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This We Believe:

Educators of Young Adolescents Are Just Like the Students – As Learners!

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This We Believe

Educators of Young Adolescents Are Just Like the Students – As Learners!

It is conventional wisdom that, “The teachers are just like the kids!” This is especially true for those who teach young adolescents – just observe a middle level faculty meeting to see all the student roles writ large – teacher’s pet, class clown, fashionista, *I-got-that-report-here-somewhere....* The truism is all the more accurate regarding how educators of young adolescents learn best – just like the kids! Fortunately, the National Middle School Association (NMSA) has long offered excellent guidance on the education of young adolescents in the *This We Believe* volumes, and by extension, for the education of educators of young adolescents.

Practicing What We Preach

This We Believe: Successful Schools for Young Adolescents (NMSA, 2003) offers a set of fourteen recommendations for the kinds of cultures schools should construct and the opportunities they should provide for young adolescents (Table 1). With very little tweaking, these recommendations offer an ideal blueprint for designing, operating and evaluating programs for educators of young adolescents. We advocate these fourteen practices in middle level teacher education programs, not only for the benefits of modeling them for educators, but because they *work* with educators.

The Master of Education Degree in Curriculum Studies with a Middle Level Emphasis Program (MLMED) at the University of Hawai‘i at Manoa began in June 1996, with the goal of building a leadership base for middle level school renewal in the state (Deering & Port, 1995). The MLMED has applied *This We Believe* (TWB) recommendations dating back to the first of these volumes (NMSA, 1982). We will use the latest incarnation (NMSA, 2003) in this article as a lens for analyzing the MLMED and as a template for designing effective development

programs for educators of young adolescents. We have clustered the fourteen *TWB* recommendations into three broad categories, and will address them in this order: 1) organizing principles, 2) relational supports, and 3) learning and assessment.

Insert Table 1 about here

Life and Education in Hawai'i

Hawai'i's incredibly diverse population is comprised of 15-22% each of persons of Native Hawaiian, Japanese, Filipino and European/Caucasian ancestry, along with Chinese, Korean, Vietnamese, Samoan, Tongan, Marshallese, Micronesian, African American, Native American, Latino and other Asian and Pacific Islander ethnic/racial groups. This makes for quite a *mixed-plate*, a term referring to a multi-item meal originating on the polyethnic sugar and pineapple plantations.

Hawai'i is every bit the vacation paradise depicted in movies, yet simultaneously faces many of the same challenges as the rest of the United States and the world. Astounding wealth coexists alongside equally astounding poverty, ill health, domestic violence and substance abuse, both in urban and rural areas. Like many other locales, non-whites, particularly persons of Native Hawaiian, Filipino, and other Pacific Islander cultures are most likely to suffer from these social and economic ills.¹ About three-fourths of the state's 1.2 million people live on the island of O'ahu, where the capital city of Honolulu and the sole state university, the University of Hawai'i at Manoa (UHM, main campus), are located.

Hawai'i's schools face many challenges. Almost one-fifth of the state's students attend private schools, one of the highest rates in the nation (Essoyan, 2008). Meanwhile, schools in the single, statewide public school district, the Hawai'i Department of Education (HIDOE), are drastically under-funded, particularly in terms of facilities.² An additional challenge for Hawai'i

schools, especially the public schools, is helping children from many linguistic backgrounds master Standard English, while also maintaining their native languages. For many, *pidgin*, Hawai'i's unique Creole dialect, is the first language (Da Pidgin Coup, 2004).

Hawai'i's large, hierarchical HIDOE, and many private schools, have been slow to change and adopt research-based reforms (Deering, 2002; Raywid, 2002), including middle level education approaches (e.g., Carnegie, 1989, 1995; NMSA, 2003). Both public and private middle level schools have tended to focus almost exclusively on academic content, with little or no attention to developmentally appropriate practice. Not surprisingly, given the socio-economic challenges and the slow reform rate, data on the health and education of the state's early adolescents show areas for concern, including high levels of health risk behaviors, school climate problems, and low scores on academic achievement tests (*Education Week*, 2000, 2004, 2008; HIDOE, 2000; Pateman, et al, 2000).

Fortunately, there has been increasing progress in middle level school reform in Hawai'i over the past decade-and-a-half. The Hawai'i Association of Middle Schools (HAMS), an NMSA affiliate, has led the way with workshops and conferences since 1989. In addition, the HIDOE promoted developmentally appropriate middle level practice with growing resolve during the 1990's, and in 2001, adopted the *Hawai'i Middle Level Education Policy*, which is very much in line with *TWB* (NMSA, 2003) recommendations.

The MLMED Program

The MLMED is the creation of a multi-agency public-private task force that envisioned education for educators as the key to promoting meaningful, lasting change in the state's public and private middle level schools (Deering & Port, 1995). However, a key consideration had to be sensitivity to the personal and cultural characteristics of the participants. Numerous studies

have chronicled the failure of the “banking” approach (Freire, 1970), in which “experts” tried to transmit to, or coerce from, teachers “new and improved” methods (Fullan, 1993; Richardson, 1990; Sarason, 1971; Scott, 1999). By contrast, successful school improvement efforts promote educators’ empowerment as professionals, wherein the educators themselves define and enact reforms to improve their specific schools (Cohn & Kottcamp, 1993; Darling-Hammond, 1997; Freire, 1970; George, Stevenson, Thomason & Beane, 1992; Jackson & Davis, 2000; Wasney, Hampel, & Clark, 1997).

An innovation model calling for empowered change agents presents a daunting challenge for most educators who are typically socialized by teacher education programs and school systems into hierarchical power relations, and fixed conceptions of best practice – “just do what you’re told” (e.g., Zeichner & Noffke, 2001). Deference to authority is also a cultural tendency for many Asian, Pacific Islander and other non-white cultures (Pang, 1995; Vogt, et al, 1987), as well as for females (e.g., Goleman, 1995). While it is dangerous to overstate these tendencies, they probably have contributed to the modest pace of middle level school reform in Hawai‘i.

With these historical and contextual considerations in mind, the MLMED was designed to apply good middle level education practice (e.g., Carnegie, 1989, 1995; Erb, 2001; Jackson & Davis, 2000; NMSA, 1982, 1995, 2003; Table 1) as a means of empowering the state’s middle level educators to improve their schools for themselves. The MLMED has engaged in ongoing assessment and evaluation, including anonymous surveys of participants conducted every semester (Deering & Stone, 1998), a dissertation study that involved participants whose identity was kept confidential from faculty (Ashford, 2002), collaborative scholarship (Deering, et al, 2005; Deering, et al, 2006), plus the standard university course evaluation process. These sources provide the data for describing and assessing the program below. In addition, the faculty

members are in ongoing contact with almost all the participants, past and present, in professional contexts and via email – this is one of the benefits of a relatively small and isolated setting like Hawai‘i – “the small rock syndrome.”

The MLMED is based on five *Professional Standards for Teachers of Early Adolescents* that call for knowledge of, competence with, and inquiry into:

1. Early adolescent development
2. Subject area content and pedagogy
3. Developmentally appropriate curriculum, instruction and assessment for diverse learners
4. Communication, counseling, and group dynamics strategies
5. Professionalism and leadership,

To date, almost 200 educators, mostly classroom teachers, have participated in the MLMED (Table 2). Six O‘ahu cohorts and one Maui cohort of twenty-five to thirty-five persons each have completed the program in a two-years-plus-summertime schedule.

Insert Table 2 about here

The MLMED has attracted a diverse array of public and private school educators, including high proportions of ethnicities underrepresented in the teaching force, and educators over age thirty-five, and/or working in low-income, and/or outlying schools (Table 2). The substantial proportion of students admitted under academic probation has allowed us to “cast a wide net,” to include those who have struggled with standard English, especially in written form, or who have come from less elite educational institutions. This factor, coupled with our very high graduation rate, suggests that the MLMED is either highly supportive of teacher candidates

or has lax standards, in contrast with *TWB's* (NMSA, 2003; Table 1) *high expectations for every member* – readers can decide for themselves after finishing this article.

Organizing Principles

The MLMED was designed as an inservice professional development program for two reasons. First, the state had no entry-level middle level license at the time so there was no point in creating a program that led to nowhere. Second, and most importantly, the MLMED's driving purpose was and is to promote systemic reform, so better to focus on educators who already work with young adolescents and who are committed to learning more about them and improving their schools.

Most participants come to the MLMED with an elementary generalist (K-6th grade) or secondary single-subject (7-12th grade) preparation, with a smattering holding K-12th grade licenses in special education or arts, plus some unlicensed private school teachers. What all have in common is a love for young adolescents, a passion to understand and serve them better, and little or no specific preparation for this age group. This population fits NMSA's (2003) criterion of educators who *value* young adolescents, and we attempt to ensure this in the application for admission with a rubric that specifies *enjoyment and appreciation* of the age group. We have only refused admission to a handful of applicants in our ten-plus years, most often because they do not work with young adolescents or their educators (grades 4-10, ages 10-16, by our criteria).

The MLMED also assures that no one graduates without demonstrating in his or her exit *Portfolio – Enjoyment and Appreciation of Early Adolescents and Their Education*, under Standard Five's *Professionalism*. Participants must demonstrate both in writing (*Précis*) and artifacts (*Exemplars* in their *Dossier*) that they indeed, enjoy and appreciate pre/teens, as exhibited in this excerpt from 2006 graduate Christine “Chisa” Barroga's *Précis*:

.... Many educators have said time and time again, students do not care how much you know until they know how much you care. “It is only when students feel a connection with their teachers – when students believe that they are recognized, respected, and valued – that teachers are in a position to make a difference in students’ lives” (DuFour & Eaker, 1998, p. 281).

Building connections and showing the students how much I **do** care about them is a very important part of my curriculum.... The many Tribes activities (Exemplar #13 [sample lessons]) that I do with them in Advisory and my other curriculum areas help them see how human I am. It sets the foundation for the “talk story” time I engage in with them throughout the entire year. I am very proud of the closeness I am able to achieve with many of my students (Exemplar #73 [photos]). (Barroga, 2006, p. 86)

The other stipulation regarding educators from *TWB* (NMSA, 2003), that schools are staffed with professionals who are *prepared* to work with young adolescents, is the goal of the entire MLMED Program, our five *Standards* and their detailed *Benchmarks*. Evidence of the attainment of this goal will be provided in *Learning and Assessment*, where the *Portfolio* is described in detail.

Besides describing educators in excellent middle level schools, *TWB* (NMSA, 2003) specifies that school cultures must be characterized by *courageous, collaborative leadership* and *a shared vision that guides decisions* (Table 1). We can make a claim to the *collaborative leadership* and *shared vision* criteria on several counts. For one, faculty members choose to be in the MLMED – no one is assigned to the program. Both our O‘ahu and Maui teams are comprised of a blend of full-time university professors and part-time lecturers. Most of the latter hold full-time HIDOE teaching or staff-development positions, and three are MLMED graduates

– people who are grounded in the real world of classrooms and schools. The faculty team is almost as diverse as the participants, consisting of ten women and two men, and two persons of Hawaiian ancestry, one Filipino and two Asian.

The common passion of the faculty team, like the participants, is young adolescents and their education. The faculty meet at least monthly to discuss curriculum, administrative issues and student progress – much like a middle level team. The monthly MLMED seminars, attended by all faculty and students, allow governance and procedural issues to be brought before the whole group for decision by consensus. Among such decisions are seminar topics, scheduling of classes, and assessment of *Portfolios*. We also assure that participant voices are heard loud and clear through the anonymous surveys completed every semester and at the program opening/closing Retreat – this feedback has alerted faculty to concerns about workload and unequal expectations, among other issues.

The MLMED promotes and assesses collaborative leadership by participants in their professional contexts by making this a topic of study and discussion throughout the program. No other *Benchmarks* have generated so much discussion, trepidation, and ultimately success, as Standard Five's *Leadership Within (B1)* and *Beyond Your School (B2)*. Participants in every cohort have raised concerns that the leadership requirement may violate “local culture,” since it is not *ha'aha'a*, Hawaiian for humble, an important value (Pukui & Elbert, 1992³; pronounced, ha-ah ha-ah). Many have insisted that they would never put themselves above peers by doing presentations or other high profile leadership activities, but would undertake more culturally-compatible leadership by *talking-story*, or having information ready if it is requested (*talk-story* is a give-and-take conversational structure common in Hawai'i; c.f., Vogt, et al, 1987). Faculty members have readily accepted such low-key approaches to leadership – a crucial aspect of

collaboration, as well as cultural sensitivity. Ironically, we have found that once our participants complete the initial Adolescent Development class and get energized by the cohort, they quickly expand their leadership efforts, often insisting on conducting presentations for their faculty!

While the MLMED was explicitly designed to promote locally based leadership in middle level education, the extent to which participants have assumed and/or constructed such roles has exceeded our wildest expectations, as illustrated in Table 3. And again, these accomplishments are all the more remarkable for participants who are predominantly female and of Asian and/or Pacific Islander ancestry.

Insert Table 3 about here

Relational Supports

Like a good middle level school, the heart of the MLMED is its *Relational Supports*, consisting of *organizational structures that support meaningful relationships and learning*, and a *culture that includes an inviting, supportive, and safe environment* (Table 1; NMSA, 2003). Foremost of these is our team-like cohort. These fairly large (for a graduate level class) cohorts of twenty-five to thirty-five professionals from diverse contexts could simply remain groups, rather than teams or *'ohana* (Hawaiian for family). Therefore, we begin the program with relationship building in an overnight Retreat for the incoming and graduating cohorts at a YMCA camp on a remote beach. Barriers rapidly disappear and bonds are built across faculty-student, public-private school and various geographic, gender and racial/ethnic divides. This is accomplished through hilarious team-building activities, a collaborative exploration of everyone's needs and expectations, good food, lots of laughs and Standard Six – the student-generated standard that calls for *pa'ina* (Hawaiian for party or celebration).

The *aloha* (Hawaiian for love, friendship, compassion) generated at the Retreat is further supported by smaller groupings called Home Bases, much like a middle level advisory group. We compose the Home Bases of about six participants from the same or nearby schools. Participants are encouraged to enroll in the MLMED with multiple colleagues from a school – a cadre – as a support group and a nucleus for change. We have had several school cadres that were large enough to constitute entire Home Bases. Having school colleagues in the program is a blessing for the participants, since they can collaborate on school improvement projects, carpool together, and provide close support during crises at home or work.

Further support for the Home Bases is provided by a faculty Advisor – an *[adult] advocate for every student* who provides *multi-faceted guidance and support services* (Table 1; NMSA, 2003). As noted earlier, the Advisor and their Home Base spend a minimum of three hours together each month in the interdisciplinary seminars. These school-year seminar sessions typically are divided roughly in thirds: 1) programmatic, administrative and governance issues; 2) discussion of a “hot topic,” usually related to issues of diversity; and, 3) advising regarding participants’ projects, professional contexts and their *Portfolios*. The Advisor serves as the first reader of their Home Base’s *Portfolios*, so the ongoing support and feedback are vital to participants’ completion of this complex process. Participants universally credit their Advisor and Home Base as crucial factors in their survival and success in the MLMED, as expressed by a Cohort 1 graduate in Ashford’s (2002) dissertation research:

.... And that was an important thing.... Dropping out wasn’t really an option. He [Advisor] was always so supportive. ‘Cause several people have said -- you know they came to points where [they said] “Ahhh, maybe I’ll drop out,” and he said, “No, no, no. That's not an option. We can do it this way or this way.” (Ashford, 2002, p 91)

The MLMED is explicitly designed as a partnership (e.g., George, 2004; Goodlad, 1990; Jacobowitz, 1994) between the university and program faculty, and the participants, their families and their schools, consistent with *TWB's school-initiated family and community partnerships* (Table 1; NMSA, 2003). For starters, the great majority of classes are taught away from the university at our Partner Schools, Moanalua Middle on O'ahu, and Maui Waena Intermediate on Maui. This makes an important symbolic statement that the MLMED is grounded in the "real world" of participants' professional contexts, rather than in the "ivory tower" of a university that is viewed by some as a foreboding bastion of colonialism. Benefits to our Partner Schools accrue from presentations and research collaboration by MLMED faculty as well as informal *talk story*. The Partner Schools also gain by having participants in every one of our cohorts, as there are always a least a few teachers who are willing to "commute" to graduate school by walking over to the next building.

The benefits to the MLMED and to our participants of this partnership approach are huge. For one, most O'ahu participants are spared about forty minutes of commuting time by going to Moanalua Middle rather than UHM – and the parking is free and plentiful! The MLMED holds classes in the libraries of our Partner Schools – roomy, pleasant, air-conditioned spaces where everyone can settle in, relax and get ready for class after a long day's work with young adolescents. We have been given space at both sites to set up a professional library stocked with NMSA's latest and greatest which are available to the schools' faculty members as well as our participants.

The MLMED extends its partnership with *efforts and policies that foster health, wellness, and safety* in several ways (Table 1; NMSA, 2003). For one, classes are scheduled in after-school hours every Monday, one Wednesday per month, and during summers, so that they are

predictable and accessible for working participants and families. With the great majority of classes cohorted, participants can march through the two-year program without losing their sanity over confusing course catalogues or getting closed out of overbooked classes. The ready-made class roster also gives us “buying power” to seek out excellent instructors for classes not taught by team faculty – no worries about sufficient enrollment. The healthfulness of the program is furthered by the Home Bases bringing food to get everyone through classes without digestive meltdowns – the program-opening Adolescent Development course addresses nutrition, among other topics, so the “grinds” (food, in Pidgin) are usually reasonably healthy.

Family-friendliness is even more important in Hawai‘i than in most other locales since our families are quite stressed by the astronomical cost of living. This is especially true of our underpaid teachers, as many leave school each day and head to a second job waiting tables, tending bar or other tourism-related occupations. The MLMED eases some of the burden with our family-friendly locations and policies. Participants who have difficulties with day care can bring their *keiki* (child/children in Hawaiian) to class with them. There they are greeted by dozens of “uncles and aunties” ready to help out by holding newborns and entertaining older ones. The libraries and their side rooms offer plenty of diversions and safe space so that there is little or no distraction by the *keiki*, and Mom or Dad can settle down and get to work. There have been cases where a *keiki* has attended so many MLMED sessions that we wondered if we should award them a degree along with their parent!

The MLMED’s *‘ohana* approach, including the family-friendly practices, cohort, Home Base and Advisor, has enabled numerous participants to bear a child (or two!) while enrolled in the program and still graduate on schedule or within a semester or two of their cohort. Many others have encountered the inevitable crises that confront adults, such as illness to themselves or

family members, deaths, divorces, financial strains and more, yet the MLMED's *Relational Supports* (Table 1) pull them through at well over a 90% success rate (Table 2). Such supports are especially important given our substantial number of participants from backgrounds disproportionately likely to encounter such challenges.

It stands to reason that educators who have experienced such *Relational Supports* would be more likely to implement them – with integrity and constant improvement – in their professional contexts. Beyond mere inference, however, we have substantial evidence of such efforts. For example, about two-thirds of the action research projects undertaken by participants in the current O'ahu and Maui cohorts focused on middle level students' social and emotional well-being, while most of the remainder focused on aspects of physical health. Further empirical evidence of MLMED participants' attention to *meaningful relationships; health, wellness, and safety; and multi-faceted guidance and support* (NMSA, 2003; Table 1) will be offered in the next section where the *Portfolio* is described. However, the writing of Cohort 5 graduate and 2007 HAMS C.W. Stevens Middle Level Educator of the Year, Irene Ueda of Stevenson Middle School, typifies the efforts of MLMED participants at meeting the social and emotional needs of their young adolescent charges:

I also created my own "Uedadvisory" (Exemplar 65) to supplement the ready-made worksheets given to us to use in our Advisory program. Although considered to be "extra" work by some teachers, I think that by supplementing the school wide Advisory lessons with my own, I am able to create and apply a true student-centered program that is flexible enough for students to determine their own goals and direction (Miller, 1999). I feel that by using Advisory lessons such as these, I am following the NMSA middle school vision, where "successful middle-level schools anticipate students' needs for

support and provide a connected set of services in the areas of health, wellness, family, peers, and academics” (Van Hoose, et al., 2001, p. 69). (Ueda, 2006, p.73)

Learning and Assessment

The *Organizing Principles* and *Relational Supports* of the MLMED not only help participants to survive the program, but they are the foundation upon which the *Learning and Assessment* components stand, particularly the *high expectations for every member of the learning community* (NMSA, 2003; Table 1).

Foremost among our efforts to support MLMED participants’ achievement is the “backwards design” (Jackson & Davis, 2000, p. 32), wherein our five *Professional Standards* and our formative/summative *Portfolio* assessment process drive the whole program, or more accurately, they put the individual participant in the driver’s seat. In the first semester’s monthly seminars, all participants begin to systematically self-assess relative to each *Standard* and the detailed *Benchmarks* under it. As they get a clear idea of their strengths, as well as *pukas* (gaps) in their knowledge and accomplishments, participants are empowered to get what they need from the program. This knowledge guides their choice of projects in particular courses as well as their choice of elective classes in our *Exploratory Wheel*.

One of the first and best decisions we made in designing the MLMED was to construct our *Portfolio Assessment* process, instead of the traditional rigid, decontextualized, after-the-fact masters thesis. As noted, our *Portfolio* process immediately acculturates participants into self-assessment, reflection and self-direction, thus serving as a strong formative assessment tool for both participants and faculty – *assessment and evaluation programs that promote quality learning* (NMSA, 2003; Table 1). The MLMED *Portfolio* consists of two items – the written *Précis*, typically around seventy-five pages in length, and the *Dossier*, the box or electronic

storage system that holds the *Exemplars*, or artifacts. In each *Benchmark* section of the *Précis* the participant must describe, critique and link three components: 1) specific elements of the *Benchmark*; 2) relevant professional literature; and, 3) their own professional practice, as demonstrated in several *Exemplars*, i.e., B-L-E – *Benchmark-Literature-Exemplars*. The types of *Exemplars* offered are as varied as our participants and their professional contexts:

- Lesson plans and materials
- Samples of student work and/or instructor feedback
- Annotated video-recording class sessions, parent conferences, or professional presentations
- Samples of professional writing – team newsletters, school documents and reports
- Applications for grants, sabbaticals, other competitive opportunities
- Interdisciplinary curriculum plans
- Minutes of team, task force or other meetings
- Records from parent and/or student conferences, phone calls
- Intervention plans for addressing special student needs
- Articles, reviews and academic papers
- Letters or notes to/from students, parents, colleagues or community members
- Photos and descriptions of projects or activities
- Evaluations of teaching by students and peers
- Evaluations from workshops and presentations

Middle level students' work generally provides the surest evidence that a good idea successfully made it all the way to the "end user." So the three or four *Exemplars* provided under a given

Benchmark generally include some student- and participant-generated items, and often an external document, such as a task force report, all of which are explained B-L-E in the *Précis*.

For a *Portfolio* to pass muster requires a rating on our *Rubric of Adequate* or better by both the Advisor and Reader on each *Benchmark*. Combined with the detail and specificity involved in the process, this virtually assures that every MLMED graduate *has met high expectations* and is *prepared to...work...with this age group* (NMSA, 2003; Table 1) – the proof is in the box! The tremendous accomplishments of our participants/graduates (Table 3) are further support for this claim. When both the Advisor and Reader assert that a participant's *Portfolio* is ready, a public presentation is held – because of our collaborative ethic, we do not use the traditional term of “defense.” Our *Portfolio* presentations are festive events, often held in faculty members' homes, and frequently attended by participants' family and friends. And of course, there are always *ono grinds* (delicious food)! While we have experienced growing pains in getting everyone on the same page regarding the construction and assessment of our *Portfolios*, this has ultimately been hugely rewarding, and highly empowering for participants, as expressed in this confidential survey response by a Cohort Two graduate:

The *Portfolio* has emboldened me to be more of a risk taker; to have a vision beyond what is now and to see where I would like to see my school going. To dream for my school all the things that I think will make it a great school. Having a *Portfolio* gives me professional credibility that I might not otherwise have. (Ashford, 2002)

The cohorted classes that comprise the bulk of the MLMED (Table 4) all employ *assessment and evaluation... that promote quality learning* (NMSA, 2003; Table 1). All of these classes emphasize mastery rather than seat time as the criterion for evaluation – thus, we employ a system of only three letter grades: *A*, *B*, or *I* (Incomplete). Furthermore, everything is

considered a “work in progress,” so we encourage revision of a project till both the participant and faculty member(s) are convinced that it is excellent. This revision process often extends beyond the artificial limitation of a fifteen-week semester, which simply results in the faculty member submitting a *Change of Grade* when excellence has been achieved. This eliminates the “death sentence” of a low grade on a project or course, and assures that participants’ efforts in their professional contexts meet the highest possible level of excellence.

Insert Table 4 about here

MLMED classes allow a great deal of latitude for participants to pursue content, processes and products that will benefit themselves and their students in their professional contexts – *curriculum that is relevant, challenging, integrative, and exploratory* (NMSA, 2003; Table 1). Criteria for most projects not only permit, but encourage, collaborative school improvement projects (Table 1), often undertaken by school cadres, and sometimes by multi-school configurations. For example, school cadres have designed advisory programs, interdisciplinary curriculum, anti-bullying programs, parent involvement initiatives, and made numerous staff development presentations. Multi-school projects have included: efforts to support new teachers; development of multi-cultural and fine arts curricula; investigation and refinement of homework policies; promotion of physical activity; and development of programs to ease the transition between school levels.

It should be apparent that with so much student-direction and collaboration in the learning process, that the MLMED *promotes multiple learning and teaching approaches that respond to... diversity* (NMSA, 2003; Table 1). Everything in the program, starting with the introduction to our *Standards*, calling for “knowledge of, competence with, and *inquiry into...*” (MLMED, 2008; italics added), promotes a critical stance toward knowledge and one’s

professional context – there is never “one right way” to do anything, least of all, implementing the recommendations of NMSA, Carnegie or MLMED faculty in multicultural schools. The faculty members also make a conscious effort to be aware and respectful of participants’ diversity, for example as described earlier in the discussion of conceptions of leadership. We also promote such sensitivity with participants regarding their own students. Evidence of such valuing of diversity, as well as *students [participants] and teachers [university faculty] engaged in active learning* (NMSA, 2003; Table 1), can be found in several collaborative publications regarding multicultural educational practices (Deering, et al, 2003a,b; Deering, et al, 2005; Deering, et al, 2006), for example:

.... Curriculum is brought to life with projects where cultural heritage and adolescent concerns are the stuff of learning, thereby reinforcing family relationships and cultural pride. This does not happen when schools rely on the latest textbook or activity package from publishers thousands of miles away. (Deering, et al, 2005, p.20)

Each semester of the MLMED is focused around a theme, expressed in the form of one or more questions, as with this example from the first summer: *Who are early adolescents? What do they need at school, home, in the community* (Table 4)? Each semester, courses focus on the theme and on the particular *Benchmarks* that relate to it, helping to assure program coherence and thoroughness. Most participants find the initial class on adolescent development to be the most beneficial in the program, while the two research courses are cited by many as the most difficult as well as having the most impact in expanding their sense of professionalism. At the end of all the course work, the participant has addressed all the MLMED *Standards* and their specific *Benchmarks*, and they prove this in their *Portfolio* – processes that draw upon all fourteen *TWB* components (NMSA, 2003; Table 1).

Looking Backward and Forward

It has been incredibly rewarding riding the MLMED wave in trying to improve middle level education in Hawai'i and beyond. The makeup of the faculty team has changed with each new cohort, while the structure has evolved gradually, always consistent with *TWB's* fourteen points (NMSA, 2003; Table 1). The *Organizing Principles* guide our emphasis on professionals who enjoy young adolescents and are prepared to exert leadership on their behalf. The *Relational Supports* are embodied in our 'ohana cohort structure, our advisory/home bases and faculty advisors, our school cadres, and our educator- and family-friendly policies. The *Learning and Assessment* elements are found in our *Portfolio*, and our high degree of academic support and participant self-direction.

We will begin a new O'ahu cohort in May 2008, and graduate the current O'ahu and Maui cohorts in August of the same year. Our next metamorphosis will be to take the program into cyberspace. Recent advances in distance education technology have convinced the faculty that we can do a good job of maintaining the MLMED's highly personalized approach and the *TWB* components (NMSA, 2003; Table 1) in an online format. We plan to begin the program with a week of in-person orientation and getting acquainted during July 2009, deliver instruction entirely online, and provide ongoing support with on-site Advisors and annual visits by University of Hawai'i faculty. We have many colleagues and friends on Hawai'i's Neighbor Islands and the mainland US, as well as in Australia, New Zealand and Samoa who have expressed interest in the program, so this will finally give them access. *Want to join us?*

The dramatic accomplishments of MLMED participants (Table 3) indicate that middle educators of any ethnicity or gender can and will step forward as leaders when supported by an empowering professional development program. One final statistic: Of the 192 MLMED

participants to date, only four have left education prematurely (one of these for full-time parenting), a vastly greater teacher retention rate than for the profession as a whole (Ingersoll, 2001). Between the accomplishments and the resiliency of MLMED participants, it is clear that *This We Believe's* (NMSA, 2003; Table 1) components provide a very empowering framework for teacher education – try them in your context and see. The old truism is definitely true:

Educators of young adolescents are just like the students – as learners!

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Table 1

Components of This We Believe (NMSA, 2003) and MLMED Structures and Practices

<i>This We Believe</i> – Effective Middle Schools:		MLMED Structures and Practices
Characterized by a culture that includes	Provide	
Organizing Principles		
Educators who <i>value</i> working with this age group and are <i>prepared</i> to do so	All items in table	Admission statement and Standard 5 Benchmark “enjoyment and appreciation” – <i>value</i> Entire program – <i>prepared</i>
Courageous, collaborative leadership A shared vision that guides decisions	All items in table	Interdisciplinary faculty team of university and school personnel Student input on all aspects of program Participant leadership via Standard 5 Benchmarks requiring “within” and “beyond school” leadership
Relational Supports		
An inviting, supportive, and safe environment An adult advocate for every student School-initiated family and community partnerships	Organizational structures that support meaningful relationships and learning School-wide efforts and policies that foster health, wellness, and safety Multi-faceted guidance and support services	Team-like cohort Pre-Post-Retreat Home bases with faculty advisor Cadres of from same school (current and former participants) Monthly program seminars with advisor Educator- and family-friendly environments and policies
Learning and Assessment		
Students and teachers engaged in active learning	Curriculum that is relevant, challenging, integrative, and exploratory	Student-directed projects Collaborative school improvement projects

High expectations for every member of the learning community	Multiple learning and teaching approaches that respond to their diversity Assessment and evaluation programs that promote quality learning	Clear, research-based standards Student-directed projects A-B-I Grading; revision encouraged Portfolio as formative and summative assessment
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Table 2

Characteristics of MLMED¹ Participants

Characteristics	Mean Percent ⁶
<u>Personal</u>	
Ethnicities Underrepresented in Teaching Force ²	38
Japanese, Chinese, Korean Ancestry	42
European Ancestry / Caucasian	23
Female	71
Age 35 or over entering program	44
<u>Academic</u>	
Entered Under Academic Probation	18
Graduation Rate ³	91
<u>School Context</u>	
Distant/Outlying ⁴	49
Low-Income ⁵	48

Note:

1. MLMED = Master of Education Degree in Curriculum Studies with a Middle Level Emphasis Program at the University of Hawai'i at Manoa.
2. Hawaiian; Filipino/a; other Pacific Islander; South or Southeast Asian; Latino/a; Native American; African American.
3. Students either have graduated or are still in the program; O'ahu-6 and Maui-1 Cohorts are due to graduate in August 2008.
4. Greater than one hour's travel from the University of Hawai'i at Manoa.
5. Low-income schools = $\geq 33\%$ of students on free/reduced-cost lunches.
6. N = 192

Table 3

Notable Accomplishments of MLMED¹ Participants

Professional Context & Accomplishment	N
National/International Conference Presenter	45
University Teaching	8
Regular or Acting School Administrator	8
HAMS²	
Board Member	16
President	8
C.W. Stevens Middle Level Educator of the Year	
Nominee / Recipient	11 / 5

Note:

1) MLMED = Master of Education Degree in Curriculum Studies with a Middle Level Emphasis

Program at the University of Hawai'i at Manoa

2) HAMS = Hawai'i Association of Middle Schools; Board = 18 members

Endnotes

¹ Overall, violent crime rates in Hawai'i are far lower than for comparable U.S. mainland areas, however, property crime rates are fairly high.

² Hawai'i annually ranks in the bottom quartile of all U.S. states on teacher pay and per-student funding (e.g., Education Week, 2004) .

³ This source is used for all Hawaiian language translation.