occurs in schools. Coupled with this frame of reference is the acceptance of the principal as a management figure. Thus, the 16 diverse topics addressed in separate chapters are presented as component parts of the overall managerial leadership provided by the principal in moving schools toward effectiveness.

—Robert Vadella

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