

Poor prescription for a healthy body

THERE HAS been a veritable pot pourri of changes in education over the past couple of months, adding to the mélange that had already begun to take effect from last summer. They all tend in the direction both of trying to expand education provision and access to further and higher levels and yet at the same time change the form of the education system, making people more responsible for what is provided. For instance, parents and teachers are to demand different schemes of education, find their own resources or funding for their particular interests in education. This is true not only of higher education but also of schools and further education.

One aspect of the transformations in higher education which has been part of the changes in funding mechanisms is that the Polytechnics and Colleges Funding Council and Universities Funding Council are soon to become one body. In the transition the PCFC had additional public funds for research to disburse to higher education institutions on the criteria of either centres of excellence or for pump-priming activities. A felicitous outcome for my own institution was that our bid for four research centres of excellence was almost wholly successful. So we are now busy trying to build up our research profile. From my point of view as a social scientist, this entails developing our skills and expertise in the broad area of public



MIRIAM DAVID

policy evaluations, including those of giving consideration to policy developments in education.

In one respect, of course, the loud fanfares over the report of the "three wise men" and earlier over Christmas break seemed to be more about changes in respect of schools rather than further or higher education. This is probably despite the fact that the Education (Schools) Bill is a rather short and brief document as compared to the Further and Higher Education Bill.

The changes proposed now have in fact to do with both schools and higher education.

As a colleague commented at an editorial board meeting of the *British Journal of the Sociology of Education*, when we were speculating on the future shape of the whole education system, she was amazed that more was not made of this announcement from within higher education. What colleagues in departments of education will be doing in future is likely to be very different from their past activities, being placed more in an advisory and mentor role than in an educational or pedagogic role.

The whole situation with respect to the future of teacher training is now very much in the melting pot with changes already planned for postgraduate teacher education to become almost entirely school-based rather than based within higher education. Changes with respect to undergraduate teacher education in colleges will in all probability follow on from this basic plan. It is already clear that the amount of time to be spent by teachers in training based in school rather than college is to be greatly increased.

All of this may be a "good" thing for it may be the case that it is important that students get a greater sense of their future work in the classroom while in training than has been the case in the recent past. And by this I mean with school children

rather than fellow students.

However, all these changes seem to be rather ad hoc and not at all systematically thought through. On the one hand, there are proposals for more traditionally based classroom work in higher education as well as schools, for new types of student such as the police. On the other hand, there are similar changes in higher education to teacher training for other professional groups such as social workers and paramedics such as health visitors and nurses. For example, there have been some fascinating innovative schemes to accredit aspects of "on the job" social work in social service departments as if they were equivalent to traditional courses within the confines of higher education institutions. Here, too, social work teachers will become supervisors and mentors of the practitioner teachers rather than playing a more traditional didactic and pedagogical role.

Traditionally in higher education, aspects of professional education have used the actual "clientele" as a sort of laboratory for training. I think this is probably most true in the case of medical education, with medical schools being attached to teaching hospitals to provide the appropriate examples and evidence.

I remain to be convinced though that a return to what was essentially the Victorian system of pupil-teachers is quite the same as this form of medical training.

Clinical training in medical schools, as I understand it, does not form the lion's share of doctors' medical training and education. Nor are trainee doctors expected to spend the bulk of their time on one set of patients. I know that it is difficult to draw exact parallels between medical education and teacher education, but the advocates of these new schemes have drawn our attention to them so that it is important also to point to the differences. Given that doctors and social workers, among other professionals, tend to deal with one "client" or patient at a time redressing the balance in terms of social work education in favour of more of a medical model of training may in this instance be more apposite.

In any event, higher education has developed considerably since the early days of the creation of teacher training as well as medicine, law and social work. The whole conceptual apparatus of higher education now may be in need of some overhaul. I think it behoves us as academics to think carefully about what aspects of our current practice, from whatever professional or academic standpoint we are engaged to reconsider the balance between the practical and experiential and the rather more theoretical, analytical or discursive. This does not necessarily mean, however, altering the whole framework so that the balance tilts in entirely the opposite direction.