

THE PRACTICES AND CHALLENGES OF CLINICAL SUPERVISION IN GOVERNMENT  
SECONDARY SCHOOLS OF JIMMA ZONE OF OROMIA REGIONAL STATE

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## Declaration

The researcher hereby declares that the thesis entitled, “*The Practices and Challenges of Clinical supervision in Government Secondary Schools of Jimma Zone*”, is his original work and that all sources that have been referred to and quoted have been dully indicated and acknowledged with complete references.

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LETTER OF APPROVAL

This is to certify that the thesis prepared by TADESSE GELETA YADETA with the topic “the practices and challenges of clinical supervision in government secondary school of Jimma Zone of Oromia regional state” and submitted in partial fulfillment of the requirements for the Degree of master of Arts in Educational Leadership complies with the regulation of University and meets the accepted standards with respect to originality and quality.

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## **List of Acronyms and Abbreviations**

**ACES:** Association for counselor Education and Supervision.

**ANOVA:** Analysis of variable.

**CS:** Clinical supervision.

**DH:** Department Heads.

**ESDP:** Education Sector Development Program.

**GEQIP:** General Education Quality Improvement Package.

**MOE:** Ministry of Education.

**REB:** Regional Education Bureau.

**PSSS:** Professional Standard for school Super visor.

**SP:** School Principals.

**SPSS:** Statistical Package for Social Science.

**UNESCO:** United Nation Education Scientific and Cultural Organization.

**WEOSC:** Woreda Education Office Supervision Coordinators.

**ZEO:** Zonal Education Office.

## **ABSTRACT.**

*The purpose of this study was to assess the practices and challenges of clinical supervision in government secondary schools of Jimma Zone. Four research questions were formulated, which assesses the extent to which teachers understand about the roles of clinical supervision in secondary schools of Jimma Zone, the procedures of clinical Supervision employed in classroom in the secondary schools, the extent to which is clinical Supervision contributing for teachers' professional growth and the challenges existing in the implementation of clinical supervision. To conduct this study, the descriptive survey method was employed. Among the 32 government secondary schools found in Jimma Zone, 10 of them were selected randomly as sample schools. From these sample schools, 10 principals and 7 secondary school supervisors from Woreda Education Office supervision coordinators were included as respondents using purposive sampling technique. Furthermore, 138 teachers and 60 school supervisors have participated in the study through random sampling technique. Questionnaire was used as main tool of data collection. Interview, observation and document analysis were used to substantiate the data gathered through questionnaires. Frequency, percentage, Chi-square and ANOVA were utilized to analyze quantitative data gained through the questionnaires while qualitative data gathered thorough interview, observation and document analysis were analyzed through narration. The result of the study indicated that teachers lack awareness and orientation on the significance, purpose, objectives and other activities of clinical supervision, and inability of supervisors to utilize the necessary structural procedures of clinical Supervision for classroom observation properly. As a result, many teachers of the schools under this study area could not acquire the experience needed and remained dependent professionals. On the other hand, among the factors influencing the clinical supervision; lack of regular class visit, lack of relevant training programs for supervisors, lack of experienced supervisors in clinical supervision activities, lack of supervision manuals in the schools and shortage of allocated budget for supervisory services. Finally, to reduce the problems of clinical supervision in secondary schools, it is recommended to give relevant in-service trainings for supervisors to upgrade their supervisory activities, necessary resources such as supervision manuals and adequate budget for the success of supervision at the school level were suggested.*

## CHAPTER ONE: INTRODUCTION

### 1.1. Back ground of the study.

Supervision has existed in all countries for many decades and occupies a pivotal position in the management of education, which can be understood as an expert technical service most importantly concerned with scientific study and improvement of the conditions that surrounds learning and pupil growth (Alemayehu, 2008). According to Vashist (2004), supervision is leadership and development of leadership educational objectives, studying the teaching-learning situation to determine the antecedents (the conditions before) of satisfactory and unsatisfactory pupil growth and achievement, and improving the teaching learning process. However, supervision has been a neglected area of education management for a long time. During the 1970s, the word inspector or even supervisor had a negative connotation and even became a taboo term in some countries. Inspection was seen as an old fashioned, non-democratic institution and a few countries got rid not only of the terminology, but also of the supervision service itself. Nevertheless, since the beginning of the 1990s, there has undoubtedly been renewed worldwide interest in issues of quality and therefore in quality monitoring and supervision. Some countries that had dismantled their supervision services earlier have re-established them (such as the Philippines), while others that did not have them in the past have created them (such as China and Sweden). More importantly, the number of countries that initiate a process of reorganizing and strengthening supervision services is increasing every year (UNESCO, 2007).

Haynes, Cory, and Moulton (2003) state that: "... a primary aim of supervision is to create a context in which the supervisee can acquire the experience needed to become an independent professional." Haynes, (2003) also state that supervision is artful but it is an emerging formal arrangement with specific expectations, roles, responsibilities, and skills.

In the second half of the century the field of supervision became closely identified with various forms of clinical supervision. Initially, it developed by Harvard professors: Morris Cogan and Robert Anderson and their graduate students. For the writers, clinical supervision blended elements of "objective" and "scientific" classroom observation with aspects of collegial coaching, rational planning, and a flexible, inquiry-based concern with student learning.

In line with this idea, Krajewksi, (as cited in Linda, 2012) stated that "...the concept of clinical supervision has begun in the late of 1950's at Harvard University. However, it has gained slow

acceptance for more than ten years’’. The initial practice of clinical supervision, however, soon had to accommodate perspectives coming out of the post-sputnik curriculum reforms of the 1960s that focused on the structures of the academic disciplines. Shortly thereafter, perspectives generated by research on effective schools and effective classrooms that purported to have discovered the basic steps to effective teaching colonized the clinical supervision process. It was during this period that noted educator Madeline Hunter adapted research findings from the psychology of learning and introduced what was also to become a very popular, quasi-scientific approach to effective teaching in the 1970s and 1980s. These various understandings of curriculum and teaching were frequently superimposed on the three-to five-stage process of clinical supervision and became normative for supervisors' work with teachers. Nevertheless, in many academic circles the original dialogic and reflective process of Cogan and Gold hammer continued as the preferred process of supervision. This original process of supervision has been subsequently embraced by advocates of peer supervision and collegial-teacher leadership through action research in classrooms. Despite the obvious appeal of clinical supervision in its various forms, it is time-consuming and labor-intensive, rendering it impossible to use on any regular basis given the large number of teachers that supervisors are expected to supervise (in addition to their other administrative responsibilities).

According to Glickman (2010), clinical supervision is a method of supervision whereby the supervisor is involved with the teacher in a close, “helping relationship”. Essentially, clinical supervision in education involves a teacher receiving information from a colleague who has observed the teacher’s performance and who serves as both a mirror and a sounding board to enable the teacher critically examine and possibly alter his or her own professional practice. Within the context of such supervision, ideas are shared and help is given in order to improve the teacher’s ability through the analysis of objective data that is collected during the observation (Glickman et al., 2010).

Supervision in African countries is also similar to the Asian trend and has common features to share. In Botswana, for example, attention has been given in providing in-service training and guidance to teachers and support in curriculum development (Grauwe, 2001). Grauwe(2001) further discussed that the Tanzanian supervision service focused on the implementation of government policies and regulation, ensuring the effectiveness of the implementation of the school curriculum i.e. giving advice when and where appropriate, holding conferences, and meetings with school staff and to support and monitor teachers resource centers. School supervision in both the African and Asian Countries, mainly

focused on advising and supporting teachers such as providing in-service training, preparing seminars, organizing workshops and meetings with staff members so as to make them effective in the teaching profession.

In Ethiopia as well, supervision is also development oriented and supervisors are responsible for helping schools to improve the quality of their education under quality education initiative called ‘General Education Quality Improvement Package (GEQIP) which has started since 2007 (MOE, 2008). Furthermore, the Ministry of Education (MOE, 2010), in its Education Sector Development Program (ESDP IV), has stressed the necessity of teacher supervision and support as a strategy to insure quality of teaching and learning. In addition to this, Beach and Reinhartz (2000) indicated “if schools are to improve the quality of instruction, it will be at the local building with the teacher at the heart of the improvement process (productivity through people).”

According to Wanzare and Costa (2000), the purpose of instructional supervision is to focus on teachers’ instructional improvement which, in turn, improves student academic achievement. In similar vein, Glickman et al. (2001) examine clinical Supervision as an activity that takes place in a building (in a classroom) mainly through observation and evaluation of the teaching process and described as Direct Assistance. In addition to this, the study conducted in Nigeria indicates clinical supervision of instructions is a supervisory package designed to help teachers improve on instruction and increasing professional growth. The findings from the research suggest that modified clinical supervision is gradual on teachers in that it induces some level of effectiveness on the teachers through supervisors (Ogbo, 2013). Supporting this idea, Acheson and Gall (1977) and Haileselassie (1997), (as cited in Abebe, 2014), stated that “Clinical supervision refers to face to- face contact with the supervisor and the teacher intent of improving instructions and increasing professional growth.” It is assumed that a one- to one correspondence exists between improving classroom instruction.

Cogan, (as cited in Alemayehu, 2008), explained that “Clinical supervision is the rational and practical designed to improve the teachers’ classroom performance. It takes its principal data from the events of the classroom. The analysis of this data and the relationship between teacher and supervisor form the program, procedures and strategies designed to improve the students’ learning and improving the teacher’s classroom behavior. Alemayehu,(2008) stated as: “...clinical supervision as a process for developing responsible teachers who were able to evaluate their own instruction, who were willing to

accept criticism and use it for change, and who knew where they were headed in their own professional growth.” According to Brennen (2000), the main purpose of clinical supervision is to give assistance for teachers so that they enhance their professional performance. Accordingly, clinical supervision is an important determination for teachers’ professional performance and therefore, the supervisors need to implement clinical supervision in schools.

In this study therefore, an attempt is made to assess the current practices of clinical supervision & existing challenges in professional development procedures in clinical practice. The interest to take as an area of the study emanates from the real observation of the problem since the researcher has been working in the area for more than four years. Besides, being supervisor of schools, the researcher had opportunity to participate in Education conferences often held at woreda & Zone level & thereby the researcher observed comments raised regarding supervisory activities & monitoring system of classroom. Indeed, these and own experience inspired the researcher to look into the problem closely. Clinical supervisors for the purpose of this study include: Senior teachers, Unit leaders, department heads, school principals, vice principals, & Secondary school supervisors from WEO.

## **1.2. Statement of the problem**

Supervision is a leadership process whose ultimate purpose is to improve instructional quality and thereby, facilitate and promote successful student learning. The primary objective of clinical supervision process in schools is to offer teachers direct assistance to improve their performance toward the goal of increasing students’ learning (Glickman et al., 2001). Adding to this, Wanzare and Costa (2000) also stated that the overarching purpose of supervision is to enhance teachers’ professional growth by providing them with feedback regarding effective classroom practices. Several literature have discussed the effect of clinical supervision towards teaching performance of teachers and those findings show that clinical supervision is still needed because the teachers have not reached the level of being dynamic, knowledgeable and skillful(Holland, & Adam, 2002; Baharom, 2002; Radi, 2007; Zepeda, 2007).

However, the Practical observation shows the ineffectiveness of clinical supervisors. School supervisors lack the necessary supervisory skills; they are not actually prepared to support teachers effectively, and are always busy with other non-instructional concerns. In line with this, Wanzare,(2001).Pointed teachers’ lack of feedback and follow-up on matters regarding supervision of



instruction and supervisors' not taking much time when they visit classroom are another challenge .Furthermore, studies conducted in some African countries reveal that the involvement of supervisors in administrative tasks takes up more than half of supervisor's time in Botswana and Namibia and just about half in Zimbabwe. What should be priority, pedagogical supervision and support, thus occupies second place (Grauwe, 2001) as cited in Olana (2013).

On top of that, teacher supervision in many cases is not announced. What is indeed more important than the convictions of supervisors is the practical constraints they experience. That is, many visits take place unplanned; many planned visits cannot be held as foreseen, and schools are difficult to contact because of poor communication (Grauwe, 2001). Supporting this idea, the Education Sector Development Program IV of Ethiopia (2010) states that:

“...many offices however do not yet have the required capacity to exercise their responsibilities effectively. School functioning also needs further improvement, in particular concerning school leadership. Irrelevant and uncoordinated training courses have not succeeded in overcoming these challenges: training did not translate systematically into improved work practices.”(P.12).

In Ethiopia, Practicing supervisors of secondary schools face many problems while providing support service effectively and efficiently to their staff members due to lack of training on supervision principles and skills, excessive workload, supervisors attitudinal and procedural, and guidance that are required to perform the complex functions of their position as cited in educational supervision manuals (MOE, 1987). In line with this idea, a research conducted by Alemayehu (2008) shows that the subject-area instructional supervision practiced in Addis Ababa City Administration (AACAA) has exposed to multiple problems such as, lack of adequate support to newly deployed teachers, less amount of classroom visits and peer coaching by instructional supervisors, focus of supervisors on administrative matters than on academic issues and less mutual professional trust between supervisors and teachers. Adding to this, a research conducted by Olana (2013) indicates that supervisors were incapable to utilize the procedures and strategies of clinical supervision. Subsequently, supervision services failed to improve teaching-learning process in secondary schools. Furthermore, study by Haliza (2005) and Baharom (2002), found that clinical supervision has not been administered adequately. Adding to this, a study by MohdZaki (2001), as cited in Veloo et al, (2013) discovered that

principals neglect to supervise their teachers and if otherwise, the supervisions are bureaucratic, autocratic and hierarchical.

Even though the researches of these researchers conducted in different areas of Ethiopia pointed that ineffective practices of clinical supervision in the schools, most of the studies were conducted in primary schools and were not focused on the practices of clinical Supervision in secondary schools and to the best knowledge of the researcher, there were few studies that were conducted in secondary schools particularly on clinical supervision. Therefore, the intention of this study, apart from the studies indicated so far; focused on internal supervision and concentrate on the practices & challenges of clinical supervision in secondary schools. To the best of the researcher's knowledge, there is scarcity of studies which focus on class-room supervisory practices in secondary schools of West Oromia, particularly, in Jimma Zone. As a result, the researcher feels that there is a gap that needs to be assessed comprehensively about the current practices of clinical supervision in secondary schools of Jimma Zone, Oromia Region.

The main purpose of the study is to assess the practices of clinical supervision in secondary schools of Jimma Zone and the major challenges that might have been encountered in promoting supervisory services in secondary schools. To address this, the study seeks to provide answer to the following basic questions.

1. To what extent do teachers understand about the role of clinical supervision in secondary Schools of Jimma Zone.
2. To what extent do Supervisors employ the procedures of clinical Supervision in the Secondary schools?
3. To what extent is Clinical supervision contributing to teachers' professional Development in schools under the study?
4. What are the major challenges that school supervision is facing currently in implementing clinical supervision?

### **1.3. Objectives of the Study**

#### **1.3.1. General Objectives.**

The general objective of this study was to investigate the practices and challenges of clinical supervision in government secondary schools of Jimma Zone.

#### **1.3.2. Specific Objectives**

The specific objectives of the study were:

1. To describe the understanding of teachers about the activities of clinical supervision in government secondary schools of Jimma Zone.
2. To identify the extent to which the procedures of clinical supervision are being employed in the schools under the study.
3. To find out the extent to which the clinical supervision contributes to teachers' professional growth in the schools under the study.
4. To identify major challenges affecting the practices of clinical supervision in secondary schools of the Jimma Zone.

#### **1.4. Delimitation of the Study.**

The study was related with the assessment of the practice of clinical supervision and challenges that are currently hindering in the secondary schools of Jimma Zone. It might produce good result if the study included all Secondary Schools in Jimma Zone. However, to make the study more manageable and to complete within the time framed, it was restricted to ten government Secondary Schools in the Zone. These are Limmu Genet, Atnago, Koma, Yebu, Gembe, Agaro, Seka, Serbo, Aba buna, and Seto Secondary Schools.

Besides, Woreda Education offices Supervision Coordinators (WEOSC) who are responsible to supervise and support Secondary School supervisors were included in the study. Because the researcher believed that these bodies were responsible for teachers' professional development and

school improvement. According to the current arrangement of supervision, the center or the office of Secondary School Supervisors is within the schools so that they directly visit classroom instruction and provide professional and technical support for teachers (MOE, 2013).

Conceptually, the study focused on assessing the practice of clinical supervision. Specifically, it encompassed such things as the understanding of teachers about the issue, the procedures and techniques of class-room supervision, the professional development of teachers and factors that affect the practices of clinical supervision as the researcher believed that these were the core issues to treat clinical supervision.

### **1.5. Significance of the Study.**

The improvement of teachers' professional growth and students' learning is the general purpose of clinical supervision. In view of this, it is believed that the study could be significant for the following reason:

The result of the study may help Zone Education Department, Woreda Education Offices and Secondary Schools to understand the problems of clinical Supervision so that they will come up with workable solutions to the problems.

It may initiate and provide awareness to school supervisors, principals, school-based supervisors (Vice Principals, department heads and senior teachers) and teachers with current and pertinent information regarding supervisory techniques and support in order to contribute their share to the growth of their Schools. In addition, it may also serve as a starting point for other researchers who are interested to do research in this area.

### **1.6. Limitations of the study**

The school supervisors and principals were very much busy to fill the questionnaire and to conduct the interview schedules. Similarly, some of the school principals had no willingness to be interviewed. As well, some of the teachers were not cooperative to complete the questionnaires on time. However, the researcher managed these shortcomings through patiently discussing with teachers and supervisors and arranged an additional time to bring the paper in its complete form. The observation was conducted only in five schools due to the observation program was not usual in school and this could limit the validity of the study. In addition, the findings of the study might not include all secondary schools in

the Jimma Zone since the researcher selected 10(31.3%) out of 32 secondary schools in the zone. Similarly, of 494 population, only 215(43.52) were sampled. However, since the researcher sampled schools of the study from strategic areas of the Zone, the findings can represent all secondary schools of the Zone.

### **1.7. Operational Definitions of key terms.**

**Administrative duties:** support activities pertaining to non-pedagogic but supporting the academic activities in the school such as investigating complaints involving teachers, parents and the public, settling disputes and submitting reports. It also includes reporting on equipment, furniture and the state of school buildings and performing related work as required.

**Challenges:** factors that hinder the function of clinical supervision.

**Clinical Supervision:** refers to face-to-face contact of supervisors with teachers with the intent of improving instruction and increasing professional growth. It is the practices of supervisors within the class-room in which they can perceive both teachers' & students' class-room behavior with aim of promoting the effectiveness of teachers and thereby increase the academic achievement of students.

**General Secondary school:** refers to the school system established to offer two years of general education (grade 9 -10).

**Professional Development:** In-service training in the form of workshops, conferences, and symposia, as well as distributing literature about instruction, equip teachers with expertise as a form of professional development.

**School-based supervision:** the supervision that is conducted in schools and that is carried out by principals, vice-principals, and heads of department and senior teachers.

**Supervisory practices:** The practices which include activities supervisors go through and the techniques they employ while performing their roles as instructional supervisors.

## **1.8. Organization of the Study**

This study paper was organized into five chapters. The first chapter comprised the introductory part which contained background of the study, statement of the problem, objectives, significance of the study, delimitation, limitation and operational definition. The second chapter focused on review of related literature pertinent to the research whereas the third chapter dealt about research design and methodology. Chapter four was related analysis and interpretation of the data collected from respondents while the fifth chapter consisted of a summary of findings, conclusion and recommendations. References and appendices which included questionnaire, observation & interview schedule, and other related materials were also a part of the document.

## **CHAPTER TWO: REREVIEW OF RELATED LITRATURE.**

### **2.1. The historical development of supervision.**

#### **2.1.1. World perspective**

Supervision has gone through many metamorphoses. If we look at some of the changes that have occurred in this field since the early days, we can a bit arbitrarily establish historical time frames for the evolution of instructional supervision. In analyzing the development of most aspects of education, we should keep in mind what we might call axioms. Applied to curriculum development, these could include “School curriculum not only reflects but is a product of its time” and “Curriculum changes made at an earlier period of time can exist concurrently with curriculum changes at a later period of time.” The same axioms are valid if we substitute the word supervision for curriculum (*UNISCO, 2007*).

Supervisory behaviors and practices are affected by political, social, religious, and industrial forces existed at the time. Furthermore, traces of supervisory behaviors and practices that existed in earlier days of our country can be found even today among highly divergent practices and behaviors. History is forever with us. However, supervision has come a long way since colonial days, as we can see in Table 1 which outlines the major periods in the historical development of supervision. Not until the establishment of organized schools did the need for specialized school supervisors materialize. When parents and tutors instructed youngsters in the home, these people were, in effect, both teacher and supervisor, but as the population grew, early colonists realized that they needed some formal structure for the education of their young. As schools became established, local school committeemen fulfilled the function of supervisors by giving directions, checking for compliance with teaching techniques, and evaluating results of instruction by the teachers in their charge. In an authoritarian mode, early supervisors set strict requirements for their teachers and visited classrooms to observe how closely the teachers complied with stipulated instructions. Departure from these instructions was cause for dismissal.

**Table 1:** Major Periods in the Historical Development of Supervision

| Period        | Type of Supervision  | Purpose   | Persons Responsible   |
|---------------|--|---|---|
| 1620–1850     | Inspection   | Monitoring rules, Looking for deficiencies  | Parents, clergy, select men,  |
| 1850–910      | Inspection, Instructional Improvement  | Monitoring rules, helping teachers improve  | Superintendents, principals   |
| 1910–1930     | Scientific, Bureaucratic   | Improving instruction ,   | supervising principals, general and special central-Office Supervisor,                          |
| 1930–1950     | Human relations<br>Democratic  | Improving instruction   | Principals, central-office supervisors  |
| 1950–1975     | Bureaucratic,<br>Scientific, clinical, Human relations, Human resources,<br>Democratic   | Improving instruction   | Principals, central-office supervisors<br>school-based supervisors                              |
| 1975–1985     | Scientific, clinical, Human relations, Human resources, Collaborative/collegial, Artistic, interpretive, Peer/coach/mentor   | Improving instruction, increasing teacher, satisfaction, expanding students’ understanding, of classroom events   | Principals, central-office supervisors, school-based, supervisors, peer/coach/ mentor           |
| 1985– Present | Scientific, clinical, <i>Present</i> human relations, Human resources, Collaborative/collegial, Peer/coach/ mentor, Artistic, interpretive, Culturally responsive Ecological | Improving instruction<br>increasing teacher satisfaction, creating learning communities, expanding students’ classroom events,<br><br>analyzing cultural and linguistic patterns in the classroom | School-based supervisors<br><br>peer/coach/mentor<br><br>principals, central-office supervisors |

Source: Surya (2002)



## **2, 1.2. Historical development of supervision in Ethiopia**

Educational Inspection was introduced in to the educational system in Ethiopia about 35 years after the introduction of modern (Western) type of education in to the country. Although available sources do not agree on a specific year, there is evidence to believe that school inspection was for the first time introduced in early thirties. Ato Hiwot Hidaru (1969:28E.C), one of the pioneer inspectors for instance, clearly mentions primary school inspection to have begun in October 19, 1934, E.C.

Among the forces that brought about the need for educational supervision the first was the fast growth of elementary and secondary schools. Secondly, the need for coordination of the various curricula; because the then existing schools, i.e. government schools, and schools run by different foreign nationals were following different curricula and the need arose to bring all to the same standard. Thirdly, and most importantly, it was introduced in order to help teachers in the classroom activities.

Although classifying of inspection/supervision in to stages on the basis of mere changes of terminologies is not quite sound; as the change of inspection to supervision and vice-versa were not based on pedagogies but were rather politically motivated; the classification nonetheless is here made on the basis of that .In this regard, inspection/supervision in the Ethiopian context can be divided in to the following stages. (See Table 2 below).

**Table 2:** Major Periods in the Historical Development of Supervision in Ethiopian context.

| Periods                             | Type of Supervision                      | Purpose   | Persons Responsible |
|-------------------------------------|--|---|---------------------|
| The first period(1934 -1954E.C)     | Administrative Inspection                | <p>1.Direct inspection through visits: collect and compile statistical data on number of students and teachers ,number of classroom and class size and finally produce reports to be submitted to the Ministry of education</p> <p>2.Curriculum related tasks: allocation of suitable textbooks; preparing and developing curricula for all grades</p> <p>3. Staff recruitment: conducting rigorous examination and interviews to recruit teachers.</p>       | Inspector           |
| The Second period(1955 -1973E.C.)   | Instructional supervision                | The major preoccupation of supervisors had been administrative. Activities such as teacher placements and transfers, managing and coordinating national examinations; assisting education officers at various levels with administrative tasks.   | Supervisor          |
| The third period(1974 -1985E.C.)    | Administrative Inspection(re-instituted) | Staff development through in-service training, establishment and strengthening of model schools and planning instructions were put as duties of inspectors. However, 80% of inspectors pre-occupation was focused on administrative, financial, property and utility management. Professional help were more neglected and attention was given to administrative activities.  | Inspector           |
| The fourth Period (1986E.C.to date) | Democratic Educational Leadership        | It is educational program supervision and an important aspect of educational management which envisaged as Democratic Educational Leadership. It seeks the participation of all concerned in all spheres of the educational establishment in terms of decision-making, planning and development of objectives and teaching strategies in an effort to serve the beneficiaries (students) through the continuous improvement of the teaching-learning process. | Supervisor          |

Source: Haileselassie (2007)

## **2.2. Conceptual frame work of clinical supervision.**

### **2.2.1. The concepts and definitions of clinical supervision.**

In the interest of focusing attention on class room supervision, experts distinguish between classroom supervision and out of class supervision (outdoor supervision). With the former clinical supervision and the later as a general. Thus, clinical supervision means in classroom supervision. It is defined by Cogan (1973:11) as "...in-class supervision that proves powerful enough to give supervisors a reasonable hope of accomplishing significant improvement in the classroom instruction". Though general supervision is an important and necessary component of effective supervision, it is not sufficient without clinical supervision.

According to Sergiovanni and Starratt, (as cited by Alamayehu, 2008), clinical supervision refers to face-to-face contact with teachers with the intent of improving instruction and increasing professional growth. In many respects, it is assumed that a one to-one correspondence exist between improving classroom instruction and increasing professional growth and for this reason, staff development and clinical supervision are inseparable concepts and activities. It is a sequential, cyclic and systematic supervisory process which involves face-to-face interaction between teachers and supervisors designed to improve the teacher's classroom instructions (Kutsyuruba, 2003). In addition, Sergiovanni and Starratt (2007) stated that clinical supervision is typically formative than summative in its evaluative approach in order to enable beginning teaches "collaborate to research their practices and improve their teaching and learning" (p. 233). As a result of this, the writers further described that the focus of clinical supervision is not on quality control, rather on the professional improvement of the teacher that guarantees quality of teaching and students' performance (Sergiovanni&Starratt, 2007).

According to Snow-Gerono (2008), the purpose of clinical supervision is to provide support to teachers (to assist) and gradually to increase teachers' abilities to be self-supervising. Adding to this, Harris, ( as cited Veloo et al, 2013), clinical Supervision is a partnership in inquiry where by the person assuming the role of supervisor functions more as an individual with experience and insight than as an expert who determines what is right and wrong.

Clinical supervision focuses on the improvement of teachers' performance through direct interaction of supervisors and teachers in natural settings. It is devoted to diagnosis and formative evaluation. Abeya, (2002:18). Goldhammer et al.,( as cited in Million, 2010), explained as clinical supervision is officially

applicable with: inexperienced beginning teachers, teachers that are experiencing difficulties, and experienced teachers who are in need of improving their instructional performance. Clinical supervision provides a teacher with an action plan to meet instructional improvement goals after conferencing with the supervisor. According to this, McFual&copper (1984) as cited in Alamayehu (2008),the idea of using clinical supervision for evaluation purposes seems untenable considering the models intent to improve teaching, not judge teachers .With similar idea, Glickman et al, (2010) stated that clinical supervision is consistent with formative evaluation, it provides non judge mental assistance aimed at improving the teacher’s instruction. Clinical supervision actually includes but goes beyond formative evaluation by helping the teacher to design and implement an action plan to meet instructional improvement goals. He also added that Clinical supervision is not consistent with summative evaluation; it is not intended to gather data to make judgments about whether teachers are meeting performance criteria for continued employment (Glick man et al, 2010:294).They explain that clinical supervision provides an authentic tool for educators to assist one another by examining data gathered in the class room. It is a direct assistance and gives immediate feedback to teachers in order to improve class room instruction.

For Tanner and Tanner, (as cited in Journal of education 4(8)2013), “...the focus of clinical supervision on actual classroom practices ensures that the process is of practical significance to the teacher”. This intensive development is a way of promoting teacher growth in self-direction and self-confidence by encouraging teachers to make instructional decisions.

According to Glickman (2010), clinical Supervision is both conceptual and structure. He reviewed nine characteristics of clinical Supervision concept:

1. It is a technology for improving instruction.
2. It is a deliberate intervention into the instructional process.
3. It is goal oriented, a combining the school needs with the personal interests of those who work within the school.
4. It assumes a professional working relationship between the teacher(s) and the Supervisor(s).
5. It requires high degree of mutual trust, as reflected in understanding, support and commitment to

growth.

6. It is systematic, although it requires a flexible and continuously changing methodology.
7. It creates a productive (i.e. healthy) tension for bridging the gap between the real & the ideal.
8. It assumes that Supervisor knows a great deal about the analysis of instruction and learning and also about productive human interaction.
9. It requires both pre-service training (for Supervisors) especially in observation techniques, and Continuous in-service reflection on effective approaches. (Glickman, 2010:288).

### **2.3. Structures of Clinical Supervision**

The structure (procedures) of clinical supervision was developed by Gold hammer and Cogan in the late 1960s. This modal utilizes a collaborative approach by supervisor and teachers to constructively and continually improve instruction as cited in (Kutsyuruba, 2003; Million, 2010; Veloo et al, 2013 & Abebe, 2014). Acheson and Gall (1997) explain the clinical model to include three basic processes: pre-observation, observation, & post or feedback conference. This direct interaction between teachers and supervisor emphasizes an accurate understanding of practices and specifically identities areas of improvement (Alemayehu, 2008).

However, recent research recommended that the five-stages proposed by Goldhammer. Accordingly, Robert Gold hammer (1969) proposed the following five-stage process in clinical supervision: (1) a pre-observation conference between supervisor and teacher concerning elements of the lesson to be observed; (2) classroom observation; (3) a supervisor's analysis of notes from the observation, and planning for the post-observation conference;(4) a post-observation conference between supervisor and teacher; and (5) a supervisor's analysis of the post-observation conference. (Alemayehu,2008; Million,2010; Olana,2013 & Abebe, 2014). Thus, clinical supervision is carried out through a series of stages that are repeated to form an ongoing cycle. Each of these stages is briefly described below:

### **Stage: Pre-Observation Conference.**

The purpose of the pre-observation conference is to provide focus to the upcoming observation. Pre-observation conference provides supervisors an opportunity to begin to establish positive working relationship with teachers. Mutual trust and respect essential for the relationship start during this stage and will continue to develop throughout each stage of the supervisory cycle. This initiative conference is a good time to diffuse anxiety and to explain the cycle of clinical supervision and the teachers' role in the relationship (Abeya 2002). Supporting this idea, Glickman *et al* (1998) explained that: the pre-observation conference (behavior system) provides an opportunity for the supervisor and the teacher to establish relationship mutual trust and respect. According to him, teacher and supervisions get to know each other as fellow professionals. So that it is essential to the establishment of the foundation for the observation and analysis of teaching. This approach is most suitable because the expertise, confidence, and credibility of the supervisor clearly outweigh information, experience, and capabilities.

Pre-observation conference in general offer opportunities to discuss concerns of both sides to review the purposes and procedures of an upcoming lesson to be observed to make plan for observation, to agree on its focus and to arrange a time for both the observation and for the post observation conference. During the discussion, the teacher outlines, the plans for the lesson and helps identify specific aspects to which attention will be directed during the observation. The teacher, plan is expected to contain learning objectives, introduction, teaching strategies to be employed, resource to be used evaluation plan and lesson closure. It is important that the teacher understand the purpose of each step in the clinical model. The teachers need to know that observer will be taking notes during observation and that this is for the purpose of giving accurate feedback as detailed in (Glickman et al, 2010). For Brennen (2000), this session focuses on:

1. The reason and purpose for the observation,
2. The focus of the observation,
3. The method and form of observation to be used,
4. The time of observation,
5. The time for post-conference.

## **Stage 2: Class room Observations**

In this stage supervisors observe teachers at work during formal lesson. The observation is the link between the plans made during stage-1 and actual practice. It affords the supervisors an opportunity to see the situation where the supervisee questions and concerns originated and to determine whether or not answers can be found. The teacher's task is to teach the lesson as planned whereas the supervisor's task is to record the items specifically identified in the pre-observation conference as well as the events surrounding the lesson. Specific happenings should be scripted and in the language of the teachers. Student verbal & non-verbal behavior should be noted. It is important to be on time and to stay for the entire lesson. (Glickman et al., 2010).

## **Stage 3: Analysis and Strategy**

This stage is a stage in which the supervisors think what have happened in the class room and analyze and interpret strategically (Glickman 2010). To increase the success of supervisory cycle, it is important to take time to analyze the observation and to think about the conference that is to follow. The supervisors reconstruct the observed events, incidents patterns of behavior and critical incidents that developed. Observed events are analyzed in terms of the concerns raised during the pre-observation conference and the supervisor plan strategies to be used during the post observation conference, supervisor analyses the script notes he /she collected during the observation and plan what should the teacher work on for the next observation. (Abeya Geleta, 2002). Glickman, et.al (2010:290) adds, the super visor must consider the individual teachers level of development, expertise and commitment: when working with a teacher who is best matched with a collaborative or non-directive approach and who has experience with clinical supervision.

## **Stage 4: post observation conference**

The stage is a shared exploration. It is a time for the supervisor to provide feedback to the teacher about the observation, for supervisor and for supervisee a time to formulate strategies jointly for dealing with problems; to raise issues of concern, to offer specific help if appropriate, to explore the rewarding and satisfying aspects of the teacher's performance and to plan for next observation. Each conference varies in purpose content and in the nature of interaction depending on the individual and circumstances involved (Abeya Geleta, 2002).The study conducted by Radi,,(as cited in Veloo et al,

2013), discussion session between supervisor and teacher has to be done to get the feedback of the supervision. Through the discussion, strengths and weaknesses of the teacher regarding technique, methodology, approach and teaching aids used can be shared.

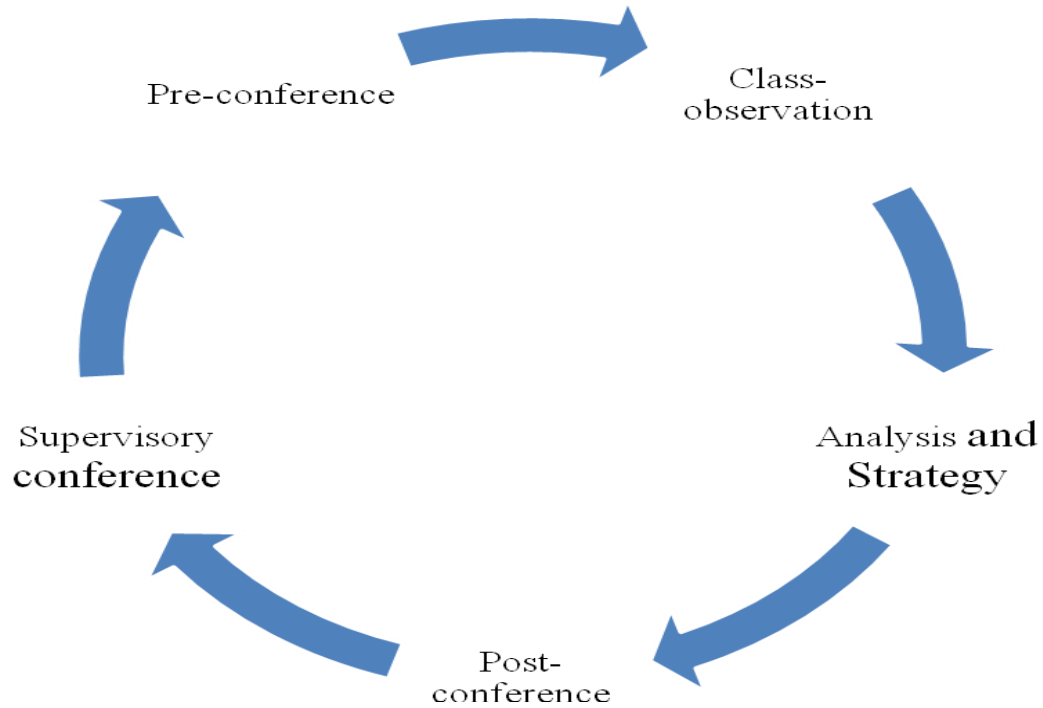
**Stage5: Post conference Analysis / Supervisory conference/**

The final phase in the clinical model is an evaluation /critique/of the process and the outcome. It is the means of self-improvement for the supervisor. It is the time when the supervisor assesses the nature of communication during the conference, the effectiveness of the strategies used, the role of teacher during the conference, and the extent to which progress was made on the issues that were discussed.

The supervisor needs to reflect on the process and his or her own behaviors and skill on whether the conference did go well or why or why not. The process is intended to promote both improved instruction and supportive relationships. Clinical supervision may be too much supervision for some teachers. That is not all teachers will be interested in such (intensive) look at their teaching. Moreover, teachers' needs and dispositions as well as learning styles vary (Abeya Geleta, 2002).

The following picture depicts the structural procedures of clinical Supervision that supervisors should carry out adequately with teachers through each session.





**Fig.1:** Five phases of the Clinical Supervision (Myra L. Delos Reyes 2011)

According to Glickman (2010), the critique has both symbolic and functional value. It indicates that the supervisor is involved in an improvement effort in the same way as the teacher /supervisee/. Furthermore, the feedback from the teacher gives the supervisor a chance to decide on what practices to continue, revise, or change when working with the teacher in the future.

For Beach and Reinhartz (2000), teachers tend to favor individualized, close and supportive supervision, which addresses their individual needs. Teachers also agree on the basic assumptions and effectiveness of clinical supervision, accepting recommendations for change, which they believe is possible in their classroom behavior. Thus, clinical supervision is not the means of improving supervisors' skills.

Miller and Miller, (1987) argue that clinical supervision has advantages over the other models of Supervision. They note that clinical supervision allows for objective feedback, which if given in a timely manner, will lead to improved results. Clinical supervision also diagnoses instructional problems and provides valuable information to solve such problems. In the end, improvements in

instruction are heightened as teachers are able to develop new skills and strategies. Data on students may include feedback from class work and test results, which could also be useful to improve instruction. A wide range of data collection instruments employed in this model would provide supervisors with individual teachers' peculiar problems than pre-determined rating scales and evaluation procedures inherent in the "scientific supervision".

## **2.4. Importance of Clinical Supervision**

Different authors displayed in different websites, Journals and Articles the importance of clinical supervision with related to social and academic purpose. For instance, Clinical supervision enables each member of staff to discuss their work regularly with another experienced practitioner. The experienced practitioner known as supervisor facilitate the discussion with less experienced member of staff (the supervisee) as cited in Glickman et al & Kaufman, (2010). They state that all clinical supervision has the following three core functions:

1. Provide support to the staff in their work
2. Promote personal & professional development
3. Promote quality care and support services

According to these authors, the purpose of supervision can be categorized on the different aspects of management:

- It helps everyone to look at how he/she thinks they function.
- Assessing one's own strength & weakness
- Identify help with weakness
- Make the staff to feel that all are accountable for the work done. Retrieved from

([www.study mode .Com/essay/supervision 1557932.htm/](http://www.study mode .Com/essay/supervision 1557932.htm/), [www.study mode /com/subjects/importance-of-clinical-supervision-page-1.htm/](http://www.study mode /com/subjects/importance-of-clinical-supervision-page-1.htm/) (Glickman, 2010).

Similar with this, Beghetto et.al (2013) pointed out the most important aspects of clinical Supervision as follow:

1. Provides teachers with objective feedback on their instruction.
2. Diagnoses and solve instructional problems.
3. Helps teachers to develop skill in using instructional strategies.
4. Helps teachers to develop a positive attitude about continuous professional development.
5. Helps teachers to view supervision as an important role in their professional lives.
6. Maximizes intrinsic motivators such as feedback and support.
7. Minimizes extrinsic motivators such as rewards and penalties

Supporting the above ideas, Brennen (2000) as cited in Education Journals of social science 4(8) (2013), stated that clinical supervision helps to diagnose instructional problems and provides valuable information which can lead to solving such problems. As a result, teachers are able to clearly see differences in what they are doing in reality and what they think & they are doing. She pointed that clinical supervision does not only aid the teacher in improving classroom instruction but it also aids the teacher in improving his/her chances for promotion and/or "taking on" other responsibilities as he/she grows professionally. One such responsibility could be to provide direct assistance to a colleague. If clinical supervision is perceived in a positive light, then the teacher will become self-motivated and will seek further professional development even when he is not a requirement of the job per se. (Brennen, 2000:6).

Sergiovanni&Starratt, ( as cited in Beghetto et al, 2013) state that the goal of clinical supervision is not aligned with traditional evaluative measurement procedures intended to make summative statements about the worth of a person's teaching for purposes of quality control. On the contrary, clinical supervision focuses on a teacher's professional growth in terms of improving classroom instruction and relies on more teacher-directed actions as opposed to bureaucratic, hierarchical actions of control by supervisors. Clinical supervision, as a result, becomes less formal and less attached to the teacher's achievement of some preconceived criteria or outside standards. It becomes a process that includes the ideas and voice of the teacher as he or she strives to meet his or her own educational goals in teaching and centers on self- and collegial evaluation, including input from students. Finally, the point of supervision from a clinical standpoint is not quality control for the protection of students and the

public from incompetent teaching, rather the point of clinical supervision is the professional improvement of the teacher that “guarantees quality teaching and schooling for students and the public” (Sergiovanni&Starratt, 1998, p. 230).

## **2.5. The effects of clinical supervision toward teaching and learning.**

A study by Sergiovanni, (2007) discovered that school principals give less attention to Clinical supervision and dedicate most of their time on the administration aspects. Holland and Adam (2002) stressed that Clinical supervision administered in schools does help in increasing the teaching development of teachers while at the same time enable teachers to make improvements on their teaching practice to be more effective. Furthermore, they also describe clinical supervision as *one size fits all-practice*. Through effective clinical supervision, teachers are able to improve on their teaching performance in terms of their teaching practice and the level of teaching knowledge in and out of classrooms.

Zepeda (2007) states that since Clinical supervision is focused on the teaching quality, the evaluation towards teachers can be the catalyst in improving teachers’ teaching and school performance. Adding to this, (Thomas, 2008) detailed as Clinical supervision needs a great deal of time to be enforced effectively but this practice proves to be worthwhile to increase teachers’ teaching performance Thus, Clinical supervision is a way for teachers to improve their teaching performance which is indirectly will benefit the students through the improvements.

A study by MohdZawawi, (as cited by Beghetto, 2013) indicated that most of teachers agree that clinical supervision helps to increase their teaching quality. His research finding also showed that 82.5% of teachers agree that clinical supervision has to focus on teaching techniques, questioning styles, set induction and two-way communication between teachers and students. A few effective clinical supervision models are adapted in administering clinical supervision such as Intensive Supervision Model (Clinical) and Cooperative Supervision Model. In similar vein, (Beach &Reinhartz, 2000) said that Clinical supervision encourages teachers to examine and practice the art of teaching that involves observation on teachers while they are interacting with their students.

According to Kutsyuruba (2003), for clinical supervision to be effective, there are some commonalities that are evident. These themes include:

- (a) The development of a collegial relationship between teachers and supervisors based on trust, respect, and reciprocity;
- (b) Teachers control over the products of supervision;
- (c) Teachers retain control over decisions that impact their teaching practices;
- (d) There is continuity in the supervisory process over time;
- (e) Supervisors provide teachers with nonjudgmental observational data; and
- (f) Both teachers and supervisors engage in reflective practice (Nolan, Hawkes Francis, 1993).

## **2.6. Factors militating against the practice of Clinical supervision.**

**Absenteeism:** - It is illegal actions teachers show at work place while they schedule to be visited. As a result super visor let back to accomplish his/her daily action plan. The organization costs related with absentee ism is not simple because its activities might be remaining without performed on time (Rue and Byars, 1990:433).

**Poor planning:** Planning is very crucial to determine the objectives of organization and its activities that should be performed to achieve those objectives (Rue&Byars, 1990:45). Planning is a means of deciding in advance what to be done in the future ( Hilgert&Leonord, 1998: 176).Thus, the planning quality of both supervisors and teachers can be affect the practice of clinical supervision in school.

**Time management:** -Timing is a vital & critical factor in all planning. Thus a supervisor may chose the “strike while the iron is hot” planning strategy. This strategy advocates promote actions when the situation and time for action are advantageous (Hilgert&Leonord, 1998).

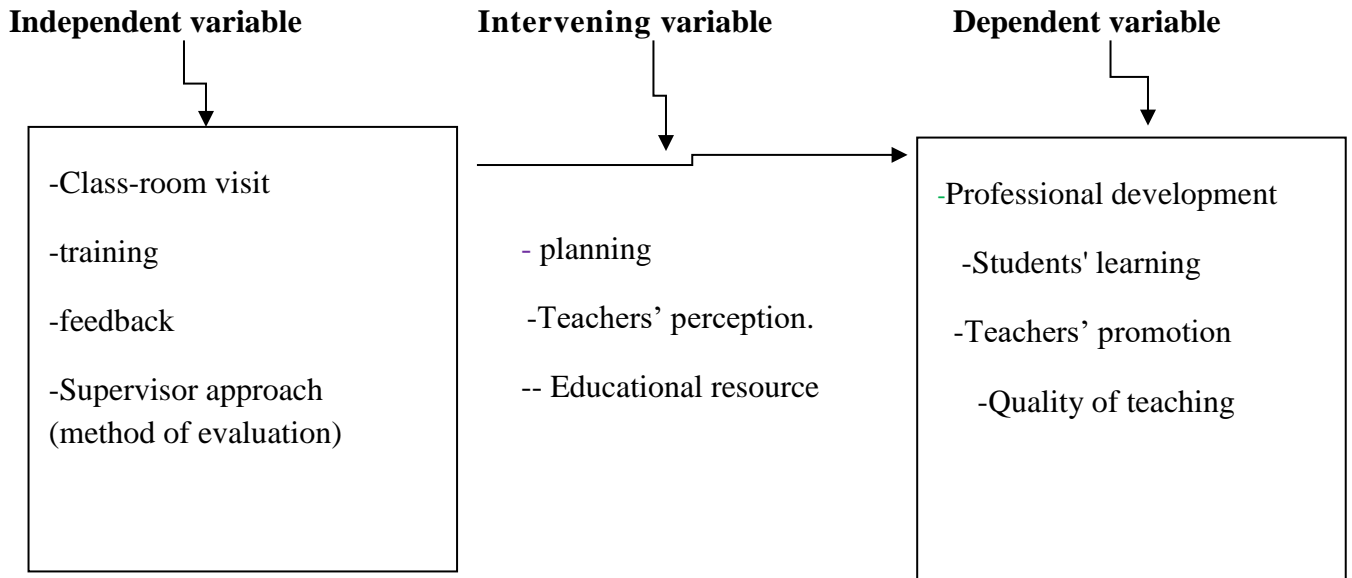
**Lack of pre-professional training for supervisors’ Technical issue:** One of the major challenges facing clinical supervision in secondary schools is the issue of competence and technical knowledge of the instructional supervisors. Evidence from previous studies (Ajayi &Ayodele, 2006 and Eya & Leonard, 2012) revealed that some instructional supervisors lack knowledge and competence to carry out the exercise. Some instructional supervisors were appointed based on their level of involvement in the government of the day and not as result of their skills they possessed.

**Poor incentive:** Supervisors at times are dissatisfied with their job because of motivating factors that are minimal. For instance, transport fee, house rent, effort certificate are not always given for supervisors. These acts may at times affect the way in which instructional supervision is being done in the secondary schools.(Brennen, 2006).

**Limited educational resources:** The issue of scarce resources is an economic one that attempts to rationalize spending in order to avoid waste. Effective instructional supervision however would be difficult to carry out if the funds that are supposed to be available are not there. School administrators as well as instructional supervisors would require certain resources to put things in order before supervision; non-availability of such resources would affect the supervision exercise in secondary school. (as cited in Journal of Education and Practice. Vol.4, No.8, 2013).Similar to this, Olivia &Pawlas (2004) suggested regarding clinical supervision is that without guidance and assistance, teachers are not able to change or improve.

Clinical supervision is conceptualized and defined along with existing challenges in practice in schools by a numbers of writers such as Goldhammer, (1996); Cogan, (1973); Sergiovanni&Starratt(1983,1997,2002); Glickman(2010); Acheson and Gall(1997) and Haileselassie, (cited in Abebe,2013). From viewpoints of these writers, clinical supervision in school is determined by variables such as teachers' experience, experience of supervisor, teaching method, teaching materials, professional developments, students' behaviors. For this study these variable is categorized in to Independent, dependent & intervening or control variables. Independent variables are variables that determine other dependents whereas dependent variables are those resulted from (depend on) the independent variable (John,2006: 358).

The conceptual frame work of clinical supervision can be expressed as the following.



**Fig. 2:** conceptual frame work of the study.

## 2.7. The Basic Principles of clinical Supervision

According to Glickman (1992), clinical supervision is grounded in the following principles:

1. The primary purpose of supervision is to provide a mechanism for teachers and supervisors to increase their understanding of the teaching –learning process through collaborative inquiry with other professionals;
2. Supervisors must see themselves not as critics of teaching performance, but ,rather as Collaborators with teachers attempting to understand the problem, issues and dilemmas that are inherent in the process of teaching and learning;
3. Teachers should not be viewed as consumers of research, but as generators of knowledge about teaching and learning;

4. Acquiring an understanding of the learning-teaching process demands the collection of many types of data, over extended periods of time;
5. The focus for supervision needs to include content specific as well as general issues and questions.
6. Supervisors should focus not only on individual teachers but also on groups of teachers who are engaged in an ongoing inquiry concerning common problems.

### **2.8. Purposes of clinical Supervision.**

It is generally accepted that effective instructional supervision is conducted for several specific reasons. Wanzare and Costa (2000) classified purposes of supervision, which include the following:

1. Instructional improvement
2. Effective professional development of teachers
3. Helping teachers to become aware of their teaching and its consequences for learners
4. Enabling teachers to try out new instructional techniques in a safe, supportive environment
5. Fostering curriculum development
6. Encouraging human relations
7. Fostering teacher motivation
8. Monitoring the teaching-learning process to obtain the best results with students
9. Providing a mechanism for teachers and supervisors to increase their understanding of the teaching-learning process through collective inquiry with other professionals



## **2.9. Challenges to clinical supervision.**

This section reviews challenges which may undermine supervisory practices at the school level. Because there is a scarcity of empirical research about clinical supervision practices, the review will draw on issues from the previous section which may have the potential to undermine the goals of supervision. The main purpose of supervision is to work collaboratively with teachers and provide them with the necessary assistance, guidance, and support to improve instruction. Some support systems in education delivery, as well supervisor characteristics and practices and the context within which supervisors work pose challenges to the smooth performance of their duties.

### **2.9.1. Supervisor incompetence.**

Garubo and Rothstein (1998) observed that the initial problems of school-based supervisors are usually related to their own sense of competence. Chapman and Burchfield (1994), in reflecting specifically on the African situation, observed that those individuals selected for headship may lack formal training in instructional supervision and, consequently, they may not command sufficient respect among teachers to operate effectively as instructional supervisors. A supervisor unfamiliar with proven supervisory techniques and strategies will perform poorly or will slide into ‘supervision avoidance’ (Kosmoski, 1997: 25).

### **2.9.2. Time constraints.**

Clinical supervision is often a secondary task for many school principals who may not have time to devote to curriculum and instructional leadership because they are too busy with other day-to-day operations in their schools which tend to be much more ‘do-able’ than the demands for instructional leadership (Oliva and Pawlas, 2001).

And, more recently, Curtis (2002), in a study of the issues high school principals encounter with school-based supervision in the state of Georgia, US, reported that the principals studied unanimously agreed that time constraints and unexpected interruptions frustrated their endeavors to effect meaningful teacher supervision.

### **2.9.3. Teachers' attitudes toward clinical supervision.**

Research indicates that teachers do not always readily accept school-based supervision by principals. For example, findings in Curtis' (2002) study indicated that none of the principals studied believed teachers viewed supervision by principals as a positive process, and that for many teachers, supervision was a meaningless exercise that had little value to them other than completion of their evaluation forms. Sergiovanni and Starratt (1998) observed that teachers' encounters with their supervisors lead directly to evaluative judgments based on the skimpiest of evidence. Such encounters, they argued, are destructive of autonomy, self-confidence and personal integrity. And, more recently, Sullivan and Glanz (2000) noted that the evaluation function of instructional supervision is rooted in bureaucratic inspectional type supervision the function of which is to fulfill organizational requirements to measure and to assess teaching effectiveness. Other potential problems that may frustrate instructional supervision include the lack of agreed upon definition of instructional supervision and insufficient incentives for instructional supervision on the part of supervisors (Wanzare and Costa, 2001). On the other hand, teachers seem to be in line with the supervisors when they feel that supervision work should be more developmental and less control oriented. It is not these teachers who refuse the idea of being controlled: what they dislike is rather the attitude of controllers. The two most frequent complaints are that some supervisors are authoritarian, fault finding and bureaucratic, and moreover, biased, subjective and arbitrary. Bitter complains about supervisors work further include irregular and bad planning of visits, not enough time spent in the classroom and at times, irrelevant advice. All this does not mean that teachers do not recognize the positive effects of supervisory work but rather that in their opinion, the problem with supervisors is mainly an attitudinal one(UNESCO,2007).

### **2.9.4. Training.**

Another issue of concern is whether supervisors are given enough training to function properly in their practice. Carron and Grauwe (1997) expressed little doubt that advisers, inspectors and other such staff need regular training, but they seldom receive it. They believe that whatever pattern of recruitment and promotion procedures, supervisors (advisers) needs regular training but, they are seldom provided with pre-service or in-service training.

In Botswana and Zimbabwe, although formal induction training programs existed, not all newly appointed supervisors had the opportunity to attend (Grauwe, 2001). He observed that the in-service training courses which took place in the four African countries were not integrated within the overall capacity-building program, and did not focus sufficiently on supervision issues. According to Grauwe, many of those training programs were ad-hoc and were related to the implementation of a particular project.

### **2.10. Effective Supervision.**

Researchers conceptualize effective supervision not as an end result or product, but rather as the collection of knowledge and skills that supervisors possess. Gordon and Ross-Gordon (2004) posit that effective supervision requires well trained personnel with knowledge, interpersonal skills, and technical skills that are prepared to provide the necessary and appropriate guidance and support to the teaching staff. According to Glickman, Gordon and Ross-Gordon (2004), these personal attributes are applied through the supervisory roles of direct assistance to teachers, group development, professional development, and curriculum development and action research.

They believe that “this adhesive pulls together organizational goals and teacher needs and provides for improved learning” (p. 9). To facilitate effective supervisory processes Glickman, et.al. (2004) propose that supervisors should perform the following roles: providing personal development by providing on-going contact with the individual teacher to observe and assist him/her in classroom instruction; ensuring professional development by providing the learning opportunities for faculty provided or supported by the school and school system; and providing group development through the gathering together of teachers to make decisions on mutual instructional concern.

Similarly, supervisors should support curriculum development through the revision and modification of content, plans and materials of classroom instruction. They also posit that supervisors should engage teachers in action research by systematically studying faculty to find out what is happening in the classroom and school with the aim of improving student learning. Other researchers also share similar views as those upheld by Glickman and colleagues. For example, Glanz, Shulman and Sullivan (2006) believe that an effective principal possesses the following characteristics: is situational, aware of details and undercuts in the school; has intellectual stimulation of current theories and practices; is a change agent; and, actively involves teachers in design and implementation of important decisions and

policies. They also believe that effective principals provide effective supervision. To them, an effective principal creates a culture of shared belief and sense of cooperation, monitors and evaluates the effectiveness of school practices, is resourceful and communicates and operates from strong ideas and beliefs about schooling. Blasé and Blasé (1999) propose a model of effective principal derived from data (findings) which consists of two major themes: talking with teachers to promote reflection and promoting professional growth.

According to them, effective principals value dialogue that encouraged teachers to critically reflect on their learning and professional practice through the following strategies: making suggestions, giving feedback, modeling, using inquiry and soliciting advice and opinions, and giving praise. They also argue that effective principals use six strategies to promote teachers' professional growth: emphasizing the study of teaching and learning; supporting collaboration efforts among educators; developing coaching relationships among educators; encouraging and supporting redesign of programs; applying the principles of adult learning, growth, and development to all phases of staff development; and implementing action research to inform instructional decision making.

In addition, other researchers also believe that successful supervisors are those who link interpersonal skills with technical skills. Brennen (2008), notes an effective supervisor who links interpersonal with technical skills will be successful in improving instruction. He suggests that an effective supervisor should be able to build self-acceptance, moral, trust, and rapport between the two parties. Brennen suggests that the supervisor in an effective supervision process should not delve deeply into the role of a counselor.

Here, the focus is always on the teaching act, rather than matters affecting the teacher that are beyond the confines of the classroom. Objectivity, devoid of personal biases, should be the hallmark if supervision is to be effective, he asserts. It is for this reason that Brennen (2008) posits that effective supervision results when a supervisor clearly sets out the criteria to be used in the evaluative process and ensures that even if the final assessment is a negative one, the teacher will benefit from the exercise and leave with his self-esteem intact. This all indicate that supervision is effective if the supervisor possesses and exhibits qualities and characteristics related to knowledge, interpersonal and technical skills.

### **2.11. The characteristics of supervisor and supervisory practices.**

Theorists and empirical studies have described how supervisor characteristics and practices have the potential to improve instruction. The characteristics include personal attributes that supervisors possess and exhibit in the course of their work, as well as their knowledge of content, expertise and skills, behavior, and attitudes towards teachers. The practices may include activities they go through and the techniques they employ while performing their roles as instructional supervisors. Further, Blasé and Blasé, (2004) note that there is a paucity of research that describes how instructional supervision is actually practiced in schools, as well as how teachers are actually affected by such supervision.

Many studies have referred to Blasé and Blasé (1999) study of teachers' perspectives on how principals promote teaching and learning in schools. The data were provided by teachers who were taking a course at three major universities located in the south-eastern, mid-western and north-eastern USA. The teachers provided a range of supervisor characteristics and practices which has served as an inventory to Blasé and Blasé. They grouped the characteristics into two: those which promoted effective supervision, and those which were found to be ineffective. The respondents in their study used terms like "successful" and "effective" to describe situations which they deemed appropriate to improvement of instruction.

**Trust and Respect:** Researchers believe that teachers have trust and confidence in a supervisor who is knowledgeable and an instructional expert. Supervisors are expected to be knowledgeable in content and teaching strategies to be able to provide assistance and support to teachers. Teachers' trust in the principal's ability to assist and support them in their instructional practices is essential in the supervisory process (Sullivan & Glanz, 2000). They suggest that teachers must be able to rely on supervisors for instructional assistance, moral boosting, and curriculum planning. They also suggest that supervisors should be honest to their teachers and be open to discussions. They finally propose that supervisors must have a working knowledge of the curriculum and pedagogy and, be a "master teacher". Similarly, Holland (2004) posits that educators (supervisors) must demonstrate evidence that they have the necessary knowledge and skills to make important decisions about what they do and how they do it. She believes that credentials alone do not inspire trust, but rather how they are applied in practice.

**Listening:** Listening to and hearing the needs of teachers are one of the responsibilities of supervisors (Sullivan & Glanz, 2000). Teachers in Blasé and Blasé's (1999) study indicated that their supervisors listened to their concerns and tried to assist them in any way possible. One respondent remarked that his supervisor shared upcoming units with him, and often offered additional ideas to enhance his lessons.

**Planning for Lesson Observation:** Proponents of clinical supervision such as: Cogan and Goldhammer advise that supervisors mutually plan lesson observation with teachers rather than supervisors entering the classroom unexpectedly, and with pre-determined rating items. Besides, Blasé and Blasé (2004) suggest that supervisors should mutually decide with their teachers on what and how to observe before proceeding to the classroom to observe a lesson. In Pansiri's study (2008), 75 percent of his teacher participants in Botswana indicated their supervisors planned class visits with them.

**Informal Visits:** Some researchers have theorized that supervisors' frequent visit classrooms (walk-through) make their presence felt in the school (Blasé & Blasé, 2004; Rous, 2004). Such visits are usually not planned, but to put teachers on the alert to ensure that they (teachers) make good use of instructional time, and chip in support to teachers when necessary. Rous (2004) reported that lack of contact between teachers and instructional supervisors in her study negatively affected instructional practices. Empirical studies have also shown that informal visits motivated teachers to improve their instructional strategies and teachers' time-on-task. In her study of selected public school teachers in the US, Rous (2004) found that most teachers believed that their supervisors' frequent visits and calls were important activities, whereas others reported that their supervisors were not seen in the classrooms enough.

**Observing lessons:** lesson observation is one major function of supervisors. In almost all models discussed earlier, lesson observation has been seen as a major tool supervisors use to assess the content knowledge of teachers and their competency in instructional strategies and practices, so as to provide the necessary assistance to improve instruction. In such visits, it is imperative for the supervisor to focus on what was agreed upon to be observed during the pre-observation conference (Glickman, 1990). This is supposed to guide supervisors to stay on track and be objective in their practices. Empirical studies have shown that although some supervisors were able to observe lessons, others

were unable to do so. Some participants in Pansiri's (2008) study indicated that their supervisors visited classrooms with the intention of supervising instruction but were unable to provide professional support to the teachers.

**Questioning:** Proponents of clinical supervision such as Cogan (1973) and Goldhammer (1969) suggest that supervisors use questioning to guide and assist teachers improve their instructional strategies. Supervisors are expected to use probing questions during pre-observation conferences, classroom observations, and post-observation conferences to guide and assist teachers plan their lessons, use appropriate teaching techniques, and take decisions to improve instruction (Blasé & Blasé, 2004). Cogan (1973) and Goldhammer (1969) posit that questioning could be used at any stage of the supervisory process- planning a lesson, selecting instructional materials, during teaching, and assessing students. A study of public school teachers' perceptions about instructional leadership in the US revealed that supervisors who participated in the study often used questioning approach to solicit teachers' actions about instructional matters (Blasé & Blasé, 1999).

**Offering Suggestions:** Another supervisory practice which researchers have found to be fruitful is the provision of suggestions to guide instruction (Blasé & Blasé, 2004). Suggestions serve as guides to help teachers choose among alternative plans, varied teaching strategies, and classroom management practices. Blasé and colleague (2004) observe that principals (supervisors) make suggestions in such a way as to broaden, or enrich teachers' thinking and strengths. They note that suggestions encourage creativity and innovation, as well as support work environment. The teachers in Blasé and Blasé's (1999) study overwhelmingly reported that successful principals (supervisors) offered suggestions to improve teaching and learning, vary their instructional methods, and help solve problems.

**Feedback:** visiting classrooms and providing feedback to teachers is considered one of the major roles of supervisors. Feedback provides teachers help them reflect on what actually took place in the teaching-learning process. Blasé and Blasé (2004) believe that feedback should not be a formality, but should serve as a guide for instructional improvement when it is given genuinely. Similarly, feedback (whether formally or informal, written or oral) should focus on observations rather than perspectives. Blasé and Blasé (2004) theorize that feedback reflectively informs teacher behavior; and these results in teachers implementing new ideas, trying out a variety of instructional practices, responding to student diversity, and planning more carefully and achieving better focus.

Teachers in Blasé and Blas's (1999) study reported that effective principals provided them with positive feedback about observed lessons. They indicated that such feedback was specific; expressed caring, interest and support in a non-judgmental way; and encouraged them to think and re-evaluate their strategies.

**Modeling lessons:** Researchers have theorized that lesson demonstration can improve teachers' instructional practices (Blasé & Blasé, 2004). Supervisors use demonstration lessons to assist teachers individually and in groups. This practice is not only used to guide new and inexperienced teachers, but veterans as well. Supervisors may learn strategies from teachers during their classroom observations, and transfer such learned activity to other teachers to try them out in their classrooms. Research studies have shown that supervisors use lesson demonstrations to help teachers to improve their instructional practices. Similarly, Blasé and Blasé (1999) found in the US that supervisors in their study demonstrated teaching techniques during classroom visits.

**Professional Development:** In-service training in the form of workshops, conferences, and symposia, as well as distributing literature about instruction, equip teachers with expertise as a form of professional development (Blasé & Blasé, 1999). It is the responsibility of supervisors to provide teachers with in-service training sessions, as well as encourage them to attend workshops and conferences to bring them abreast with time in their instructional practices. In their study, Blasé and Blasé (1999) found that successful principals provided teachers with information about and encouraged teachers to attend workshops, seminars, and conferences about instruction. These supervisors were also reported to have provided their teachers with funds, informed teachers of innovative seminars, and workshops.

**Promoting collaboration:** Researchers suggest that supervisors provide time and opportunities for teachers to collaborate with one another to improve their instructional strategies and skills (Glickman et al., 2001). Blasé and Blasé (2004) argue that collaboration results in teacher motivation, self-esteem, efficacy, and reflective behavior, such as risk taking, instructional variety, and innovation/creativity. Public school teachers who participated in a study in the US reported that their supervisors recognized that collaboration among teachers was essential for successful teaching and learning (Blasé & Blasé, 1999). Supervisors in their study modeled teamwork, provided time for teams to meet regularly, and advocated sharing, and peer observation. The supervisors were also reported to have encouraged



teachers to visit other teachers, even in other schools, to observe their classrooms and programs. Instructional supervisors may work with teachers either directly or indirectly, methods that direct and significantly affect teacher instruction and, as a result, student learning.

### **2.11.1. Direct supervisory practices.**

Direct instructional supervision practices include the immediate interactions with teachers and other personnel to address classroom teaching, student performance and curricular concerns. These practices can be grouped into two broad categories relative to supervision: curriculum supervision and instructional supervision (Drake and Roe, 2003). Curriculum encompasses (1) all in-school experiences, including classroom, learning experiences, student activities, use of learning resource center, assemblies, use of the cafeteria and social functions; and (2) out-of-school learning experiences directed by the school, including homework, field trips and use of community resources (Oliva and Pawlas, 2001). A principal's most important responsibilities regarding curriculum supervision include (1) providing the forum to facilitate teacher curriculum discussion, (2) ensuring curriculum implementation, (3) promoting teacher reflection on key components and (4) helping teachers to select appropriate concepts to be taught and the methods for implementation (Robbins and Alvy, 2003).

Research reports indicate that curriculum supervision is a key component of the principal's instructional leadership role. For example, Meyer and Macmillan (2001), in a study that explored the views of in-service administrators regarding principals' tasks, reported that curriculum development was cited as one of the principal's major tasks geared toward instructional improvement in the schools.

Instructional supervision is the process through which the principal attempts to work with teachers and other staff members cooperatively to improve teaching and learning in the school. Used in this sense, supervision of instruction, by design, is a developmental process through which instructional leaders can reinforce teaching practices that improve student learning. Effective principals provide leadership in instruction, coordinate instructional programs and emphasize high academic standards and expectations (DiPaola and Tschannen- Moran, 2003).

Direct supervisory practices have two major advantages (Oliver and Pawlas, 2001). First, they engage instructional supervisors and teachers in shared work central to curriculum and instruction and, second, they help to ensure that management and policy decisions will be implemented collaboratively.

However, direct supervisory practices tend to constrain instructional supervisors who usually have other administrative matters to address (Meyer and Macmillan, 2001).

### **2.11.2. Indirect supervisory practices.**

Indirect supervisory activities are concerned with the school's internal and external environments, physical and internal contexts of the classrooms, teaching, curriculum, and the meaning of the instructional supervisor's actions for teachers. Instructional supervisors involved in indirect supervisory practices facilitate leadership in other personnel in the schools (for example, teachers and departmental heads) in the following major ways (Wanzare and Costa, 2001 as cited in Olana, 2013) : (1) by improving teaching and learning conditions (for example, by ensuring clean, safe, healthy, and productive learning environments, being aware of and dealing with minor problems and issues before they become major problems, and providing teaching and learning resources, materials, and incentives to pursue new ideas and create new options); (2) by helping to set school-level instructional standards; (3) by gaining an understanding of teachers' instructional concerns and classroom conditions and offering needed assistance to address them; and (4) by delegating some of their responsibilities to other personnel, such as departmental heads, vice-principals, colleague teachers and curriculum specialists (Wanzare and Costa,2001). This simply indicates that instructional leadership is a shared responsibility in which decisions are made through collaboration shared decision making.

A growing number of researchers (Deborah, 2002; Elmore, 2000; Wanzare and Costa, 2001) also assert that instructional leadership is a shared responsibility distributed across the school community, with principals, vice-principals, departmental heads, teachers and policymakers having complementary responsibilities. According to James et al. (2000), distribution of instructional leadership role does not mean that key players work isolated; instead their efforts are interdependent, frequently spanning boundaries.

## **2.12. Approaches to supervision**

Researchers have identified different approaches that supervisors who use clinical, and other supervision models which evolved from clinical supervision, apply to supervision. Glickman and Tamashiro (1980) note that during post- observation conference, supervisors may employ directive (control or informational), collaborative, and non-directive approaches to address issues which crop up to plan actions for instructional improvement. They contend that even though a supervisor may employ a combination of these approaches, he/she may be more inclined to one of them. A supervisor's inclination to any one of a combination of these approaches stems from his/her philosophical orientation or previous experience with other supervisors. Supervisors' use of a particular approach may differ from one teacher to another.

Furthermore, Glickman and Tamashiro (1980) argue supervisors consider the teacher's level of experience in instructional practices and developmental level when selecting a supervision approach. It is also likely that the contexts within which a supervisor works influences his/her approach. State and national policies may also spell out procedures and approaches to be used by supervisors in their schools.

### **2.12.1. Directive approach**

Supervisors who use a directive approach believe that teaching consists of technical skills with known standards and competencies for all teachers to be effective in their instructional practices (Glickman, 2002). According to this approach, the roles of the supervisor are to direct, model, and assess competencies. These researchers observe that supervisors using this approach present their own ideas on what information is to be collected and how it will be collected, direct the teacher on the action plan to be taken, and demonstrate the appropriate teaching methods. The directive supervisor sets standards for improvement based on the preliminary baseline information from classroom observation, shows teachers how to attain standards, and judges the most effective way to improve instruction.

The directive supervisory approach takes two forms: Directive control and directive informational. In both situations, the supervisor and teacher go through the procedures of clinical

stages up to the post-conference phase where action plans for improvement are to be taken. Glickman (2002) indicate that in the directive control supervisory approach, the supervisor details what the teacher is to do, and spells out the criteria for improvement. But in the directive informational approach, the supervisor provides alternative suggestions from which the teacher can choose, instead of telling the teacher what actions to take. The supervisor does not directly determine what action a teacher should embark upon. However, the ideas come from the supervisor.

### **2.12.2. Collaborative Approach.**

Supervisors who employ this approach believe that teaching is primarily problem-solving, in which two or more people pose a problem, experiment and implement those teaching strategies that are deemed relevant. According to Glickman (1990), the supervisor's role in this approach is to guide the problem-solving process, be an active member of the interaction and help keep teachers focused on their common problems. The leader and teacher mutually agree on the structures, processes, and criteria for subsequent instructional improvement.

In the collaborative approach to supervision both the supervisor and teacher mutually negotiate the plan of action (Glickman, 1990). Views of both parties are included in the final plan of action for instructional improvement. According to Glickman, both the supervisor and teacher review, revise, reject, propose and counter propose until they both come to a mutual agreement. Glickman(1990) contends that the final product of the collaboration is a contract agreed upon by both and carried out as a joint responsibility in the following manner:

**Presenting:** the leader confronts the teacher with his/her perceptions of the instructional area needing improvement;

**Clarifying:** the leader asks for the teacher's perceptions of the instructional area in question;

**Listening:** the supervisor listens to teachers' perceptions;

**Problem-solving:** both the supervisor and the teacher propose alternate actions for improvement (supervisor does not impose action plans on teacher);

**Negotiating:** the supervisor and teacher discuss the options and alter proposed actions until a

joint plan is agreed upon. The assumption underlying this approach is that both supervisors and teachers perceive each other as valuable partners in the supervisory process. There is, therefore, a sense of trust and respect between the two parties. The supervisee in this approach is likely to not feel threatened in pursuit of his/her instructional practices, and will probably welcome the observation processes.

### **2.12.3. Non-directive approach.**

This approach is based on the premise that teachers are capable of analyzing and solving their own instructional problems. Glickman (2002) argues that when an individual teacher sees the need for change and takes responsibility for it, instructional improvement is likely to be meaningful. The supervisor in this approach is only a facilitator who provides direction or little formal structures to the plan. This behavior of the leader (supervisor), according to Glickman, should not be misconstrued as passive, or allowing complete teacher autonomy. Instead, the supervisor actually uses the behavior of listening, clarifying, encouraging and presenting to guide the teacher towards self-recovery.

## **2.13. The role of supervision at different levels in Ethiopian context**

### **2.13.1. supervision at the woreda level**

Although the supervisory tasks to be performed at the central, regional and zonal are also the concern of the woreda level supervision, the fact that the woreda has a direct contact with schools, more and specific supervisory work is expected to be performed at this level. Among the tasks to be undertaken, the major ones are to:

1. Check, follow up, monitor and evaluate so as to maintain quality and standard of teaching-learning.
2. Ensure that educational programs in schools are susceptible to local needs
3. Organize and demonstrate appropriate teaching methods and models to senior teachers
4. organize in-service training i.e. seminars, workshops, conferences, etc. programs to school-based supervisors

5. Conduct periodic planned visits to schools to render support at the spot.
6. Prepare reports to woreda education office on issues and problems the solutions to which are beyond the competence of school.

### **2.13.2. Supervision within the School.**

As teaching learning process is a day-to-day and continuous process, the function of the supervision at the school level should also be a continuous responsibility. Within the school system, the supervisors are the school principal & vice-principal, the department heads and the senior teachers. The educational programs supervision manual of Ministry of Education (MOE, 1994:36-37) has listed the roles of supervision at the school level as follows:

#### **2.13.2.1. The roles of school principal in school supervision.**

The school principal in his/her capacity as instructional leader, his/her responsibilities would be:

1. Creating a conducive environment to facilitate supervisory activities in the school by organizing all necessary resources;
2. Giving the professional assistance and guidance to teachers to enable them to realize instructional objectives; and supervise classes when and deemed necessary;
3. Coordinating evaluation of teaching-learning process and the outcome through initiation of active participation of staff members and local community at large;
4. Coordinating of the staff members of the school and other professional educators to review and strengthen supervisory activities and;
5. Cause the evaluation of the school community relations and on the basis of evaluation results strive to improve and strengthen such relations

### **2.13.2.2. The roles of deputy principals in supervision.**

Besides assisting the principal of the school in carrying out the above responsibilities, the school vice-principal is expected to handle the following responsibilities:

1. Giving over all instructional leadership to staff members;
2. Evaluating lesson plans of teachers and conducting the classroom supervision to ensure the application of lesson plans and;
3. Ensuring that the curriculum of the school addresses the needs of the local community.

### **2.13.2.3. The roles of department heads in supervision.**

Because of their accumulated knowledge, skills and abilities in the particular subject as well as in the overall educational system acquired through long services /experience; the department heads have the competence to supervise educational activities. Therefore, the supervisory functions to be undertaken by the department heads are:

1. Coordinating the supervisory activities in their respective departments and evaluating teachers' performance;
2. Arranging on the job orientation and socialization programs to newly assigned teachers in the respective departments;
3. Initiating and promoting group participation in the planning, implementation and decision making of the instruction and in the evaluation of instructional outcomes;
4. Selecting and organizing teaching materials and making them available for use by teachers;
5. Encouraging teachers to conduct action research so as to improve and develop subjects they teach and methods of teaching such subjects;

6. Organizing model teaching programs for inexperienced (junior) teachers, staff member by imitating senior staff members from the departments;
7. Coordinating evaluation to the department curriculum and organize workshops, Conferences, seminars, etc., to tackle identified problems of the curriculum and;
8. Encouraging staff members to conduct meetings regularly to make periodic evaluations of their activities and to seek solutions to instructional problems.

#### **2.13.2.4. The roles of senior teachers in supervision.**

According to the career structure developed by Ministry of Education on the basis of Ethiopian Education and Training Policy of 1994, High-ranking teacher, Associate Head teacher and Head teacher are considered as senior teachers. Thus, such teachers because of their accumulated experience in specific subject area/areas are well positioned to supervise other teachers within their department (MOE, 1994:37).

#### **2.14. The role of school supervisors in clinical supervision.**

According to (Brennen, 2000), the primary goal of the supervisor in clinical supervision is to improve instruction, by observing, analyzing and providing feedback to the teacher. An effective supervisor, who links both interpersonal as well as technical skills, will be successful in improving instruction. The onus is on the supervisor to enhance the collaborative effort by building the teacher's self-acceptance, morale trust, and rapport between the parties.

A clinical supervisor is also a facilitator—one who works with the teacher to meet the goal of the observation exercise, which is to improve teacher instruction. Effective supervision results when a supervisor, for example, clearly sets out the criteria to be used in the evaluative process and ensures that even if the final assessment is a negative one, the teacher benefits from the exercise and leaves with his/her self-esteem intact. (Brennen,2000:4).

Abeya, (2002:105) quoted as “supervisors are expected to visit classrooms and observe what the teacher was doing, often noting whether the teachers actions conformed to a list of activities



assumed to be related to supervisor or good teaching currently, supervisors need to attend at least as much to what students are doing as to what teachers are doing.

### **2.15. Supervision in secondary school.**

The supervision system has a main role to influence teaching and learning practice but such influence depends at least to some extent on the number of schools and teachers to be supervised in both primary and secondary school. In many African countries including Ethiopia, the number of schools and teachers per supervisor are so high that supervisor can never have more than a brief contact with each school but never be able to contact with each teacher. As a result they seldom have more than a superficial impact (Fudak, 2011)

It is difficult however, to determine an ideal supervisor/school or supervisor/ teacher ration as all depends on what super visors are expected to do and the context in which they are to operate. If a supervisor is expected to concentrate only on school management and administration having 15 to 20 schools to monitor could be considered quite manageable depending on the geographical conditions prevailing in the country. But if a supervisor has to offer systematic pedagogical support to teachers, the ratio of supervisor to teacher must be considered and having about 100 teachers per supervisor is probably an upper limit depending again on the distance between schools, the transport facilities the strategies used to work with them and the relative number of small schools. However, there is no such norms in our country, calculating the existing rations should in principle to quite easy as the only data needed are the number of supervisor and the number of schools and the number of schools (and If possible teachers) for a given year.(Abaya, 2002:64-65). Official norms requiring the number of schools and /or teachers to be supervised per officer do not always exist and when they exist they are often not respected in reality. In many developing countries the rapid expansion of schooling has not been accompanied by corresponding expansion of the supervision services. Moreover, the official norms, when they exist are often not realistic and imply a systematic overburdening to the supervision services (Abeya Geleta, 2007:65).

## **CHAPTER THREE: RESEARCH DESIGN & METHODOLOGY OF THE STUDY.**

This chapter comprises the research design, study method, data sources, sample and sampling techniques, instruments & data collection procedures, validity and reliability checks, and method of data analysis.

### **3.1. The Research design**

The study employed a descriptive survey design on the assumption that it would help researcher to examine, the current practices and challenges of clinical supervision in secondary schools of Jimma Zone. The descriptive survey was designed for it helps researchers to integrate data collected from both qualitative & quantitative source. That is to triangulate and substantiate the quantitative data with the information gained from the qualitative ( Creswell et al., 2003).The employment of descriptive survey in this study was with the assumption that it helps to show the current status of supervision practices and problems of school supervision in the area under study. Besides, it helps to draw valid general conclusions. At the same time, it is the most popular and widely used method in educational research (Fischler, 2012). According to Gay & Airasian (2000), descriptive studies are carried out to obtain information about the preferences, attitudes, practices, concerns or interests of some group of people. Thus, this approach enabled the researcher to examine the current practices of clinical Supervision and factors hindering its implementation.

### **3.2 .Research method**

The study attempted to utilize Concurrent Mixed research design which involves mixing qualitative and quantitative data within the stages of the research process. In other words, it involved the collection and analysis of both quantitative and qualitative data in a single study in which the data were collected concurrently. Hence, the integration of the data was made in the stages of analysis and interpretation of the research (Johnson and Onwuegbuzie, 2004). The reason behind employing mixed research design was for the purpose of triangulation. That is to triangulate and substantiate the quantitative data with the information gained from the qualitative ones.

The rationale for employing this mixed research methods is to triangulate the quantitative data with the information gained from the qualitative one. That is gathering data using different methods from different sources so as to see the convergence of results and thereby get a relatively comprehensive

picture of the issues under study Ravi Parkash, 2005). Similarly, the qualitative data that includes interview, observation, open-ended questionnaire and document analysis were used for qualitative research design in order to substantiate and triangulate the quantitative data.

### **3.3. Sample and sampling technique**

The study was conducted in Public Secondary Schools of Jimma Zone, Oromia Region. Jimma Zone has eighteen woredas out of which 6(33.3%) and one administrative town (Jimma town) was selected by simple random sampling for the sake of making the study more manageable & due to time constraint. According to Jimma Education Department, there are 32 General Secondary Schools out of which 10(31.3%) schools (including Koma , Atnago, Lmu Genet, Agaro, Gembe, Yebu, Seto, Aba buna, Serbo & Seka secondary schools) were selected for the study using simple random sampling technique (through lottery method). The logic behind using simple random sampling technique is to give equal chance for schools to be included in sample study. After selecting sample schools, the principals, supervisors, teachers and Woreda education office supervision coordinators were identified.

Accordingly, from a total of 494 Population, that includes 349 teachers, 128 school-based (internal supervisors), 10 School Principals, 7 secondary schools supervisors from WEO Supervision Coordinators, 215(43.52%) samples were selected. 138 (39.54%) teachers and 60(46.88) school-based supervisors were selected by using simple random sampling (through lottery method) for it provides equal chance for them to be selected as a members of samples of the study.

Similarly, 10(100%) School Principals and 7(100%) secondary school supervisors from the WEO supervision coordinators were selected by using purposive sampling. The rationale for employing purposive sampling is that their positions were important in describing the practices of clinical supervision in their schools. They were expected as to know the strengths and weakness, challenges and opportunities of their school community. Therefore, they could have detailed information about the current status of the supervisory practices of clinical supervision and factors that hinder or enhance the practices in their schools. This helps the researcher to get more and detail information which is crucial for the validity of the study.

**Table-3: Summary of sample size and Sampling techniques.**

| No.   | Samples                      | Population | Sampled size |       | Sampling techniques            |
|-------|------------------------------|------------|--------------|-------|--------------------------------|
|       |                              |            | No           | %     |                                |
| 1     | Teachers.                    | 349        | 138          | 39.54 | Simple random (lottery method) |
| 2     | School-based supervisors.    | 128        | 60           | 46.88 | Simple random (lottery method) |
| 3     | School principals.           | 10         | 10           | 100   | Purposive                      |
| 4     | WEO supervision coordinators | 7          | 7            | 100   | Purposive                      |
| Total |                              | 494        | 215          | 43.52 |                                |

### **3.4. Sources of data**

In this study, both primary and secondary data were used. Primary data were collected from School-Based Supervisors (Principals, unit leaders, senior teachers, Department Heads), teachers and the Coordinators of Woreda Education Office Supervision. Secondary data were collected by direct access to the education office ( for external supervisor) and record offices of the high schools to get relevant information through document analysis to check whether supervisors are working as per the guideline of supervision such as whether they have check lists, written feedback, plans and reports of classroom visits, supervision guideline.

### **3.5. Instruments and procedure of data collection**

#### **3.5.1. Instruments**

In order to obtain desired and relevant information about the study, the researcher employed four instruments. These were *questionnaire* (close-ended and open-ended questionnaires), *observation*, *Interview* (semi-structured interview) and *document analysis*.

##### **3.5.1.1. Questionnaire**

Questionnaire is considered as the heart of a survey operation because large samples can be made use of and thus the results can be made more dependable and reliable. In addition, collecting data through questionnaire is also relatively economical and probably it is the most common data collection method in descriptive survey (Alreck and Settle, 1995). Accordingly, 32 open-ended and 3 close-ended questionnaires were prepared for each of teachers and supervisors respondents in English language since the researcher believed that the respondents could understand the questionnaires. Closed questions have the advantages of easy handling, simple to answer, quick and relatively inexpensive to analyze (Kothari, 2004). Open ended questions were prepared with the assumption that it permits a free response from the respondents and gives them freedom in phrasing a reply. Getting the replies in respondent's own words would contribute not only to the validity of the study but also gives respondents opportunity to express their feelings, perceptions, problems and intensions related to the issue under treatment (Million, 2010).

##### **3.5.1.2. Interview**

The interview permits greater depth of response which is not possible through any other means. Thus, the purpose of the interview is to collect more supplementary opinion, so as to substantiate and triangulate questionnaire response. Thus, in addition to questionnaire, semi-structured interview was conducted with seven Woreda Education Office Supervision Coordinators (WEOSC), and Ten School Principals (SP).The rationale for using semi-structured Interview is for the advantage of flexibility for participants. It provides the opportunity to express their feelings, perceptions, problems and intensions related to the clinical Supervision practices in the schools.

### **3.5.1.3, Observation.**

The distinctive feature of observation as a re-search process is that it offers an investigator the opportunity to gather ‘live’ data from naturally occurring social situations (Lous, 2002). Furthermore, the rationale for using observation is that it provides a reality check and enables researchers to gather data on: the physical, the human, the interaction and the program settings (Moyles, 2002). Based on this, the re searcher conducted observation on what was taking place in the class-room during actual class-room observation to cross-check the reality of information gained from respondents through questionnaires and Interview. Thus, in addition to questionnaires and Interviews, structured observation was conducted within the five schools (50% of sampled schools) in nine sections through observation check-list.

### **3.5.1.4. Document analysis**

The documents analyzed for this study were supervision checklist; plans of classroom visits, written feedback for schools after the supervision visit, supervision guide-line and other recorded documents pertinent to supervisory services. The documents were analyzed in order to get more information on the content of feedback, supervision checklist, plans of the classroom visit and if any possible recommendation given to the schools to improve them.

### **3.5.2. Procedure of data collection**

Both the questionnaires and interviews were prepared based on the basic questions and review of related literature. Before administering the questionnaire to respondents, a pilot test was conducted in Limmu Genet secondary school (one of secondary schools of the Zone.) with twenty-two teachers, three department heads and six senior teachers and a total of thirty one samples. From the experience gained in pilot test, improvement was effected and modifications were made depending on the comments collected during the tryout.

At last, the questionnaire was set in its final form. Consequently, the questionnaires were administered to respondents after a brief orientation about the whole purposes of the study had given to them. To maximize the quality of the responses and the rate of return, convenient time for the respondents was arranged. Accordingly, respondents took the questionnaires to their home and filled there. Finally, the filled questionnaires were collected from the respondents with the help of assistant data collectors.

Another word, the interview schedule was conducted in Afan Oromo since all of the interviewees could easily understand the interview questions so that they could intensively explain about the issues and translated back to English language. For eliciting the desired information, the researcher discussed with the interviewees to arrange a suitable time and place so that the interviewees might be at ease during the interview period. Supporting this idea, scholars in the field such as Kothari (2004) stated that knowing some of the daily routine of the interviewee is essential so that convenient time and place will be created.

Besides, the purpose of the interview was explained and all possible effort was made to establish proper rapport with the interviewees because people are motivated to communicate when the atmosphere is favorable. Finally, document analysis was carried out by being access to the Woreda education offices and record offices of the schools.

### **3.5.3. Ethical consideration**

In order to collect data successfully, the researcher had voluntary consent of the participants. In addition, showing respect for research participants and explaining the purpose of the study, the reason why they were selected, the amount of time that they are involved and their responsibilities. Furthermore, the researcher created a healthy rapport with respondents expressing that their responses are decisive for the successful accomplishment of the study. On top of that, the researcher also underlined that their responses would not be used for any other purposes except for academic purpose and remains confidential.

### **3.5.4. Validity and reliability checks**

Whether the research approach is qualitative or quantitative, the issue of validity (the extent to which the instrument measures what it is intended to measure) and reliability (the extent to which similar results obtained if the study is repeated with the same procedure and methods) are always sensitive (Golafshani, 2003).

As was mentioned earlier, the study used both quantitative and qualitative data and the quantitative data in this context were those data that were collected through questionnaires. To this end, the reliability of the instrument was maintained through conducting a pilot test on schools before it was used for the actual data collection purpose. The questionnaires were distributed to twenty-two teachers,

six senior teachers, and three departments' heads who is currently teaching in Limmu Genet high school (one of the secondary school found in the Zone) and the reliability analysis was carried out by using Cron Bach's alpha. Accordingly, the average CronBach's alpha value of the reliability tests was at 0.828, which is in the acceptable range.

In order to maintain the validity, the instruments were prepared in accordance with the relevant literature review of how the concept works. In addition, the comments of the study advisor and co-advisor were used so as to make sure whether the instrument looks valid. Furthermore, the instruments were also given to school principals and supervisors who are currently working in the Zone in which the pilot test was carried out and their comments were incorporated.

As far as the qualitative data are concerned, in the first place the researcher followed the principle of honesty (Biklen and Bogdan, 1992). Moreover, the data were described in-depth using the words of participants. The interview was held with participants in Afan Oromo language as the researcher assumed that they could intensively explain about the issues. Document analysis was carried out by getting access to the Woreda education offices and record offices of the schools. Triangulating data collected through the questionnaire with interviews and document analyses was hopefully believed to increase the validity of the research finding

#### **3.5.4.1. Validity**

Validity is the extent to which the instrument measures what it is intended to measure. In order to keep the validity of the study, the instruments were prepared in accordance with the literature review of how the concept works. In addition, an instrument was reviewed by Jimma Teachers' Training College of English teachers & other experts to make sure that whether the instrument looked valid.

#### **3.5.4.2. Reliability**

Reliability is about consistency i.e. the extent to which a measure yields the same scores across different times. Accordingly, the reliability of the instrument was maintained through conducting a pilot test. Besides, in order to maintain the homogeneity of the items (internal consistence) of the instruments, a coefficient alpha at 0.05 was used. Accordingly, the pilot test result indicated that the reliability of the questionnaires of this study is 0.828 which is of course in the range acceptable.



### **3.6. Method of data analysis**

Analysis of quantitative and qualitative data was carried out concurrently and then integrated. Accordingly, analysis of quantitative data was carried out first and the qualitative data followed. Finally, they were integrated to show the clear picture of the issue under the study. Following the collection of quantitative data, but prior to data entry, the researcher carefully screened all data for accuracy. Data screening is an essential process in ensuring that data are accurate and complete and the researcher planned to screen the data to make certain that (1) responses are legible and understandable (2) responses are complete, and (3) all of the necessary information has been included (Wiley & Sons, 2005).

The quantitative data collected through close-ended items were analyzed through descriptive statistics such as frequency and percentage so as to describe the data collected in research studies and to accurately characterize the variation under observation within a specific sample. In addition, chi-square test was employed to determine the opinion difference between the responses of the sample groups. Similarly, analysis of variance (one- way ANOVA) was also used in order to see the inter-school differences. SPSS version 16.0 was used to compute the descriptive and inferential statistics.

Furthermore, the 5 point Likert scale as strongly disagree, disagree, undecided, agree and strongly agree of the questionnaires were made for collecting data and during analysis. The analysis of qualitative data was carried out by using narration and it involves working with data, organizing it, breaking it into manageable units and searching for patterns or themes to discover what is important to tell others (Biklen and Bogdam, 1992). In order to analyze the data, therefore, the researcher repeatedly read the interview questions to find words and phrases that repeat themselves. Then the data were categorized into themes using the phrase and words. Following this, the analysis was made to see the convergence of the data with that of the quantitative one.

## **CHAPTER FOUR: DATA PRESENTATION, ANALYSIS AND INTERPRETATION**

The purpose of this research was to investigate the practices of clinical supervision and the challenges encountered during implementation of the supervision in government secondary schools of Jimma Zone of the Oromia Region. Subsequently, this chapter deals with the presentation, analysis and interpretation of data collected on the practices of clinical supervision as well as its challenges while implementing. It contains two major parts; the first part presents characteristics of respondents. The second part deals with the results of findings from the data gathered through the questionnaire, Observation, interview and document analysis

## 4.1 Characteristics of Respondents

**Table4:** Characteristics of Respondents

| No. | Items            | Category        | Respondents' Responses |       |             |        |
|-----|------------------|-----------------|------------------------|-------|-------------|--------|
|     |                  |                 | Teachers               |       | Supervisors |        |
|     |                  |                 | No.                    | %     | No.         | %      |
| 1   | Sex              | Male            | 113                    | 81.9  | 49          | 81.7   |
|     |                  | Female          | 25                     | 18.1  | 11          | 18.3   |
|     |                  | Total           | 138                    | 100.0 | 60          | 100.00 |
| 2   | Age              | ≤ 30            | 65                     | 47.1  | 13          | 21.7   |
|     |                  | 31-39           | 38                     | 27.5  | 26          | 43.3   |
|     |                  | 40-49           | 24                     | 17.4  | 13          | 21.7   |
|     |                  | 50 and above    | 11                     | 8.0   | 8           | 13.3   |
|     |                  | Total           | 138                    | 100.0 | 60          | 100.0  |
| 3   | Qualification    | Diploma         | 12                     | 8.7   | -           | -      |
|     |                  | First degree    | 124                    | 89.9  | 57          | 95.0   |
|     |                  | Second degree   | 2                      | 1.4   | 3           | 5.0    |
|     |                  | Total           | 138                    | 100.0 | 60          | 100.0  |
| 4   | Current position | Teacher         | 105                    | 76.1  | -           | -      |
|     |                  | Senior teacher  | 24                     | 17.4  | 20          | 33.3   |
|     |                  | Unit leader     | 3                      | 2.2   | 10          | 16.7   |
|     |                  | Department head | 6                      | 4.3   | 30          | 50.0   |
|     |                  | Total           | 138                    | 100.0 | 60          | 100.0  |
| 5   | Work experience  | ≤ 6             | 46                     | 33.3  | 6           | 10.0   |
|     |                  | 7-12            | 38                     | 27.5  | 14          | 23.3   |
|     |                  | 13-16           | 30                     | 21.7  | 22          | 36.7   |
|     |                  | 17 and above    | 24                     | 17.4  | 18          | 30.0   |
|     |                  | Total           | 138                    | 100.0 | 60          | 100.0  |

As presented on the above Table, item 1, 113(81.9%) and 25 (18.1 %) of teacher respondents were males and females respectively. Among 60 school supervisors, 49(81.7 %) of them were males and 11(18.3%) of them were females. From this, one can realize that the number of females in the teaching profession and the position of clinical supervisors are much lower than males in the sampled schools. All the interviewee participants were males. Accordingly, 7(100%) Woreda supervisors and 10 (100%) school principals were a male, which implies that the leadership positions of secondary schools and at Woreda supervisory positions were dominated by males.

As item 2 of the above Table shows, the age of 65 (47.1) teacher respondents were found to be in the ranges of 30 and below years, 38(27.5 %) and 24(17.4 %) of the teachers' ages were 31-to-39 and 40 to 49 years respectively. Whereas, 11(8 %) of teacher respondents were ages 50 and above. Regarding the ages of school-based supervisors, 13 (21.7 %) of them were in the ranges of 30 and below years, 26 (43.3%) of them were found in the ranges between 31 and 39 years, as well as 13(21.7 %) and 8(13.3 %) of them fall into the ranges of 40 to 49 and 50 years and above respectively.

From the age distribution of interviewed school principal participants, 3(30%) and 5(50%) were found to be in the ranges of below 30 and 31 to 39 years respectively. The rest, 2(20 %) of the principals were of ages 40 to 49 years. On the other hand, with the age of Woreda supervision coordinators, 6(8.7%) of them were found to be in the ranges between 31 and 49 years and the rest one(14.3) was found to be in the ranges of 40 to 49 years. From this, one can conclude that supervisors are aged than teacher in the schools of the study and this might be implies that supervisors are more matured and able to support the teachers of the study area.

Concerning the educational level of teachers and school based supervisors, only 12 (8.7%) of teachers had Diploma and the rest 124 (89.9%) & 2(1.4) of them were first & 2<sup>nd</sup> degree holders respectively. Another word, 57(95%) & 3(5%) of school-based supervisors had a first & 2<sup>nd</sup> degree respectively. From this fact, one may conclude that there is no much gap in level of education between the teacher and clinical supervisors on the level of education.

Regarding the educational level, only one school principal and one Woreda Supervision coordinator second degree holders in school leadership whereas the rest of the interviewees have first degrees in teaching. From this, one can understand that there is no much difference between Woreda supervision coordinators and the school principals as well as teachers regarding their level of education.

As illustrated in the above Table 4 of item 5, teachers' experience (service year) were as follows: 46(33.3%) of teachers were between the service year range of 6 and below service years, 38(27.5 %) of them were between the experience range of 7 to 12 and 30(21.7 %) of them were between the experience ranges of 13 to 16 years. As well as, the remaining respondents, 24(17.4%) of teacher respondents were between the range of 17 and above years of experience. On the other hand, 6(10%) and 14(23.3) school-based supervisors have 6 and 7 to 12 years of experience respectively. Whereas the rest 40(76.7)of them have more than 12 years of experience. This implies that the majorities of teacher respondents have 6 and below service years in teaching which implies that they need support from their senior teachers.

With respect to experience level of the interviewees, most of the principals, vice principals, and woreda supervisors reported to have served 1 to 5 years as educational managers. Furthermore, all principals vice principals and woreda supervision coordinators were selected from teachers and assigned through the direction of MOE (1996E.C). The document says principals, vice principals and supervisors in the secondary schools should appointed on a merit basis. This shows the majority of interviewees were found inexperienced as principal, vice principal, and supervisor in schools. Most of them were beginner principals and beginner supervisors .Only two principals were proficient (junior). From the analysis made so far, it is safe to conclude that the majority of principals, vice principals, school based supervision committee members (clinical Supervisors) and woreda supervision coordinators in the sample schools were seemed to have less experienced in school management to perform their responsibility effectively.

#### **4.2, Presentation, Analysis & Recommendation of the finding of the study**

This part of the study is devoted to the presentation, analysis, and interpretation of the data obtained from various groups of respondents in relation to the practices and challenges of clinical supervision in government secondary schools of JimmaZone. The data were analyzed both quantitatively and qualitatively and the results were interpreted and lastly recommended.

The qualitative part was to complement the quantitative analysis. The qualitative data included the data gathered through interviews, observation, open-ended questions and document analysis. Regarding quantitative data, teachers and supervisors responded respectively to 32, 32 close-ended questions and 3, 3 open-ended questions. Generally, questionnaires were distributed to 198 (138 teachers & 60 school-based supervisors) respondents and were filled and collected by the help of data collection assistances. The qualitative data was collected by the researcher through interview questions, observation checklist and document analysis guide.

### 4.3 Teachers understanding towards the Role of clinical Supervision

**Table-5:** Respondents' Responses on the teachers' understanding towards the Roles of clinical Supervision.

| No. | Items   | Respondents     | Responses. |     |    |      |    |     |    |      |    |      |       |     | Com<br>pute<br>d $\chi^2$ | Sig.p-value |
|-----|---|-----------------|------------|-----|----|------|----|-----|----|------|----|------|-------|-----|---------------------------|-------------|
|     |   |                 | SD         |     | DA |      | UD |     | AG |      | SA |      | Total |     |                           |             |
|     |   |                 | N          | %   | N  | %    | N  | %   | N  | %    | N  | %    | N     | %   |                           |             |
| 1   | Orienting teachers on the activities of clinical supervision.         | Teachers        | 7          | 5.1 | 76 | 55.1 | 3  | 2.2 | 47 | 34.1 | 5  | 3.6  | 138   | 100 | 5.366                     | .252        |
|     |   | Supervisor<br>s | 1          | 1.7 | 29 | 48.3 | -  | -   | 25 | 41.7 | 5  | 8.3  | 60    | 100 |                           |             |
| 2   | Awaring teachers to significant of clinical supervision.              | Teachers        | 6          | 4.3 | 73 | 52.9 | 5  | 3.6 | 46 | 33.3 | 8  | 5.8  | 138   | 100 | 4.327                     | .364        |
|     |   | Supervisor<br>s | -          | -   | 34 | 56.7 | 1  | 1.7 | 19 | 31.7 | 6  | 10.0 | 60    | 100 |                           |             |
| 3   | Teachers' consideration for Clinical supervision.                     | Teachers        | 3          | 2.2 | 45 | 32.6 | 8  | 5.8 | 70 | 50.7 | 12 | 8.7  | 138   | 100 | 2.534                     | .639        |
|     |   | Supervisor<br>s | 1          | 1.7 | 26 | 43.3 | 3  | 5.0 | 24 | 40   | 6  | 10.0 | 60    | 100 |                           |             |
| 4   | Clinical Supervision enables teachers to use teaching techniques.     | Teachers        | 8          | 5.8 | 38 | 27.5 | 4  | 2.9 | 76 | 55.1 | 12 | 8.7  | 138   | 100 | 12.14<br>5                | .016        |
|     |   | Supervisor<br>s | 4          | 6.7 | 27 | 45.0 | 5  | 8.3 | 23 | 38.3 | 1  | 1.7  | 60    | 100 |                           |             |
| 5   | Clinical supervision increases the improvement of students' learning. | Teachers        | 9          | 6.5 | 24 | 17.4 | 11 | 8.0 | 81 | 58.7 | 13 | 9.4  | 138   | 100 | 15.12<br>0                | .004        |
|     |   | Supervisor<br>s | 3          | 5.0 | 25 | 41.7 | 6  | 10  | 24 | 40   | 2  | 3.3  | 60    | 100 |                           |             |

Key :Strongly disagree(SD), Disagree(DA), Undecided(UD), Agree(AG), Strongly agree(SA)

The table value  $\chi^2=9.487$  at 0.05 significant levels with four degree of freedom.

As showed in item 1 of Table 5, respondents were asked to rate their agreement levels on the orientation of teachers towards clinical supervision. Accordingly, 76 (55.1%) teachers and 29(48.3%)

supervisors were disagreed that orientation of teachers towards clinical supervision. The Chi-square also shows that there is no significant different between the responses of respondents since the Chi-square  $\chi^2=5.36$  is less than the critical value ( $\chi^2=9.487$ ) with four degree of freedom. Thus, it can be said that most of the respondents were not satisfied with regarding orientation of teachers towards Clinical supervision. From this fact, it is possible to conclude that teachers of the study area were not orientated towards activities of Clinical supervision properly. The significance value (p-value) 0.25 is also greater than 0.05 shows there is no significance difference between the two groups. Contrast to this finding, ACES (2011) stated that the supervisor and supervisee discuss on how the supervisee will prepare for each supervision session relevant to the supervision format and agree on cancellation and rescheduling procedures for supervision sessions.

With regards to item 2 of Table 5, respondents were asked whether or not teachers are well aware of the significance of Clinical supervision ,teachers with 73(52.9%) and 34(56.7%) supervisors were disagreed about well aware of teachers on the significance of Clinical supervision. The Chi-square  $\chi^2=4.32$  is less than the critical value( $\chi^2=9.487$ ) with 4df shows the disagreement of the majority of respondents with the issue .Therefore based on the majority of re respondents; it can be conclude that teachers were not well aware of the significance of clinical supervision in the study area. The significance value (p-value) is 0.36 is greater than 0.05 shows there is no significance difference between the opinions of the two groups.

As the responses to item 3 indicate, respondents were asked whether or not teachers consider that Clinical supervision contributed for their professional development, 70(50.7%) teachers, and 24(40%) supervisors were agreed. One can concluded that most of the teachers in the study area are considered that clinical Supervision is contributed for their professional growth. The Chi-square value  $\chi^2=2.53$  is less than the critical value ( $\chi^2=9.487$ ) at a significant level of 0.639 with 4df. This implies that there is no a significant difference among the response of the two groups of respondents.

With regard to item 4 of Table 5, respondents were asked to rate their agreement levels whether or not clinical Supervision enables teachers to use a variety of teaching techniques. Accordingly, 76(55.1%) teachers and 23(38.3%) Supervisors were agreed. Another word, 38(27.5%), 27(45%) teachers and Supervisors were respectively disagreed. From this perspective, it can be perceived that the majority of teacher respondents of the study area are believed that clinical Supervision service enable them to use



a variety of teaching techniques whereas most supervisors might be failed to identify the perception of teachers towards the issue.

The chi-square value  $\chi^2=12.14$  is greater than the Table value ( $\chi^2=9.487$ ) at a significant level of 0.016 with 4df. This indicates that there is a significant difference between the responses of the two groups of respondents. Furthermore, A study by MohdZawawi (2002) as cited by Beghetto (2013) indicated that most of teachers agree that clinical supervision helps to increase their teaching quality. His research finding also showed that 82.5% of teachers agree that clinical supervision has to focus on teaching techniques, questioning styles, set induction and two-way communication between teachers and students.

In In the 5<sup>th</sup> item of Table 5, respondents were asked to rate their agreement levels whether or not teachers believe that clinical supervision helps to increase the improvement of students' learning, 81(58.7%) teachers and 24(40%) supervisors respectively confirmed that certainty of clinical supervision results the improvement of students' learning in their school whereas 24(17.4%), 25(41.7%) teachers and supervisors were respectively disagreed. This might indicate supervisor did not identify what their teachers' believed in. Since the majority of respondents were agreed about the issue, one could conclude that many teachers of sampled schools assured that clinical supervision results the improvement of students' learning in their school. The Chi-square  $\chi^2=15.12$  is greater than the critical value ( $\chi^2=9.487$ ) at a significant level of 0.004 wich shows there is a significant difference between the opinions of the two groups regarding clinical supervision results the improvement of students' learning in their school.

The items in each of the categories were aggregated (as measuring the same thing) based on the results of inter-item correlation and factor analysis of data. Then, a one-way ANOVA was conducted in order to examine the differences in perceptions of the teachers across the ten secondary schools (see Table 6 below).

**Table 6:** One –way ANOVA on the teachers’ perception on their understanding towards the role of clinical Supervision among schools.

|                | Sum of Squares | Df  | Mean Square | F     | Sig. |
|----------------|----------------|-----|-------------|-------|------|
| Between Groups | 7.763          | 9   | .863        | 1.411 | .190 |
| Within Groups  | 78.263         | 128 | .611        |       |      |
| Total          | 86.027         | 137 |             |       |      |

As shown in the Table 6, there is no a significant difference in perceptions among schools on the teachers’ understanding towards the role of clinical Supervision in their mean of observed since p-value is greater than 0.05 levels. This implies, the majority of teachers of the secondary schools of the Jimma Zone had no understanding about the role of clinical supervision.

#### **4.4. The Procedures of Classroom Observation.**

The purpose of clinical supervision is to assist teachers to contribute more effectively towards professional growth and improvement of student achievement that result school improvement. Thus, supervision of teachers while they are teaching in the classroom is among the better strategies for helping them. Jones (as cited in Abebe,2014 ) indicates, classroom observation is a way of gathering data concerning teaching learning activities in the class by taking into account improving teacher effectiveness, then looking at what is actually happening in the classroom.

Classroom visit enables supervisors not only to identify any shortcomings of teachers and the problems encountered by them, but also to understand what leads to better performance of the teaching learning process (MOE, 1994). In respect to the procedures of classroom observation, respondents were asked whether or not the procedures have been implemented appropriately in their school. The results obtained are presented as follows.

#### 4.4.1, Pre- Observation Conferences

**Table 7:** views of respondents on activities practiced before conducting classroom observation(pre-observation Conference).

| No. | Items  | Respondents | Responses. |      |    |      |    |     |    |      |    |      |       |     | x <sup>2</sup> | Sig.p-value |
|-----|--|-------------|------------|------|----|------|----|-----|----|------|----|------|-------|-----|----------------|-------------|
|     |  |             | SD         |      | DA |      | UD |     | AG |      | SA |      | Total |     |                |             |
|     |  |             | N          | %    | N  | %    | N  | %   | N  | %    | N  | %    | N     | %   |                |             |
| 1   | Informing teachers about the classroom observation beforehand.   | Teachers    | 8          | 5.8  | 19 | 13.8 | 10 | 7.2 | 88 | 63.8 | 13 | 9.4  | 138   | 100 | 4.563          | .335        |
|     |  | Supervisors | 1          | 1.7  | 9  | 15   | 2  | 3.3 | 38 | 63.3 | 10 | 16.7 | 60    | 100 |                |             |
| 2   | Making mutual agreement on the plan of lesson to be observed.    | Teachers    | 15         | 10.9 | 81 | 58.7 | 13 | 9.4 | 21 | 15.2 | 8  | 5.8  | 138   | 100 | 19.076         | .001        |
|     |  | Supervisors | 4          | 6.7  | 24 | 40   | 5  | 8.3 | 26 | 43.3 | 1  | 1.7  | 60    | 100 |                |             |
| 3   | Communicating the purpose & objectives of classroom observation. | Teachers    | 21         | 15.2 | 80 | 58.0 | 6  | 4.3 | 24 | 17.4 | 7  | 5.1  | 138   | 100 | 23.582         | .000        |
|     |  | Supervisors | 1          | 1.7  | 25 | 41.7 | 1  | 1.7 | 25 | 41.7 | 8  | 13.3 | 60    | 100 |                |             |
| 4   | Deciding on suitable time for classroom visit.                   | Teachers    | 19         | 13.8 | 78 | 56.5 | 5  | 3.6 | 27 | 19.6 | 9  | 6.5  | 138   | 100 | 10.904         | .028        |
|     |  | Supervisors | 6          | 10   | 22 | 36.7 | 3  | 5.0 | 24 | 40   | 5  | 8.3  | 60    | 100 |                |             |

*Key: Strongly disagree (SD), Disagree (DA), Undecided (UD), Agree (AG), strongly agree (SA)*

*The table value  $X^2=9.487$  at 0.05 significant levels with four degree of freedom.*

While responding to item 1 of Table 7, concerning whether or not teachers are informed about classroom observation beforehand, 88 (68.8%) teachers and 38 (63.3%) supervisors were agreed. The Chi-square test also showed that there is no significant difference between the opinions of respondents since the computed chi-square value  $x^2 = 4.563$  is less than the critical value (9.487) with 4df implying

that mostly classroom observation was conducted after teachers had informed. Contrary to the internal supervision, however, the interview with school principals revealed that classroom observations by external supervisors were mostly unplanned and informal. From this finding, therefore, it is possible to realize that external supervisors do not consistently work with teachers to assist them in their classroom practices.

Item 2 of Table 7 denotes that teachers and supervisor respondents were asked whether or not supervisors and teachers make mutual agreement on the plan of the lesson to be observed. Accordingly, 81(58.7%) teachers, and 24(40%) of supervisors, were not assured that they made mutual agreement on the plan of lesson to be observed. The computed chi-square value  $\chi^2 = 19.076$  is greater than the table value ( $\chi = 9.487$ ) at a significant level of 0.001 with four degree of freedom. This implies that there is a significant difference among the response of the two groups of respondents. Contrast to this finding, Blasé and Blasé (2004) suggest that supervisors should mutually decide with their teachers on what and how to observe before proceeding to the classroom to observe a lesson.

With item3 of Table7, respondents were asked if supervisors communicate the purpose and objectives of supervision before the actual classroom observation. As a result, 80 (58%) teacher respondents showed their disagreement in their response whereas 25 (41.7%) supervisors agreed. The Chi-square test also indicated that there is a significant difference between respondents' response since the computed chi-square value,  $\chi^2 = 23.582$ , is greater than the critical value of (9.487) with 4df. This revealed that many teachers of the study area were not familiar with the purpose and objectives of the classroom observation.

Item 4 of Table 7, related to whether teachers decide suitable time with their supervisors for classroom observation and to which 78 (56.5%) teachers reacted showing their disagreement whereas 24 (40%) supervisors agreed. Similarly, the Chi-square test denoted a statistically significant difference because the computed chi-square value 10.90 is greater than the critical value (9.487) with 4df. Generally, from the results of items 2, 3 and 4of Table 7, it is possible to conclude that pre-classroom observation conferences in the area under the study were not properly coordinated and conducted rather teachers are simply informed only the date on wich Class-room observation would be conducted. Furthermore, from the interview with the school principals and with Woreda supervisors; it was found that pre-observation conferences were not frequently held (only twice a year). As a result, teachers of the study

area were unfortunately, had less opportunity to discuss and decide on the plan of the lesson to be observed, purposes, objectives and functions of class observation before actual practice in the classroom with their supervisors. Therefore, based on the result of the chi-square tests and data obtained from interview, it is possible to conclude that supervisors do not sufficiently hold pre-observation conference so that to discuss and decide on the issue collaboratively with teachers. In line with this, krajewksi(1993:2) as cited in Brennen (2000) pointed that: in pre-observation conference, the supervisor and teacher discuss the lesson to be observed, the method of observation, objective analysis instrument(s) will be used, the focus of observation and all necessary logistic factors as well as the time of observation and the time for post-conference are focused in this session.

The items in each of the categories were aggregated (as measuring the same thing) based on the results of inter-item correlation and factor analysis of data. Then, a one-way ANOVA was conducted in order to examine the differences in perceptions of the teachers across the ten secondary schools (see Table 8 below).

**Table 8:** One-way ANOVA on teachers’ perception on the utilization of the procedures of pre-clinical supervision across the schools.

|                | Sum of Squares | df  | Mean Square | F     | Sig. |
|----------------|----------------|-----|-------------|-------|------|
| Between Groups | 8.064          | 9   | .896        | 1.275 | .257 |
| Within Groups  | 89.962         | 128 | .703        |       |      |
| Total          | 98.026         | 137 |             |       |      |

Table 8 showed that there is no a significant variation among schools in their mean of observed on utilization of the procedures of pre-clinical supervision in the schools Since P-value is greater than 0.05 for all the variables. This indicates that pre-observation conference was not well conducted in secondary schools of the study.

#### 4.4.2, Class-room Observation phase

**Table-9:**Activities carried out during class-room observation

| No. | Items   | Respondents | Responses. |      |    |      |    |     |    |      |    |      |       |     | Sig.p value |      |
|-----|---|-------------|------------|------|----|------|----|-----|----|------|----|------|-------|-----|-------------|------|
|     |   |             | SD         |      | DA |      | UD |     | AG |      | SA |      | Total |     |             |      |
|     |   |             | N          | %    | N  | %    | N  | %   | N  | %    | N  | %    | N     | %   |             |      |
| 1   | Supervisors conduct a planned Class-room observation.                     | Teachers    | 11         | 8.0  | 86 | 62.3 | 1  | 0.7 | 34 | 24.6 | 6  | 4.3  | 138   | 100 | 37.690      | .000 |
|     |   | Supervisors | -          | -    | 15 | 25.0 | -  | -   | 36 | 60   | 9  | 15.0 | 60    | 100 |             |      |
| 2   | Supervisors frequently visit classrooms to provide support to teachers.   | Teachers    | 8          | 5.8  | 97 | 70.3 | 5  | 3.6 | 19 | 13.8 | 9  | 6.5  | 138   | 100 | 11.740      | .019 |
|     |   | Supervisors | 1          | 1.7  | 31 | 51.7 | 5  | 8.3 | 18 | 30.0 | 5  | 8.3  | 60    | 100 |             |      |
| 3   | Supervisors spend sufficient time in the classroom to observe instruction | Teachers    | 25         | 18   | 76 | 55.1 | 7  | 5.1 | 28 | 20.3 | 2  | 1.4  | 138   | 100 | 9.805       | .044 |
|     |   | Supervisors | 6          | 10.0 | 40 | 66.7 | -  | -   | 10 | 16.7 | 4  | 6.7  | 60    | 100 |             |      |
| 4   | Collecting relevant data during classroom observation.                    | Teachers    | 3          | 2.2  | 41 | 29.7 | 13 | 9.4 | 68 | 49.3 | 13 | 9.4  | 138   | 100 | 9.037       | .060 |
|     |   | Supervisors | -          | -    | 15 | 25.0 | -  | -   | 38 | 63.3 | 7  | 11.7 | 60    | 100 |             |      |

Key :Strongly disagree(SD), Disagree(DA), Undecided(UD), Agree(AG), Strongly agree(SA)

The table value  $X^2=9.487$  at 0.05 significant levels with four degree of freedom.

With item 1 of Table9, respondents were asked whether supervisors conduct planned classroom observation. Hence, 76(62.3% teachers disagreed whereas 36 (40%) of supervisors indicated that they

agree. The computed Chi-square value, 37.69, indicated the existence of significant variations among the responses of the two groups since  $\chi^2$  value is more than the critical value (9.487) with 4 df at 0.000 significance level. From the result, it can be concluded that supervisors were not in a position to conduct planned classroom observation.

In their response to item 2 of Table 9, was regarding the issues of regular classroom visit, the majorities of respondents 97 (70.3%) teachers and 31 (51.7%) supervisors disagreed. The result from Open-ended question of both teachers and supervisors also pointed that class-room supervision was not regularly conducted. Hence, it is considered as teachers' evaluation than support. Not only this but also as can be seen from documents of supervision session, only twice per year in many schools and 3-4 as per year in few number of sampled schools was indicated insufficient class-room visit. From this, it is possible to conclude that class-room visit was not continuously conducted in the schools under the study area. In addition, the computed chi-square value,  $\chi^2=11.74$ , is greater than the critical value of  $\chi^2= 9.487$  with 4 degrees of freedom. Hence, there is a significant difference between the responses of the respondents. This depicted that there were no classroom visitation conducted on a regular basis. In line with this, as Glickman(2010:293) pointed out, clinical supervision is not consistent with summative evaluation; it is not intended to gather data to make judgments about whether teachers are meeting teaching performance criteria for continued employment. In addition to this, research by Lillian(2007) indicates: Teachers preferred having supervision of instruction at least once per term and all teachers regard supervision of instruction as a necessary activity in the learning process.

With item 3 of Table 9, respondents were asked whether supervisors take sufficient time during the actual classroom observation. Accordingly, the majorities 76 (55.1%) and 40 (66.7%) teacher and supervisors respondents expressed their disagreement respectively. The result shows that the responses of teachers and supervisors non-contradict. This indicated that supervisors did not take sufficient time during the actual classroom supervision. From this result, it is possible to conclude that supervisors could not use sufficient time to have full information about the instructional knowledge of teachers. In supporting this idea, Cross and Rice (2000) suggested that school principals need to spend the majority of their time in classrooms talking to teachers and students about teaching and learning.

While responding to item 4 of Table9, regarding the issues of collecting relevant data during the classroom observation, the majority of respondents 68 (49.3%) teachers and 38 (63.3%)supervisors agreed with the concept. Generally, the results to items 1, 2 and 3 of Table 9 disclosed that there were no effective classroom observations in the area under the study.

The items in each of the categories were aggregated (as measuring the same thing) based on the results of inter-item correlation and factor analysis of data. Then, a one-way ANOVA was conducted in order to examine the differences in perceptions of the teachers across the ten secondary schools (see Table 10 below).

. **Table 10:** One- way ANOVA on Teachers’ perception on the actual class-room observation among schools of the study.

|                | Sum of Squares | df  | Mean Square | F     | Sig. |
|----------------|----------------|-----|-------------|-------|------|
| Between Groups | 18.285         | 9   | 2.032       | 3.535 | .001 |
| Within Groups  | 73.565         | 128 | .575        |       |      |
| Total          | 91.850         | 137 |             |       |      |

Table 10 shows that there is a significant difference in perceptions of teachers among schools under the study on the actual class-room observation since P- value is less than 0.05 for all variables. Accordingly, one-way ANOVA of Post-Hoc multiple comparisons and Tukey-test at0.05significance level indicated that there is a significant perception difference among Aba buna secondary school and seka secondary school as well as among Seto and Aba buna secondary schools on the actual class-room observation. Here, the mean of Aba buna secondary school was 3.64 which is almost in the range of agreement and this results show the actual classroom observation was conducted in this school whereas less than 3.00 means scored for others which is in the ranges of dis agreement and this indicates that actual classroom observation was not well conducted in others schools of the study.



### 4.4.3, Post- conference

**Table11:** Respondents views on the utilization of post classroom- observation conference.

| No. | Items   | Respondents | Responses. |      |    |      |    |     |    |      |    |      |       |     | x <sup>2</sup> | Sig.p-value |
|-----|---|-------------|------------|------|----|------|----|-----|----|------|----|------|-------|-----|----------------|-------------|
|     |   |             | SD         |      | DA |      | UD |     | AG |      | SA |      | Total |     |                |             |
|     |   |             | N          | %    | N  | %    | N  | %   | N  | %    | N  | %    | N     | %   |                |             |
| 1   | Communicating immediate feedback to teachers after classroom observation.                               | Teachers    | 14         | 10.1 | 57 | 41.3 | 3  | 2.2 | 54 | 39.1 | 10 | 7.2  | 138   | 100 | 27.828         | .000        |
|     |   | Supervisors | -          | -    | 10 | 16.7 | -  | -   | 36 | 60.0 | 14 | 23.3 | 60    | 100 |                |             |
| 2   | Providing constructive comments to teachers to encourage their creativity.                              | Teachers    | 6          | 4.4  | 64 | 46.4 | 2  | 1.4 | 52 | 37.7 | 14 | 10.1 | 138   | 100 | 12.407         | .015        |
|     |   | Supervisors | -          | -    | 16 | 26.7 | -  | -   | 35 | 58.3 | 9  | 15.0 | 60    | 100 |                |             |
| 3   | Holding Post-conference for discussion after classroom observation.                                     | Teachers    | 80         | 58.0 | 28 | 20.3 | 7  | 5.1 | 15 | 10.9 | 8  | 5.8  | 138   | 100 | 17.329         | .002        |
|     |   | Supervisors | 19         | 31.7 | 27 | 45.0 | 4  | 6.7 | 9  | 15.0 | 1  | 1.7  | 60    | 100 |                |             |
| 4   | Discussing on the collected data during classroom observation to improve teachers' classroom behaviors. | Teachers    | 11         | 8.0  | 60 | 43.5 | 5  | 3.6 | 59 | 42.7 | 3  | 2.2  | 138   | 100 | 18.166         | .001        |
|     |   | Supervisors | 1          | 1.7  | 14 | 23.3 | -  | -   | 40 | 66.7 | 5  | 8.3  | 60    | 100 |                |             |

*Key: SD=Strongly Disagree, DA=Disagree, UD= Undecided, AG =Agree SA=strongly Agree  
The table value  $X^2=9.487$  at 0.05 significant levels with four degree of freedom*

With item 1 of Table 11, respondents were asked whether immediate feedback is communicated to teachers after classroom supervision. In their reaction to the item, 14 (10.1%) and 57(41.3%) teachers indicated their strongly disagreement and disagreement respectively whereas 36 (60%) supervisors agreed. This shows that supervisors have not given due attention to communicate immediate feedback

to teachers after observing classroom instruction since the responses of teachers and supervisor contradict with each other. Similarly, the computed chi-square value,  $\chi^2 = 27.83$  is greater than the critical value of the Chi-square,  $\chi^2 = 9.487$  with 4 degrees of freedom at the significance level of 0.00 implying a statistically significant difference. For Beach and Reinhartz, (as cited in Olana, 2013) recommended, supervisors should give feedback to teachers to facilitate effective and desirable pedagogical skills.

While reacting to item 2 of Table 11, the issues of providing suggestion to teachers 64(46.4%) teachers disagreed whereas 35 (58.3%) of school supervisors expressed their agreement. The computed Chi-square indicated that there is a significant difference as it is less than 0.05 alpha levels. This indicated that supervisors provided no adequate and productive suggestion to teachers for instructional improvement.

With item 3 of Table 11, respondents were asked whether conferences were held after the classroom observation. Accordingly, 80(58%) teachers and 19 (31.7%) supervisors showed their strongly disagreed respectively. The Chi-square test also indicated that there is a significant difference as the computed Chi-square,  $\chi^2 = 17.329$  is greater than the critical value of the Chi-square, ( $\chi^2 = 9.487$ ) with 4 df at the significance level of 0.002. This revealed that supervisors were not in a position to discuss about issues which have been observed in the classroom. Accordingly, Glickman (1990) underscored that both the supervisor and the teacher should discuss the analyses of observation through conference and finally produce a plan for instructional improvement. As opposed to this, the findings of the study revealed that post-observation conferences were not effectively planned for the successful implementation of classroom practices.

The interview with school principals and Woreda Education Office Supervisor indicated that conferences have been held sometimes when directed by the upper administrative bodies which do not specifically focus on teachers' classroom behavior. From this, since the conference is not intended with classroom observation, one can conclude as there is no conference after observation to discuss about the issues has been observed.

Item 4 of Table 11, respondents asked whether or not they discuss on collected data to be focused on and improved during post-observation conferences so that to improve teaching behavior. As to this, 60(43.5%) teachers and 40 (66.7%) supervisors expressed their agreement. The Chi-square value,  $\chi^2$

=18.16 has shown that there is a significant variation at 0.01 levels of significance. This depicted that the provision of suggestion for teachers and the discussion with teachers after the classroom observation to indicate improved strategies for teaching behavior was very low.

The items in each of the categories were aggregated (as measuring the same thing) based on the results of inter-item correlation and factor analysis of data. Then, a one-way ANOVA was conducted in order to examine the differences in perceptions of the teachers across the ten secondary schools (see Table 12 below).

**Table 12:** One-way ANOVA on Teachers' perception difference about issues of post-classroom observation across the schools of the study.

|                | Sum of Squares | df  | Mean Square | F     | Sig. |
|----------------|----------------|-----|-------------|-------|------|
| Between Groups | 6.987          | 9   | .776        | 1.278 | .255 |
| Within Groups  | 77.738         | 128 | .607        |       |      |
| Total          | 84.725         | 137 |             |       |      |

As shown in Table 12, there is no a significant difference observed in perceptions among the schools on the post-classroom observation activities since significant P-value (.255) is greater than the significant level 0.05 for all variables. From this perspective, one could conclude that the post-classroom observation conference for activities was not utilized appropriately in the schools under the study.

#### 4.5. Teachers’ professional Development

**Table13:** Respondents responses towards teachers’ professional development.

| No | Items   | Respondents | Responses. |      |    |      |    |     |    |      |    |     |       |     | x <sup>2</sup> | Sig.p-value |
|----|---|-------------|------------|------|----|------|----|-----|----|------|----|-----|-------|-----|----------------|-------------|
|    |   |             | SD         |      | DA |      | UD |     | AG |      | SA |     | Total |     |                |             |
|    |   |             | N          | %    | N  | %    | N  | %   | N  | %    | N  | %   | N     | %   |                |             |
| 1  | Facilitating short –term training.  | Teachers    | 25         | 18.1 | 87 | 63.3 | 3  | 2.2 | 22 | 15.9 | 1  | 0.1 | 138   | 100 | 22.542         | .000        |
|    |   | Supervisors | -          | -    | 36 | 60   | 5  | 8.3 | 15 | 25.0 | 4  | 6.7 | 60    | 100 |                |             |
| 2  | Encouraging teachers to attend workshops  | Teachers    | 52         | 37.7 | 64 | 46.4 | 5  | 3.6 | 13 | 9.4  | 4  | 2.9 | 138   | 100 | 22.843         | .000        |
|    |   | Supervisors | 9          | 15.0 | 33 | 55.0 | -  | -   | 18 | 30   | -  | -   | 60    | 100 |                |             |
| 3  | Facilitating team planning  | Teachers    | 43         | 31.2 | 73 | 52.9 | 4  | 2.9 | 18 | 13.0 | -  | -   | 138   | 100 | 34.769         | .000        |
|    |   | Supervisors | 5          | 8.3  | 28 | 46.7 | -  | -   | 23 | 38.3 | 4  | 6.7 | 60    | 100 |                |             |
| 4  | Arranging symposia to improve instruction.  | Teachers    | 65         | 47.1 | 56 | 40.6 | 2  | 1.4 | 14 | 10.1 | 1  | 0.7 | 138   | 100 | 18.928         | .001        |
|    |   | Supervisors | 10         | 15.7 | 36 | 60.0 | -  | -   | 13 | 21.7 | 1  | 1.7 | 60    | 100 |                |             |
| 5  | Establishing a culture of professional and collegial interactions among teachers. | Teachers    | 12         | 8.7  | 89 | 64.5 | 7  | 5.1 | 28 | 20.3 | 2  | 1.4 | 138   | 100 | 17.444         | .002        |
|    |   | Supervisors | 2          | 3.3  | 28 | 46.7 | 1  | 1.7 | 29 | 48.3 | -  | -   | 60    | 100 |                |             |

*Key: SD=Strongly Disagree, DA=Disagree, UD= Undecided, AG =Agree, SA=strongly Agree*

*The Table value X<sup>2</sup>=9.487 at 0.05 significant levels with four degree of freedom.*

With item 1 of Table 13, respondents were asked whether supervisors facilitate short term training for teachers to increase their professional development. Hence, 63.3% of teachers and 36(60%) supervisors disagreed. In addition, the computed Chi-square test,  $x^2 = 22.542$  is greater than the critical value of Chi-square, ( $x^2 = 9.487$ ) with 4 df at a significance level of 0.000. This implies that supervisors could not contribute much to improve teachers’ professional development in the schools of the study.

While responding to item 2 of Table 13, that is, concerning the issue of whether supervisors encourage teachers with the opportunity to attend workshops and seminars, 52 (37.7%) and 9 (15%) teachers and supervisors expressed their strongly disagreement respectively. Furthermore, the computed Chi-square Value,  $\chi^2 = 22.84$  with 4 df at 0.000 alpha level of significance shows that there is statistically significant difference between respondents' responses. This depicted that workshops and seminars were not properly arranged for further professional improvement of teachers.

Regarding item 3 of Table 13, (whether supervisors facilitate team planning to create methods of peer review practices in the school), 43 (31.2%) teachers and 5 (8.3%) supervisors showed their strongly disagreement. The Chi-square value,  $\chi^2 = 34.76$  with 4 df at a significance level of alpha 0.000 indicates the significant difference between the ideas of the two groups of respondents. From the result, thus, it is possible to conclude that team planning as a method of peer review was not well organized and coordinated in the area under the study.

With item 4 of Table 13, respondents were asked if supervisors arrange symposia for teachers. Consequently, 65 (47.1 %), 10 (15.7) teachers showed strongly disagreement and 36 (60%) supervisors reported their disagreement respectively. Similarly, the computed Chi-square value,  $\chi^2 = 18.92$  with four df at an alpha level of 0.001 implying that there is a statistically significant difference between respondents' response. This denotes that supervisors were not capable of arranging symposia for the purpose of teachers' professional development.

While responding to item 5 of Table 13, which is about the establishment of culture of professional and collegial interaction among teachers, 89(64.5%) teachers and 28 (46.7%) supervisors expressed their disagreement. The computed Chi-square value 17.444 with four degrees of freedom at an alpha level of 0.002 is greater than the critical value of 9.487 indicated significant difference between the responses of the two groups of respondents. From the results of the finding, it is possible to say that collegial and professional interactions among teachers were less performed in the sampled schools and, hence, supervisors could not adequately work towards the professional development of teachers. In line with this, Blasé & Blasé, ( as cited in Olana, 2013) stated that: “ It is the responsibility of supervisors to provide teachers with in-service training sessions, as well as encourage them to attend workshops and conferences to bring them abreast with time in their instructional practices”.

The items in each of the categories were aggregated (as measuring the same thing) based on the results of inter-item correlation and factor analysis of data. Then, a one-way ANOVA was conducted in order to examine the differences in perceptions of the teachers across the ten secondary schools (see Table 14 below).

**Table 14:**One- way ANOVA on the teachers’ perception among schools on the professional Development.

|                | Sum of Squares | df  | Mean Square | F     | Sig. |
|----------------|----------------|-----|-------------|-------|------|
| Between Groups | 5.471          | 9   | .608        | 1.024 | .424 |
| Within Groups  | 75.982         | 128 | .594        |       |      |
| Total          | 81.453         | 137 |             |       |      |

As indicated in Table 14, there is no a significant variation among schools in their mean of observed on the contribution of the clinical supervision to teachers’ professional development Since P-value is greater than 0.05 alpha levels for all variables. This depicts that supervisors have not paid necessary efforts for teachers’ professional development in the secondary schools of Jimma Zone.

#### 4.6. The major Challenges to Clinical supervision

**Table15:** Respondents responses towards the major challenges hinder the implementation of clinical Supervision.

| No. | Items  | Respondents | Responses. |     |    |      |    |      |    |      |    |      |       |     | x <sup>2</sup> | Sig.p-value |
|-----|--|-------------|------------|-----|----|------|----|------|----|------|----|------|-------|-----|----------------|-------------|
|     |  |             | SD         |     | DA |      | UD |      | AG |      | SA |      | Total |     |                |             |
|     |  |             | N          | %   | N  | %    | N  | %    | N  | %    | N  | %    | N     | %   |                |             |
| 1   | Lack of regular classroom visit.                                     | Teachers    | 8          | 5.8 | 17 | 12.3 | 3  | 2.2  | 92 | 66.7 | 18 | 13.0 | 138   | 100 | 6.361          | .174        |
|     |  | Supervisors | 1          | 1.7 | 11 | 18.3 | 3  | 5.0  | 42 | 70.0 | 3  | 5.0  | 60    | 100 |                |             |
| 2   | Supervisors spend insufficient time in the classroom.                | Teachers    | 1          | 0.7 | 29 | 21   | 5  | 3.6  | 73 | 52.9 | 30 | 21.7 | 138   | 100 | 8.452          | .076        |
|     |  | Supervisors | -          | -   | 20 | 33.3 | -  | -    | 34 | 56.7 | 6  | 10   | 60    | 100 |                |             |
| 3   | Lack of necessary supervisory skills..                               | Teachers    | 2          | 1.4 | 26 | 18.8 | 16 | 11.6 | 78 | 56.5 | 16 | 11.6 | 138   | 100 | 4.398          | .355        |
|     |  | Supervisors | -          | -   | 18 | 30   | 7  | 11.7 | 31 | 51.7 | 4  | 6.7  | 60    | 100 |                |             |
| 4   | Routine activities are given priority than pedagogic practices.      | Teachers    | 2          | 1.4 | 28 | 20.3 | 3  | 2.2  | 89 | 64.5 | 16 | 11.6 | 138   | 100 | 15.847         | .003        |
|     |  | Supervisors | 4          | 6.7 | 24 | 40   | -  | -    | 30 | 50.0 | 2  | 3.3  | 60    | 100 |                |             |
| 5   | Supervisors are authoritarian, fault finding, biased and subjective. | Teachers    | 13         | 9.4 | 60 | 43.5 | 14 | 10.1 | 46 | 33.3 | 5  | 3.6  | 138   | 100 | 22.466         | .000        |
|     |  | Supervisors | 18         | 30  | 29 | 48.3 | 7  | 11.7 | 6  | 10   | -  | -    | 60    | 100 |                |             |
| 6   | Supervisors are seldom provided with in-service training.            | Teachers    | 5          | 3.6 | 29 | 21   | 6  | 4.4  | 84 | 60.9 | 14 | 10.1 | 138   | 100 | 8.292          | .081        |
|     |  | Supervisors | -          | -   | 14 | 23.3 | -  | -    | 44 | 73.3 | 2  | 3.3  | 60    | 100 |                |             |
| 7   | Lack of relevant supervision manual in the school.                   | Teachers    | 2          | 1.4 | 22 | 15.9 | 16 | 11.6 | 88 | 63.8 | 10 | 7.2  | 138   | 100 | 12.157         | .016        |
|     |  | Supervisors | -          | -   | 5  | 8.3  | -  | -    | 48 | 80   | 7  | 11.7 | 60    | 100 |                |             |
| 8   | Lack of strong in built supervision.                                 | Teachers    | 1          | 0.7 | 21 | 15.2 | 9  | 6.5  | 85 | 61.6 | 22 | 15.9 | 138   | 100 | 4.763          | .313        |
|     |  | Supervisors | -          | -   | 11 | 18.3 | -  | -    | 38 | 63.3 | 11 | 18.3 | 60    | 100 |                |             |
| 9   | Shortage of budgets to run supervisory activities.                   | Teachers    | 4          | 2.9 | 24 | 17.4 | 14 | 10.1 | 77 | 55.8 | 19 | 13.8 | 138   | 100 | 12.961         | .011        |
|     |  | Supervisors | -          | -   | 2  | 3.3  | 6  | 10   | 35 | 58.3 | 17 | 28.3 | 60    | 100 |                |             |
| 10  | Teachers' lack of interest to be supervised.                         | Teachers    | 13         | 9.4 | 56 | 40.6 | 4  | 2.9  | 59 | 42.6 | 6  | 4.4  | 138   | 100 | 9.105          | .059        |
|     |  | Supervisors | 5          | 8.3 | 14 | 23.3 | 2  | 3.3  | 31 | 51.7 | 8  | 13.3 | 60    | 100 |                |             |

Key: SD=Strongly Disagree, DA=Disagree, UD= Undecided, AG =Agree, SA=strongly Agree  
The table value  $X^2=9.487$  at 0.05 significant levels with four degree of freedom.

As can be seen in Table 15 from the first item, that is, whether or not there is regular classroom visit, 18 (13%) and 92(66.7%) teachers expressed their strongly agreement and agreement respectively whereas 42 (70%) supervisors agreed. This indicates that classrooms were not visited on a regular basis as teachers and supervisors similarly responded to the question. The computed Chi-square value,  $\chi^2=6.361$  is less than the critical value,  $\chi^2=9.487$  with 4 df at 0.174 significance level implying that statistically there is no significant difference between teacher and supervisor respondents. Hence, this leads to conclude that lack of regular classroom visit was one of the challenges to the effectiveness of clinical supervision.

In their response to item 2 of Table 15, respondents were asked whether supervisors do not spend sufficient time during classroom observation. As to this, 73 (52.9%) teachers and 34(56.7%) supervisors expressed their agreement. The Chi-square test revealed that there is no significant difference between the two groups since the computed chi-square value,  $\chi^2 = 8.452$ , is less than the critical value of 9.487 with 4 df at 0.076 level of significance. This might indicate that classroom supervision was not for the purpose of assisting teachers' classroom activities rather for mere evaluation of teachers' performance or for cross-checking whether the teacher is fulfill the criteria to teach in the class-room. As it can be seen from conducted observation in five schools of the study area, most Supervisors (about 67%) do not stay more than 25 minutes. They use only 20-25 minutes out of 42. They mentioned the reason why as: they hadn't enough time to observe all teachers if they used a given time since the number supervisors are limited as per of supervisees. In line with this finding, Wanzare (2001) stated that teachers' lack of feedback and follow-up regarding supervision of instruction and those supervisors not spending much time when they visit classroom are other challenges.

While responding to item 3 of Table 15, respondents were asked whether supervisors lack supervisory skills. Accordingly, 78 (56.5%) teachers and 31(51.7%) supervisors agreed. This shows that there was the challenge of lack of supervisory skills of supervisors in the area under the study. On top of that, the computed Chi-square value,  $\chi^2 =4.398$ , is less than the critical value of 9.487 with 4 df at 0.355 level of significance implying there is no a statistical significant difference between the ideas of respondents. From this, it might be concluded that supervisors were not competent enough to achieve supervisory objectives in the schools. In supporting this finding, Garubo and Rothstein, (as cited in Olana, 2013) observed that the initial problems of school supervisors usually relate to their own sense



of competence. Chapman and Burchfield (1994), in reflecting specifically on the African situation, observed that those individuals selected for supervision may lack formal training in instructional supervision and, consequently, they may not command sufficient respect among teachers to operate effectively as instructional supervisors.

In their reaction to item 4 of Table 15, respondents were asked whether administrative works were given priority than pedagogic activities. While responding to this item, 89 (64.5%) teachers and 30 (50%) supervisors reported their agreement. This shows that administrative works were given priority than pedagogic activities. The computed Chi-square value  $\chi^2 = 15.847$  is greater than the critical value,  $\chi^2 = 9.487$  with four df at 0.003 level of significance indicates there is a significant difference between the opinions of respondents. In line with this finding, Grauwe (2001) stated that another challenge to school supervision is a situation where school principals, by virtue of their position, are administrators, financial managers and instructional supervisors. Such heads have relatively little time for supervision of instruction. Supervisors are overburdened with routine administrative tasks some of which have little or nothing to do with their official job description, consequently, the time that they can devote to pedagogical support and advice becomes limited, if not insignificant (UNESCO, 2007).

As it could be seen from supervisors' checklist, it also dominated by administrative tasks whereas pedagogical activities were limited. Furthermore, the WEOSC through conducted interview reported that burdens related to administrative tasks and immediate work (cross-cutting issues) was a challenge to give clinical supervision services frequently and provide adequate support to their supervisees. From this, it could be concluded that the over domination of routine administrative tasks might be made school supervisors too busy and consumed their time that they can use to pedagogical support.

Item 5 of Table 15, was related to whether supervisors are authoritarian, fault finders, biased and subjective during classroom observation. Hence, about 60 (43.5%) teachers disagreed whereas 18 (30%) supervisors expressed their strongly disagreement. This revealed that supervisors were not authoritarian, fault finders, biased and subjective during classroom observation and evaluation. The Chi-square value,  $\chi^2 = 22.466$ , with four df at 0.000 level of significance showing that there is a significant difference between the opinions of respondents. Contrast to this finding, research conducted by Million, (2010) indicated that the majority of teachers (about 54%) informed that supervisors are fault finder, biased and subjective than supporting on an activities carrying out during class-room

activities. This might be indicated either the act of authoritative that had been reflected by supervisors became changed and replaced by supporting spirit or the differences of supervisory practices between the two study areas.

In their response to item 6 of Table 15, which is whether shortage of in-service training for supervisors. Consequently, 84 (60.9%) teachers and 44 (73.3%) supervisors reported their agreement. This indicated that supervisors were seldom provided with in-service training. The computed Chi-square value,  $\chi^2 = 8.292$ , is less than the critical value  $\chi^2 = 9.487$  with four df at 0.081 level of significance. This shows no significant difference between the responses of the two groups of the respondents. From this finding, it could be concluded that supervisors were not competent enough to properly implement the supervisory practices.

The interview results conducted with school principals and WEO SC showed that supervisors need training on supervisory practices since they were taken from the teaching staff, but they were seldom provided with in-service training. Accordingly, Carron and Grauwe (1997) stated that another issue of concern in the area of supervision is whether supervisors are given enough training to function properly in their practice. They expressed little doubt that supervisors need regular training, but they seldom receive it. They believe that whatever patterns of recruitment and promotion procedures, supervisors need regular training but, they are seldom provided with pre-service or in-service training.

With item 7 of Table 15, respondents were asked if there is lack of relevant supervision manual in the schools. With regard to this, about 63.3% of teachers and 80% of supervisors agreed. This disclosed that lack of relevant supervision manual in the school hampered the effective performance of clinical Supervision in the school. The Chi-square test revealed that there is a statistical significant difference between the responses of the respondents since the computed Chi-square  $\chi^2=12.157$  is greater than the critical value with four df at the significance level of 0.016. The implication of this finding might be that the importance of relevant supervision manual for the successful accomplishment of supervisory clinical practices was not considered. In addition, the results of interview with principals and secondary school supervisors and open –ended questions for teachers and clinical supervisors indicate that lack of relevant and standardized supervision manual and guidance as per the teachers' qualification, experience and practical competence was one the major challenges to conduct clinical supervision in the schools.

Regarding the issues of whether inbuilt supervision is not strong to provide immediate support with item 8 of Table 15, 85 (61.6%) of teachers agreed and 38(63.3%) of supervisors agreed. This depicted that there was no strong inbuilt supervision in the school. The computed Chi-square value,  $\chi^2 = 4.763$  with four df at significance level of 0.313 which revealed that there is no statistically significant difference. From the result, therefore, it could be possible to conclude that clinical supervisors were not competent to improve clinical supervisory services at school level. In line with this finding, Merga (2007) in his material entitled “the approaches to educational supervision” stated that lack of strengthening inbuilt supervision to provide immediate supervisory activities at the grass roots level is one of the problems related to the inadequacy of supervisors.

With item 9 of Table 15, respondents were asked if there was shortage of budget to run clinical supervisory services. As to this, only 24 (17.4%) and 2 (3.3%) teachers and supervisors expressed their disagreement respectively. This shows that there was shortage of budget to run clinical supervisory services in the area under the study. The computed Chi-square value,  $\chi^2 = 12.961$  indicated that there is a statistical significant difference as it is greater than the critical value 9.487 with four df at an alpha level of 0.011. The result, therefore, disclosed that shortage of budget might have the great role in constraining supervisors to contribute their maximum effort to properly guide and support teachers. Similarly, Merga, ( as cited in Olana, 2013), states that the budget is not allocated for the supervisory program and this in turn constrains supervisors’ effort of devoting continuous period of time to guide help and support individual teachers. Similarly, the results of interview with principals and open-ended question of clinical supervisors show that since there is no allocated budget, clinical supervisors hadn’t incentives and other service. For this reason, most of them became loss their responsibilities.

With item 10 of Table 15, respondents reacted to whether teachers have no interest to be supervised. Accordingly, 56(40.6) teachers showed disagreement whereas the majority 59(42.6%) and 31 (51.7%) teachers and supervisors respectively indicated their agreement. This revealed that teachers have no interest to be supervised. From this result, it might be concluded that teachers were assuming supervision as a mere evaluation of their classroom activities. Similarly, research indicates that teachers do not always readily accept school-based supervision by principals. For example, findings in Curtis’ (2002) study indicated that none of the principals studied believed teachers viewed supervision by principals as a positive process, and that for many teachers, supervision was a meaningless exercise that had little value to them other than completion of their evaluation forms. In line with this, Brodsky

(2004) stated that both supervisor and supervisee should know that the supervisor will only intervene to improve performance, not to be unnecessarily critical or arbitrary.

Furthermore, the interview with school principals and secondary school supervisors indicated that teachers were not much interested to be supervised due to the reason that supervisors were assigned from among equal status ( from teaching staff) without having separate training apart from teachers and the fact that some teachers have more experience than supervisors. As a result, teachers did not clearly understand the meaning and the purpose of clinical supervision apart from the traditional one (inspection), rather they see supervision as the evaluation of teachers' classroom instruction there by to judge their teaching behavior.

One interviewee said that even if they accepted the given feed backs from supervisors, many teachers dis- satisfied with it since they had no interest to be supervised. He spelled as *acceptance without interest*. He also added that "... teachers of their school consider class-observation as evaluation of their practical competence rather than supporting tool. Furthermore, some teachers of their school have not interest to accept their weakness and improve as much as possible. Consequently, their school supervisors sometimes challenge to observe teachers in the classroom as they fear to justify once weakness sides". Based on these facts it can be conclude that many teachers have no interest to be supervise in the secondary schools under the area of the study.

The items in each of the categories were aggregated (as measuring the same thing) based on the results of inter-item correlation and factor analysis of data. Then, a one-way ANOVA was conducted in order to examine the differences in perceptions of the teachers across the ten secondary schools of Jimma Zone (see Table 16 below).

**Table 16:** One-way ANOVA on the teachers’ perception differences among schools on the major challenges hindering the current practices of clinical supervisory service.

|                | Sum of Squares | df  | Mean Square | F    | Sig. |
|----------------|----------------|-----|-------------|------|------|
| Between Groups | 1.811          | 9   | .201        | .825 | .595 |
| Within Groups  | 31.238         | 128 | .244        |      |      |
| Total          | 33.049         | 137 |             |      |      |

As showed in Table 16,there is no a significant difference in perceptions of teachers among schools on the major challenges hindering the practices of clinical supervision as their mean test observed indicate that p-value is greater than 0.05 for the variables. This implies the majorities of teachers respondents ensured that there were challenges facing the current practices of clinical supervision in the schools of the study.

### **The Results of Observation**

This tool was used in order to cross-check the responses of respondents so that to integrate the results with those gained through the rest three instruments (questionnaires, interview and document analysis). Accordingly, five schools of the sampled schools including Atnago, Koma, Yebu, Aba Buna & Serbo secondary school were observed. The observations of this study were the activity of Clinical supervisors during class-observation: Whether or not supervisors use their idle time in class-room, check lesson plan. record or collect relevant information during observation, follow up both students’ behavior and teachers’ teaching behavior, facing challenges, mutual understanding on observed tasks and other points that indicate the analysis of events and discussion among teachers and supervisors on the alternatives provided as well as the plan to the next conference. Accordingly, nine sections were observed based on above mentioned tasks and the results revealed that many supervisors spend insufficient time in class-room due to a limited number of supervisors to supervise all teachers with in a given time of the session. Another word, the results indicated that supervisors check lesson plan

related to actual practices and also follow up both teachers' and students' behavior in the class-room and at the same time, they were noting down the information even though none of them used tape-recorder. Similarly, the results of observation conformed that supervisors did not devote time to analyze and interpret the observed events to provide alternatives. According to Glickman (2010), to increase the success of supervisory cycle, it is important to take time to analysis the observation and to think about the conference that is to follow. The supervisors reconstruct the observed events, incidents patterns of behavior and critical incidents that developed. The result showed that the feedback is given in written form merely by filling observation checklist formats and signed by supervisee and observer then filed. In addition, there is no oral discussion among supervisors and teachers on the alternative provided. Consequently, there is a limited mutual understanding of teachers and supervisors. From this, it could be possible to conclude that there is no post-conference conducted after observation and unfortunately, there is no discussed and decided plan to the next conference. In line with this, Abeya (2009) stated that post-conference is a time for the supervisor to provide feedback to the teacher about the observation, for supervisor and for supervisee a time to formulate strategies jointly for dealing with problems; to raise issues of concern, to offer specific help if appropriate, to explore the rewarding and satisfying aspects of the teacher's performance and to plan for next observation. Adding to this, Glickman (2010) depicted that the post conference is held to discuss the analysis of the observation and finally to produce a plan for instructional improvement. After reflection back to teacher what was seen, the supervisor can follow the chosen approach-directive controlling, directive in formational, collaborative or non-directive (Glickman et al., 2010).

### **The Result of Document Analysis**

The documents analyzed in this study were supervision checklist; written feedback for schools after the supervision visit and reports, plans of classroom visits, signed job description, supervision guideline and other if any recorded documents pertinent to supervisory services. Accordingly, the schools were interrogated if they have a document of supervision which reveal about what and how the schools have been working the supervisory practices at school level. Accordingly, the documents were analyzed based on the above major points and the results revealed that school have checklists based on which they visit classrooms if not standardized. i.e. the same observation checklist is prepared for teachers of different qualification, experience and practical competence. Similarly, the finding of the study disclosed that there were no organized and compiled written feedbacks for schools indicating the

strength and weakness of teachers and suggestion for further improvements nor the supervisors themselves did not give teachers written feedback. What they considered as feedback uniformly in the schools of study area is what supervisors merely filled in observation checklist formats during observation that was not analyzed and interpreted.

Furthermore, the result revealed that there were no plans of classroom supervision discussed and decided with teachers and the supervisors' observation session plan was disconnected with of the previous one. Regarding supervision guideline, the data indicated that some schools have supervision guidelines whereas others did not have them. Hence, the data from document analysis showed that there were no documents that indicate the effective performances of supervisory services in the schools in general and particularly, there were no standardize guidelines that indicate clinical Supervisory practices and procedures in the schools under the study area. From this, it is possible to conclude that supervisory practices were not given due attention as a quality monitoring device in secondary schools of the Jimma Zone.

## **CHAPTER FIVE: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS**

This chapter details the summary of the major findings, conclusions and recommendations that are assumed to be useful not only to show the status of the practices of clinical supervision, but also to alleviate the challenges that school supervision is facing currently in secondary schools of the Jimma Zone of Oromia Regional State.

### **5.1. Summary of the Major Findings**

This chapter is dedicated to the discussion of the study findings. It begins with a brief overview of the study and then summarizes the results. The main purpose of this study was to assess the practices and challenges of clinical Supervision currently facing supervisors in practicing school supervision in secondary schools of the Jimma Zone. In order to achieve the purpose, the following basic research questions were raised:

1. To what extent do teachers understand about the roles of clinical supervision services in government secondary schools of Jimma Zone?
2. To what extent do Supervisors employ the procedures of clinical Supervision in secondary schools of Jimma Zone?
3. To what extent is clinical supervision service contributing to teachers' professional development in the schools of the study?
4. What are the major challenges that school supervision is facing currently in implementing of clinical supervision activities?

In order to address the basic questions, relevant and related literatures were reviewed. To this end, the study was conducted in ten government secondary schools by using the area (cluster) sampling. Accordingly, 138 teachers, 60 school supervisors (internals), 10 principals and 7 high school supervisors (externals) were selected as respondents through simple random and purposive sampling techniques respectively. The study employed both primary and secondary data sources. Furthermore, both quantitative and qualitative data gathering tools were used. Hence, for quantitative data



collection, sets of questionnaires (both open and close-ended) were prepared while observation, interview and document analysis were used to gather qualitative data. The questionnaires were piloted and revised before the actual administration.

The data obtained from the respondents were analyzed, and interpreted by using statistical tools such as frequency, percentage, Chi-square and ANOVA. All differences were tested for statistical significance at the 0.05 alpha levels. Hence, based on the review of literature and analysis of the data, the major findings of the study are summarized as follows:

### **1. Teachers understanding towards the roles of clinical supervision**

Regarding the awareness of teachers towards the roles of clinical Supervision, the majorities of teachers and supervisors respondents confirmed that teachers were not well aware. Accordingly, about 64% teachers and 47% supervisors' response revealed that teachers were not well oriented about the activities, the significant, purpose and objectives of clinical Supervision in the schools under the study area. Furthermore, the interviews of school principals indicated that teachers were not considered clinical Supervision contributes for their professional development and enabled them to use variety of teaching techniques that return to increase the improvement of learners' learning.

### **2. The utilization of the procedures of clinical supervision**

Regarding the utilization of the procedures of clinical supervision, the majorities of teacher and supervisor respondents including the interviews of school principals indicated that pre-classroom observation conferences were rarely planned. In addition, as far as the activities during the actual classroom supervision is concerned, about 58% teachers and 41% supervisor respondents revealed that supervisors were not effective in planning classroom observation, visiting classroom instruction regularly and spending sufficient time in the classroom to have detailed information about the instructional process being underway. Furthermore, the observation of five schools indicated that supervisors were not spent enough time in the classroom so that to collect detailed information behalf of class-room events. Concerning the utilization of the procedures of clinical supervision after the actual classroom supervision, as respondents revealed, teachers were not given immediate feedback, no discussion concerning class-observation events and on provided alternatives, no productive suggestion and no adequate post-observation conferences.

### **3. The Professional Development of Teachers.**

Concerning about the professional development of teachers, respondents also gave their views. To this effect, about 55% teachers and 43% supervisors showed that supervisors were not efficient in arranging short term training in the form of workshops and symposia, in creating the opportunity of team planning for teachers, and in establishing a culture of professional and collegial interactions among teachers. The results of the interview with principals, secondary school supervisors and open-ended questions indicated that training was rarely organized at school level for the purpose of enhancing teachers' professional development. Consequently, problems with regard to teachers' professional growth were remained.

### **4. The challenges that school supervision is facing currently.**

With regard to the challenges hindering the implementation of clinical supervision in secondary schools of Jimma Zone, the majority (about 60%) teachers and about 53% supervisors) asserted that lack of regular classroom supervision, supervisors were not spending sufficient time in the classroom during the actual classroom observation, lack of necessary supervisory skills and administrative works were given priorities than pedagogic activities. Not only this but also, the finding of the study revealed issues such as shortage of in-service training for supervisors, shortage of budget and lack of strong inbuilt supervision to provide immediate support for teachers were among the major challenges.

The finding from the interview with school principals, secondary school supervisors and the open-ended question items disclosed that teachers' lack of interest to be supervised because some teachers were more experienced than supervisors; some teachers were academically not effective in teaching and so, they fear to make mistakes. On top of that, the fact that supervisors were taken from the teaching staff and teachers considered as no change is resulted if they would supervise them as supervisors have no separate training in the area of supervision than the teachers. The result also indicated that clinical Supervisors were lacked interest to supervise and support teachers since they had not incentives and other facilities for their additional responsibility. Hence less value has given for clinical supervision services in the schools. Furthermore, supervision was seen as a mere evaluation since supervisors lacked consistence to assist teachers in classroom instruction.

The data from the document analysis indicated that some schools had no supervision guideline and, hence, they have fallen into role confusion. In addition, there were no written feedback to the teachers and schools about classroom observation by supervisors and nor an agreed up on plan of clinical supervision. On the other hand, schools have checklist prepared at school level mostly based on immediate works rather than as per of teachers' abstraction. As a result, all schools under the study area have their own observation checklist even if in the same woreda. From this view point, one could conclude that lack of standardized checklists was also one of the major challenges to practice clinical Supervision in the schools of Jimma Zone.

## **5.2. Conclusions.**

Clinical Supervision practice is important in enabling instructional supervisors to support and monitor teachers' instructional work, improving the quality of teachers and teaching, and facilitating students' academic performance. Accordingly, based on the major findings of the study, the following conclusions are made:

- ❖ As shown in the literature review, the primary objective of clinical supervisory practices in the school is to provide teachers direct assistance to improve their performance toward the goal of increasing the improvement of student learning. This requires supervisors to link interpersonal skills with technical skills so that clinical supervisory practices will have the desired effects. However, the findings of the study indicated that supervisors did not consider clinical supervisory practices as a potential benefit to instructional improvement; supervisors did not work closely with teachers and were not discussing on their concerns to help them in any way possible. Hence, the practices of clinical supervision were not properly implemented in the schools under the study.
- ❖ The focus of clinical supervisory practices is a face-to-face interaction between teachers and supervisors with the intent to improve instruction and increase professional growth of teachers. Hence, supervisors are expected to conduct continuous classroom observation to see how students are actually learning. But, the findings of the study showed that pre-classroom observation and post observation conferences were rarely held in the schools. Thus, school supervisors were incapable to utilize the procedures and strategies of clinical supervision. Furthermore, the finding of the study disclosed that supervisors had neither visited classrooms

on a regular basis nor spent sufficient time during the actual classroom supervision. As a result, school supervision failed in improving the teaching-learning process and teachers' profession in the area under the study.

- ❖ The main purpose of supervisor is working to establish a culture that values professional development through short term training in the form of workshops, conferences, and symposia, collegial interactions among teachers through team planning, sharing, evaluation, and learning to create methods for peer review. However, as shown by the findings of the study, supervisors had not efficiently planned in-service training in the form of workshops and symposia, creating the opportunity of team planning for teachers, and establishing a culture of professional interaction among teachers to develop their skills. In addition, the findings of the study depicted that supervisors did not devote themselves in coordinating department heads to make interdepartmental experience sharing, in organizing training programs at the school level, in encouraging teachers to conduct action research in the schools and in organizing model-teaching programs for new teachers. Therefore, it is possible to conclude that school supervisors were not aware of their responsibilities and, hence, failed to adequately implement them in secondary schools of the Jimma Zone.
  
- ❖ As a result of the study shown, the practices of clinical Supervision were hindered by many factors out of which the major ones were lack of regular classroom supervision, supervisors 'not taking sufficient time in the classroom during observation, lack of necessary supervisory skills on the side of supervisors and administrative works were given priorities than pedagogic activities. Besides, the finding of the study indicated that supervisors were seldom provided with in-service training, and shortage of budget and lack of strong inbuilt supervision to provide immediate support. Consequently, school supervision had contributed less to the effectiveness of the teaching - learning process in the area under the study.

### 5.3. Recommendations

Based on the findings and conclusions of the study, the following recommendations are forwarded in order to improve the practices of clinical supervision in secondary schools of the Jimma Zone:

- In clinical Supervision, it is a necessary condition that supervisors and teachers understand and accept the roles for which each is responsible and also to take positive roles, teachers should understand the purposes, objectives and significant of clinical Supervision before interacting the supervisory process. However, the finding indicated that many teachers were not oriented and aware about the roles of clinical Supervision. For this reason, it is better if supervisors orient and aware teachers behalf of the roles, purposes, objectives and significant of clinical Supervision before the actual observation so as to increase their interest to be supervised.
- Clinical Supervision is effective if supervisors possess all structural procedures (pre-observation conference, class-observation, analysis & interpretation of observation events, post-observation conference, and supervisory conference) respectively, frequently and adequately and display qualities and characteristics related to knowledge, interpersonal and technical skills. To this end, supervisors ought to provide time and opportunities for teachers to collaborate with one another so as to improve their instructional strategies and skills and should devote most of their time on assisting teachers to make them independent professionals. However, the finding of the study revealed that school supervisors were incapable to utilize the procedures and strategies of clinical supervision. Subsequently, supervision services failed to improve teaching-learning process in secondary schools of the Jimma Zone. Therefore, it is better if school supervisors follow prescribed, formal processes of clinical supervision and strategies that help supervisors to collaborate with teachers and plan programs, procedures and strategies to improve classroom instruction. In addition, it is recommended that the Zonal education department should render support about the ways the procedures of clinical supervision are practiced and follow up and monitor to ensure their implementation at the school level.
- The goal of clinical supervision is to enable teachers to be self-directed and encourage independent decision making on supervisory techniques. Accordingly, supervisors are expected to make teachers professionally competent through different strategies of instructional

supervision like mentoring, collegial supervision and in-service trainings in the form of workshops, symposium and conferences. But as shown by the findings of the study, supervisors were not efficient in planning in-service training in the form of workshops, symposia and conferences, and were not establishing a culture of professional interaction to develop their skills. Hence, clinical supervision services were not successful in contributing to the professional development of teachers. For this reason, it is advisable if school supervisors (both internal and external supervisors) match appropriate clinical supervisory strategies to teachers' unique characteristics and their levels of developmental needs. Furthermore, ZED and supervisors from WEO and school-based supervisors should arrange in-service training in the form of workshops, conferences, and symposia as a form of teachers' professional development. In addition, it is better if school supervisors work in collaboration with teachers and become open to discussion to assist them.

- The central objective of the entire clinical process is the developments of a professionally responsible teacher who can analyze his/her own performance. Consequently, supervisors need to conduct continuous classroom observation to provide teachers with expert direct assistance with the view of improving instruction.
- As the teaching learning process is a day-to-day and continuous process, the practices of Clinical supervision at the school level should also be the continuous responsibilities of supervisors so as to improve teachers' professional development and successful student learning. However, the finding of the study revealed that school supervisors were not aware of their supervisory responsibilities in the school and hence, they failed to adequately implement in secondary schools of the Jimma Zone. Therefore, it is recommended for supervisors from WEO to follow up and monitor schools to maintain the quality of instruction in the school, conducting periodic planned visits to schools to render support at the spot and arranging seminars, workshops and conferences for teachers and school-based supervisors.
- The study revealed that the effectiveness of school supervisory practices in the Jimma Zone is hindered by many factors. Therefore, to alleviate these problems the following recommendations are worthwhile.

- It is advisable for clinical supervisors to visit classrooms on a regular basis and when they do so, they should spend sufficient time in the classroom so as to have sufficient information about teachers' classroom behavior and provide productive comments accordingly.
- The finding of the study indicated that Instructional supervisors were lacked adequate professional training on how to conduct clinical Supervision. Therefore, woreda education offices in collaboration with the zonal education department and NGO are recommended to organize short term refreshment training and in-service training in the form of workshop, symposium and disseminating best practices to clinical supervisors. Besides, woreda education office supervisors should focus on the pedagogical activities than administrative duties and school-based supervisors are recommended to be free of teaching loads so as to focus on their primary responsibilities (supervision of instruction).
- As the study revealed, there is scarcity of supervision guide lines and as a result there is no standardized observation checklists as per of teachers' work experience, qualification and practical competence. Consequently, standardized checklists and guidelines are better to be prepared by OREB by supervision professionals and guidelines need to be contextualized as per as the teachers' work experience, qualification and practical competence (as per as teachers' abstraction).
- The finding of the study also disclosed that there is shortage of budget to run supervisory services adequately. Therefore, it is better if WEO together with NGO allocate enough budgets; facilitate transportation, incentives for the effectiveness of school supervision. Furthermore, lack of strong inbuilt supervision was found to be one of the challenges that supervision services faced. Hence, the woreda education offices and the zonal education department should work closely with clinical supervisors.

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## **APPENDIX-A**

### **JIMMA UNIVERSITY**

#### **COLLEGE OF EDUCATION AND BEHAVIORAL SCIENCE**

##### **DEPARTMENT OF EDUCATIONAL PLANNING AND MANAGEMENT**

###### **Questionnaire to be filled by teachers**

Dear Respondent,

The purpose of this questionnaire is to collect data on the role of supervisors in implementing Clinical supervision in Secondary Schools of Jimma Zone. Your responses are crucial for the successful accomplishment of this study. Therefore, you are kindly requested to read all the Questions and fill with genuine responses. Please, feel free to indicate your opinion because no response is treated as wrong. Be sure that your responses will not be used for other purpose except for academic purpose and remain confidential.

Thank you for your cooperation!

Instruction:

1. No need of writing name on the questionnaire;
2. Read all the instructions before you answer the questions;
3. There is no need to consult others to fill the questionnaires;
4. Please, provide appropriate response by using a tick mark “√” to choose one of the given likert scales and kindly write your opinion briefly for the short answer questions on the space provided.
5. Clinical supervisors for purpose of this study include secondary school supervisors, school-based Supervisor, principals, and vice principals, who are responsible to closely support and advise teachers
6. Please, do not leave the questions unanswered.

**Section One: General Information**

Please insert tick mark (√) to the appropriate category for you.

Sex: Male Female

Age: Up to 30 31-40  41-49  50 and above

Qualification: Diploma  First degree  Second degree

Current position: Teacher  Senior teacher  Unit leader  Department head

Work experience: 1-6  7-12  13-16  17 and above

**Section Two: Questionnaire**

**Part 1: Teachers’ Understanding about Clinical Supervision.**

The following questions are prepared to make sure that to what extent teachers understand about Clinical Supervision.

Please insert tick mark (√) to show your response from the given likert scales.

Key: 1=Strongly Disagree (SD), 2=Disagree (D), 3=Undecided (UN) 4= Agree (A)

5=Strongly Agree (SA)

| No | Items   | Scales            |            |           |       |                |
|----|---|-------------------|------------|-----------|-------|----------------|
|    |   | Strongly Disagree | Dis- agree | Undecided | Agree | Strongly agree |
| 1  | I am well oriented about the activities of Clinical supervision.                        |                   |            |           |       |                |
| 2  | I am well aware of the significance of Clinical supervision                             |                   |            |           |       |                |
| 3  | Clinical supervision contributed for my professional development.                       |                   |            |           |       |                |
| 4  | Classroom observation has enabled me to use variety of teaching techniques.             |                   |            |           |       |                |
| 5  | I believe Clinical supervision helps to increase the improvement of students’ learning. |                   |            |           |       |                |

**Part 2: Procedures of clinical supervision**

Clinical supervision is a face-to-face interaction between teacher and supervisor with the intent to improve instruction and increase professional growth of teachers. Therefore, in order to make sure that to what extent supervisors follow the right procedure as per their responsibilities, the following questions have been raised

Please insert tick mark (√) to show your response from the given likert scales.

| No.                                 | Items  | Scales             |           |           |       |                |
|-------------------------------------|--|--------------------|-----------|-----------|-------|----------------|
|                                     |  | Strongly dis agree | Dis agree | Undecided | Agree | Strongly agree |
| <b>Pre-classroom observation</b>    |  |                    |           |           |       |                |
| 1                                   | Supervisors inform you of the classroom observation beforehand.  |                    |           |           |       |                |
| 2                                   | Supervisors make mutual agreement on the plan of lesson to be observed with teachers.                            |                    |           |           |       |                |
| 3                                   | Supervisors communicate the purpose of supervision clearly   |                    |           |           |       |                |
| 4                                   | Supervisors decide suitable time for classroom visit with their teachers.  |                    |           |           |       |                |
| <b>During Classroom Observation</b> |  |                    |           |           |       |                |
| 1                                   | Supervisors conduct planned Classroom observation.   |                    |           |           |       |                |
| 2                                   | Supervisors frequently visit classrooms to provide support to teachers.  |                    |           |           |       |                |
| 3                                   | Supervisors spend sufficient time in the classroom during observation.   |                    |           |           |       |                |
| 4                                   | Supervisors collect relevant data during classroom observation.  |                    |           |           |       |                |
| <b>After Classroom Observation</b>  |  |                    |           |           |       |                |
| 1                                   | Supervisors communicate immediate feedback to teachers after class-room observation                              |                    |           |           |       |                |
| 2                                   | Supervisors provide suggestion to teachers to encourage their creativity   |                    |           |           |       |                |
| 3                                   | Supervisors always held post- observation conference for discussion about the things observed in the classroom   |                    |           |           |       |                |
| 4                                   | Supervisors and teachers discuss on the data collected in the classroom to improve teachers' classroom behaviors |                    |           |           |       |                |

**Part 3: Professional Development of Teachers**

This is to confirm that whether school supervisors provide teachers with in-service training in the form of workshops, conferences, and symposia to equip them with expertise as a form of professional development. Based on this idea, the following questions are raised.

Please insert tick mark (√) to show your response from the given likert scales.

| No | Items   | Scales            |          |           |       |                |
|----|---|-------------------|----------|-----------|-------|----------------|
|    |   | Strongly disagree | Disagree | Undecided | Agree | Strongly agree |
| 1  | Supervisors provide teachers with in-service training program                           |                   |          |           |       |                |
| 2  | Supervisors provide teachers to attend workshops  |                   |          |           |       |                |
| 3  | Supervisors encourage team planning to create methods for peer review of your practices |                   |          |           |       |                |
| 4  | Supervisors prepare symposia for teachers to improve instruction                        |                   |          |           |       |                |
| 5  | Supervisors establish a culture of professional interactions among teachers             |                   |          |           |       |                |

6. Mention if there is another contributions Supervisors provide you for your professional Development.

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#### Part 4: The major Challenges of Clinical supervision

Please insert tick mark (√) to show your response from the given likert scales.

| No. | Items  | Scale             |          |           |       |                |
|-----|--|-------------------|----------|-----------|-------|----------------|
|     |  | Strongly disagree | Disagree | Undecided | Agree | Strongly agree |
| 1   | Lack of regular classroom visit  |                   |          |           |       |                |
| 2   | Supervisors do not spend sufficient time in the classroom to observe instruction                 |                   |          |           |       |                |
| 3   | Lack of necessary supervisory skills on the part of supervision                                  |                   |          |           |       |                |
| 4   | Administrative work is given priority than pedagogic practices                                   |                   |          |           |       |                |
| 5   | Supervisors are authoritarian, fault finding, biased and subjective during classroom observation |                   |          |           |       |                |
| 6   | Supervisors are seldom provided with pre-service or in-service training                          |                   |          |           |       |                |
| 7   | There is lack of relevant supervision manual in the school.                                      |                   |          |           |       |                |
| 8   | Lack of strong in built supervision to provide immediate support.                                |                   |          |           |       |                |
| 9   | Shortage of budgets to run supervisory activities effectively.                                   |                   |          |           |       |                |
| 10  | Teachers' lack of interest to be supervised.   |                   |          |           |       |                |



**Open-ended Questions**

11. Briefly describe another challenges that Clinical supervision facing currently.

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12. In What ways do you think that Clinical supervision could be improved in this school?

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Thank you for completing this survey questionnaire. Your participation is very much appreciated.

## **APPENDIX- B**

### **JIMMA UNIVERSITY**

#### **COLLEGE OF EDUCATION AND BEHAVIORAL SCIENCE**

#### **DEPARTMENT OF EDUCATIONAL PLANNING AND MANAGEMENT**

**Questionnaire to be filled by school -based supervisors (department heads, unit leaders & senior teachers).**

Dear Respondents,

The purpose of this questionnaire is to collect data on the role of supervisors in implementing Clinical supervision in Secondary Schools of Jimma Zone. Your responses are crucial for the successful accomplishment of this study. Therefore, you are kindly requested to read all the Questions and fill with genuine responses. Please, feel free to indicate your opinion because no response is treated as wrong. Be sure that your responses will not be used for any other purposes except for academic purpose and remain confidential.

Thank you for your cooperation!

#### **Instruction:**

1. Do not write your name on the questionnaire;
2. Read all the instructions before you answer the questions;
3. There is no need to consult others to fill the questionnaires;
4. Please, provide appropriate response by using a tick mark (✓) to choose one of the given likert scales. But kindly write your opinion briefly for the short answer questions

On the space provided.

5. Please, do not leave the questions unanswered

#### **Section One: General Information**

Please insert tick mark (✓) in the appropriate category for you.

Sex: Male  Female

Age: Up to 29  30-39  40-49  50 and above

Qualification: Diploma  First degree  Second degree

Current position: Teacher  Senior teacher  Unit leader  Department head

Work experience: 3-6  7-12  13-16  17 and above

## Section Two: Questionnaire

### Part 1: Teachers' Understanding about Clinical Supervision.

The following questions are prepared to make sure that to what extent teachers understand about Clinical Supervision.

Please insert tick mark (✓) to show your response from the given likert scales.

Key: 1=Strongly Disagree (SD), 2=Disagree (D), 3=Undecided (UN), 4= Agree (A),

5=Strongly Agree (SA)

| No | Items   | Scales            |          |           |       |                |
|----|---|-------------------|----------|-----------|-------|----------------|
|    |   | Strongly disagree | Disagree | Undecided | Agree | Strongly agree |
| 1  | Teachers are well oriented about the activities of clinical supervision.                                    |                   |          |           |       |                |
| 2  | Teachers are well aware of the significance of clinical supervision.  |                   |          |           |       |                |
| 3  | Teachers consider that Clinical supervision contributed for their professional development.                 |                   |          |           |       |                |
| 4  | Teachers in our school believe that Clinical Supervision enable them to use variety of teaching techniques. |                   |          |           |       |                |
| 5  | Teachers believe that Clinical supervision helps them to increase the improvement of students' learning.    |                   |          |           |       |                |

## Part 2: Procedures of clinical/classroom supervision

Clinical supervision is a face-to-face interaction between teacher and supervisor with the intent to improve instruction and increase professional growth of teachers. Therefore, in order to make sure that to what extent supervisors follow the right procedure as per their res possibilities, the following questions have been raised.

Please insert tick mark (√) to show your response from the given likert scale

Key: 1=Strongly Disagree (SD), 2=Disagree (D), 3=Undecided (UN), 4= Agree (A),

5=Strongly Agree (S)

| No.                                 | Items  | Scales            |          |           |       |                |
|-------------------------------------|--|-------------------|----------|-----------|-------|----------------|
|                                     |  | Strongly disagree | Disagree | Undecided | Agree | Strongly Agree |
| <b>Pre-classroom observation</b>    |  |                   |          |           |       |                |
| 1                                   | Teachers are informed of the classroom observation beforehand  |                   |          |           |       |                |
| 2                                   | Teachers mutually plan lesson observation with their supervisors                                       |                   |          |           |       |                |
| 3                                   | Teachers are well communicated about the purpose of classroom observation                              |                   |          |           |       |                |
| 4                                   | Teachers decide on suitable time for classroom visit with their supervisors                            |                   |          |           |       |                |
| <b>During Classroom Observation</b> |  |                   |          |           |       |                |
| 1                                   | I conduct a planned Classroom observation  |                   |          |           |       |                |
| 2                                   | I frequently visit classrooms to provide support to teachers   |                   |          |           |       |                |
| 3                                   | I spend sufficient time in the classroom to observe instruction  |                   |          |           |       |                |
| 4                                   | I collect relevant data during classroom observation   |                   |          |           |       |                |
| <b>After Classroom Observation</b>  |  |                   |          |           |       |                |
| 1                                   | I immediately communicate feedback to teachers after classroom observation                             |                   |          |           |       |                |
| 2                                   | I provide constructive comments to teachers to encourage their creativity                              |                   |          |           |       |                |
| 3                                   | I always held Post- conference for discussion after classroom observation                              |                   |          |           |       |                |
| 4                                   | teachers and I discuss on the data collected in the classroom to improve teachers' classroom behaviors |                   |          |           |       |                |

**Part 3: Professional Development of Teachers**

This is to confirm that whether school supervisors provide teachers with on-job training in the form of workshops, conferences, and symposia to equip them with expertise as a form of professional development. Based on this idea, the following questions are raised.

Key: 1=Strongly Disagree (SD), 2=Disagree (D), 3=Undecided (UN), 4= Agree (A),  
5=Strongly Agree (SA)

| No. | Items  | Strongly agree | Disagree | Undecided | Agree | Strongly Agree |
|-----|--|----------------|----------|-----------|-------|----------------|
| 1   | I provide teachers with on-job training program                                    |                |          |           |       |                |
| 2   | I encourage teachers to attend workshops to alleviate instructional problems       |                |          |           |       |                |
| 3   | I encourage team planning to create methods for peer review of teachers' practices |                |          |           |       |                |
| 4   | I prepare symposia for teachers to improve their skills                            |                |          |           |       |                |
| 5   | I establish a culture of professional interactions among teachers                  |                |          |           |       |                |

6, Explain if there is another ways of your contribution(s)

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#### Part 4: The major Challenges to Clinical supervision

Key: 1=Strongly Disagree (SD), 2=Disagree (D), 3=Undecided (UN), 4= Agree (A),

5=Strongly Agree (SA)

| No. | Items  | Scales            |          |           |       |                |
|-----|--|-------------------|----------|-----------|-------|----------------|
|     |  | Strongly disagree | Disagree | Undecided | Agree | Strongly Agree |
| 1   | Lack of regular classroom visit.   |                   |          |           |       |                |
| 2   | Supervisors do not spend sufficient time in the classroom to observe instruction.                                |                   |          |           |       |                |
| 3   | Lack of necessary supervisory skills on the part of supervisors.   |                   |          |           |       |                |
| 4   | Routine activities are given priority than pedagogic practices.  |                   |          |           |       |                |
| 5   | Supervisors are authoritarian, fault finding, biased and subjective during classroom observation and evaluation. |                   |          |           |       |                |
| 6   | Supervisors are seldom provided with in-service training.  |                   |          |           |       |                |
| 7   | There is lack of relevant supervision manual in the school.  |                   |          |           |       |                |
| 8   | Lack of strong in built supervision to provide immediate support   |                   |          |           |       |                |
| 9   | Shortage of budgets to run supervisory activities effectively  |                   |          |           |       |                |
| 10  | Teachers' lack of interest to be supervised  |                   |          |           |       |                |

**Open-ended Questions**

11. Briefly describe the challenges you face in class-room supervision.

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12. In What ways do you think that Clinical supervision could be improved in this school?

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Thank you for completing this survey questionnaire; your participation is very much appreciable!

**APPENDIX-C**

**JIMMA UNIVERSITY**

**COLLEGE OF EDUCATION AND BEHAVIORAL SCIENCE**

**DEPARTMENT OF EDUCATIONAL PLANNING AND MANAGEMENT**

**Interview Schedule for School Principals & vice principals**

Dear participant,

The purpose of this questionnaire is to collect data on the practices and challenges of Clinical supervision in Secondary Schools of Jimma Zone. Your responses are crucial for the successful accomplishment of this study. Therefore, your sincerity in responding to the questions is of great importance, and your responses to the interview would be kept confidential.

Thank you in advance for your cooperation!

**Part I:General information**

School \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Service year \_\_\_\_\_

Qualification: \_\_\_\_\_ Subject: Major \_\_\_\_\_ Minor \_\_\_\_\_

Part II: Give your response to the following questions briefly.

1. Is there any policy document or guidelines (manuals) on Clinical supervision available to you?
2. Can you please tell me how often you supervise instruction in this school?
3. What form of preparation is provided to teachers in the school for their teaching performance?  
(In-Service training, Conferences and experience sharing)
4. Do you supervise all teachers in the same manner? How do you do it? Do teachers interested in class-room supervision? Do they accept all of your comments and suggest?
5. What challenges do you face in employ of Clinical supervision of instructions in your School?
6. How do you think that Clinical supervision would be improved?



**APPENDIX- D**

**JIMMA UNIVERSITY**

**COLLEGE OF EDUCATION AND BEHAVIORAL SCIENCE**

**DEPARTMENT OF EDUCATIONAL PLANNING AND MANAGEMENT**

**Interview Schedule for Woreda Education Office Supervision Coordinators**

Dear participant,

The purpose of this interview is to collect data on the practices and challenges of Clinical supervision in Secondary Schools of Jimma Zone. Your responses are crucial for the successful accomplishment of this study. Therefore, your sincerity in responding to the questions is of great importance, and your responses to the interview would be kept confidential.

Thank you in advance for your cooperation!

**Part I: General information**

School \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Service year \_\_\_\_\_

Qualification: \_\_\_\_\_

Specialization: Major \_\_\_\_\_ Minor \_\_\_\_\_

Part II: Give your response to the following questions briefly.

1. What is your opinion regarding the practice of Clinical supervision in secondary schools of your Woreda?
2. How often the WEO supervises each secondary school?
3. What form of preparation is provided to Clinical supervisors at the Woreda level for their professional growth? (In-Service Training, conferences, scaling up, workshops and symposia)
4. What are the major challenges that school supervision is facing currently to practice Clinical Supervision?
5. What should be done to solve the challenges of Clinical supervision?

**APPENDIX-E**

**JIMMA UNIVERSITY**

**COLLEGE OF EDUCATION AND BEHAVIORAL SCIENCE**

**DEPARTMENT OF EDUCATIONAL PLANNING AND MANAGEMENT**

**Observation Checklist**

| <u>No.</u> | Items  | Yes | No | Comments |
|------------|--|-----|----|----------|
| 1          | Supervisors spend sufficient time in the class-room.                       |     |    |          |
| 2          | Supervisors cross check necessary files related with actual practicing.    |     |    |          |
| 3          | Supervisors record or collect information during observation.              |     |    |          |
| 4          | Supervisors following up students' behavior & teachers' teaching behavior. |     |    |          |
| 5          | Supervisors analyze the observed events                                    |     |    |          |
| 6          | Supervisors suggest on teachers' teaching practice.                        |     |    |          |
| 7          | Supervisors give constructive feedback immediately to teachers.            |     |    |          |
| 8          | Supervisors discuss with teachers on the alternatives provided             |     |    |          |
| 9          | Mutual understanding of teachers & supervisors.                            |     |    |          |
| 10         | Challenges encountering supervisors during observation.                    |     |    |          |
| 11         | Plan to the next conference.   |     |    |          |

**APPENDIX-F**  
**JIMMA UNIVERSITY**  
**COLLEGE OF EDUCATION AND BEHAVIORAL SCIENCE**  
**DEPARTMENT OF EDUCATIONAL PLANNING AND MANAGEMENT**

**Document Analysis Guide**

- 1, what kinds of document are there within supervisor office?
- 2, Does the document reveals the Supervisor's mood (does it convey anger, happiness, regret, surprise ?)
- 3, Does the document provide any clues about the relationship between the Supervisor & supervisee?
- 4, does the document contain:
  - A, the Supervision contract signed by both Supervisor & Supervisee?
  - B, supervision session case notes, and formative & summative evaluation of the supervisee?
  - C, checklists, standard formats, reports, feedbacks & schedules related to Clinical Supervision and other Supervisory practices in each sample school?
- 5, How do the documents related to Supervision sessions so that they protect the privacy & Confidentiality of the Supervisee (eg. In a locked file cabinet or on a secure server) and are Separate from any clients.