

NCTQ and the Flexner Report  
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The [National Council on Teacher Quality's "Review of the Nation's Teacher Preparation Programs"](#) was "inspired by a landmark study conducted more than a century ago, the Flexner Report of 1910." With all the attention to the NCTQ Review, and as programs in teacher education consider whether to participate in the coming year, it is important to note several differences between it and [the Flexner Report](#).

Abraham Flexner visited 155 medical schools and documented the wide range of their quality. Many programs were terrible, lacking labs or clinical experience, some lasting less than a year. There were strong programs; these had strong connections to schools arts and sciences that, Flexner wrote, "guaranteed certain standards and ideals" of scholarship. Problems arose in programs without this connection.

Flexner's report initiated wholesale reform, toward the now familiar structure of medical education, including four years of medical school follow by internship and residency. The NCTQ report is not likely to inspire analogous changes in teacher education, for several reasons.

One is a difference in societal context. In 1910, the US was progressing through what Paul Starr called a "social transformation of American medicine": What was once seen as mostly about common sense—anyone with basic intelligence and modest preparation could be a doctor—was starting to be highly-regarded as a profession. Flexner addressed a society ready to consider medicine intellectually demanding work.

Today, the US still sees teaching as mostly about common sense, something anyone with basic intelligence can do, with modest preparation. Almost all programs of teacher preparation take one year, and recent developments have been to eliminate even that year. One can rise to the highest levels of leadership in education without classroom experience or scholarly preparation.

Second, the NCTQ approach is nothing like Flexner's. There are no visits. NCTQ staff examine documents, looking to see whether a program lists a minimum 3.0 GPA for admission, for example, what topics are listed in syllabi, whether the description "requires" or only "recommends" a minimum number of supervisory visits, and the like. The criteria are straightforward, which makes rating efficient, zero to four stars.

That's another difference: Flexner did not issue ratings. He provided descriptions of what he observed, and used these to support his critique of the system as a whole. In fact, he cautioned against prescribing uniform criteria across schools:

*The endeavor to improve medical education through iron-clad prescription of curriculum or hours is a wholly mistaken effort; while mechanical regulation cannot essentially improve the poorer schools, it may very seriously hamper*

*competent institutions. There is no one way to study medicine, still less one way to advance it. If the teaching is in inferior hands, printed directions will not save it.*

Critics have written about NCTQ's inaccuracies, e.g. rating programs that do not exist, getting information wrong about programs that do. NCTQ had the challenge that very few programs responded to their request for documents, so they solicited students with [an advertisement insinuating their school's culpability](#). It is easy to see why they struggled with misinformation. (A fresh round of e-mails last summer offered the chance for corrections: Send the documents. Otherwise, they warn, "we will republish your programs' current ratings in the 2014 edition of the *Teacher Prep Review*." Extortion is an unusual approach to soliciting participation!)

But the most important difference is that, in contrast with Flexner's view of medicine, NCTQ shows little respect for teaching as intellectually demanding work.

For Flexner, the strength of medical education depended on scholarly rigor, hence the importance of connection to schools of arts and sciences. He argued for four years of intensive academic study.

In the end, NCTQ argues for keeping teacher education simple. They do not question the single year of current teacher preparation, and they say nothing about alternative routes to the classroom that take only months—just the sort of thing Flexner identified as a problem in medical education. When President Kate Walsh speaks of the teacher preparation she envisions, she touts a book of basic tips, "Teach Like A Champion," as the epitome of important substance.

There is certainly need for a rigorous study of teacher preparation. But the problem extends well beyond schools of education, and the NCTQ Review only continues a pattern of simpleminded thinking and shallow expectations. For most programs, the response if any will only be to revise their documents, not to give serious reconsideration to their aims and approaches. What we need is discussion and reform at a whole other level.