Reconciling theory and practice by listening to old wives' tales

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Teachers worry that their classroom practice doesn't correspond to the latest theories. Applied linguists worry about conflicts between theory and practice in language teaching. Is there another way of looking at this problem? Suppose, like researchers in the life sciences, applied linguists started from the premise that practitioners know what works. Would they find that the collective wisdom of teachers has as much to give them as the wisdom of indigenous healers gives to medicine?

Introduction: theory versus practice

From time to time in English language teaching we talk about trying to reconcile theory and practice, about the problems of communication between theoreticians and practitioners. The newly qualified teacher gets hold of a new idea and decides that all the old experts are wrong; or the academic assumes that all practitioners are ignorant. An example of the second case can be found in the collection of papers in *Cognition and second language instruction* (Robinson, 2001). The different authors of chapters in this volume discuss syllabus design at considerable length. The book has 1025 references from a wide range of literature, including two to works by evolutionary biologists. Only two references are to books by practitioners. Of these two, neither is, or deals with, a published language course or other work that incorporates a syllabus: the course book authors who are actually practising putting syllabuses into effect are invisible.

Theories are only one part of what we need, in order to make advances in the models that pure and social sciences commonly use. Theories are necessary. Either qualitative methods are used to collect data and to tease a theory out from the data, or theory gives rise to an hypothesis, and the data is used to test the hypothesis and refine the theory. In both cases, theory and data are important.

> Theory without data is a daydream; data without theory is a nightmare.

One thing that either deriving theory from data or testing and refining theory with data forces the researcher to do is to choose the right level of analysis for the phenomenon or process that they are investigating. Fodor (2002) points this out in an article on how human brains support human psychology. He asks whether we should be looking at the level of individual neurons; at a lower level (what happens within the neuron's nucleus); or at a higher level (at what happens in collections of neurons in regions of the brain). To transpose this to an area of applied linguistics, when we look at the transfer of reading skills from first language to second language, should applied linguists be looking at how intermediate learners of a second language build a mental representation of a L2 text? at a lower level, how the learners process individual sentences? at an arguably higher level, how rhetorical conventions differ in L1 and L2? – Probably at different levels depending on the particular questions that are being asked.

One of the problems about applied linguistics, like other social sciences, is that it tries to account for very complex phenomena. This leaves the researcher with the choice of being very certain about a very limited area of what is happening, investigated in a laboratory-like setting, or being much less certain about a more general phenomenon, investigated in a more ecological way.

But in any case theory alone is not enough – despite the fact that some applied linguists sometimes seem to say that it is. For example, Rod Ellis (2002) says about some proposals for grammar teaching, 'These proposals are theoretically based, and, as such, provide a solid foundation for the teaching of grammar.' It is not enough to base proposals on theory, however well tested: it is important to test the proposals as well. It is the case that in applied linguistics we have sometimes seen the untested implications of tested theories offered to the classroom teacher. For example, some versions of the lexical approach advocated choosing lexis on the basis of frequency in corpora, without taking into account coverage, prototypicality, or the fact that corpora are records of production and not reception (for a good critique of this, see Cook, 1998).

One problem is that teachers and researchers all yearn for better learning. People past a quite young age don't learn new languages very easily, on the whole. But language teaching and applied linguistics share a hope that we will find ways of helping learners learn more easily and more efficiently; so both theorists and practitioners are inclined to think that things can be improved. However, this may not always be the case. The situation recalls another area where practitioners and professionals are always striving for something better: parenting. Books, magazines and television programmes abound with advice on better parenting, and what parent has not worried about doing some small thing that might scar their child's psyche for life? The great British child psychologist D. W. Winnicott (1987) had an answer to this worry:

> A good enough mother is good enough.

Perhaps a good enough language teacher is good enough; and perhaps language teachers who are not distressed about perfection in their trade may unconsciously transmit to learners the message that they don't have to be perfect, either: that a good enough learner is good enough.

Bridging the divide

One remedy for the distance between research and classroom practice is classroom research. This empowers teachers, and gives them knowledge about their practices while aiding their development as professionals. Julian Edge (2001) goes so far as to say that 'It is not the teacher's role to apply other people's models'. This seems to assume that all good ideas will come from within the classroom, and that classroom teachers don't have the right to try and apply ideas from elsewhere to their practice. There is something troubling about this attitude. Perhaps it would help to look at how the theorist-practitioner divide is dealt with in other sciences.

In medical research, many of today's new drugs are the result of researchers talking to indigenous healers in places like the Amazon and asking them which plants they use for which diseases. Some European medical researchers have even looked closer to home. My grandmother used to say 'Feed a cold, starve a fever'. Now my grandmother only had one year of schooling, so her knowledge of medicine was not very theoretically sophisticated. But she, and many other European-heritage grandmothers, were pretty sure that feeding a cold and starving a fever were the right things to do.

Even if my grandmother had had a degree in biochemistry, she wouldn't have known what biochemists know today about colds (which are viral infections) and fevers (which are often caused by bacterial infections). It appears that that the human body fights disease in two ways. One is via the *humoral immune system*, which produces B cells. These B cells mature into plasma cells, which secrete antibodies, as well as a compound called gamma interferon; the antibodies bind to viruses and incapacitate them. So this system is good at fighting viruses.

The second way the body fights disease is by the *cell mediated immune system*. In this system, T cells are produced, and they mature into active killer T cells, while producing a compound called interleukin-4; the killer T cells attach to the cell walls of bacteria and break those walls down, killing the bacteria.

Gijs van den Brink and his colleagues at the University of Amsterdam (2002) conducted an interesting study. They randomly divided volunteers into two groups. Both groups were given something via a tube into their stomachs: one group received water, and the other group received a liquid meal.   This was a double blind procedure: neither the volunteers nor the people who were giving the treatment knew which of the two treatments any volunteer was receiving. Shortly after the treatment, blood samples were taken and tested. The volunteers who had received a liquid meal had raised levels of gamma interferon

in their blood, as if they were gearing up to fight viruses; the volunteers who had received water had raised levels of interleukin-4, as if they were preparing to fight bacteria. This is why my grandmother told me *Feed a cold, starve a fever*. Of course my grandmother didn't know *how* or *why* this worked: she didn't have access to the levels of analysis that would tell her that; but she did know *that* it worked.

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I have an earache.
2000 BCE – Here, eat this root.
1000 CE – That root is heathen. Here, say this prayer.
1850 CE – That prayer is superstition. Here, drink this potion.
1940 CE – That potion is snake oil. Here, swallow this pill.
1985 CE – That pill is ineffective. Here, take this antibiotic.
2000 CE – Germs are resistant to that antibiotic. Here, eat this root.
-- *Anonymous internet joke about medical history*

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What happened in medicine is that some Greeks (one of whom may have been called Hippocrates, but who collectively have been given that name) decided in about the fourth century BCE that 'health and disease are capable of explanation by reasoning about nature, independently of supernatural interference' (Porter, 1997:56). The Hippocratics were the first Western medical theoreticians. Reasoning without taking supernatural interference into account was a step forward; but was depending only on reason a step forward? What the Hippocratics did at the same time was to ignore the knowledge of the community of low status lay practitioners.

This attitude continued in Western medicine for a long time. In Vienna in the second half of the nineteenth century, there were two places where a woman could have a baby: a midwives' infirmary and a doctors' hospital A doctor called Ignác Semmelweiss noticed that more women died of postpartum infections in the hospital than in the infirmary, and wondered why. This was before much was known about antisepsis and how diseases were transmitted. However, Semmelweiss noticed that the midwives washed their hands carefully between deliveries; while the doctors moved from one medical case to another and a doctor might, for example, amputate a gangrenous leg, wipe his hands on his dirty apron, and then deliver a baby. He suggested to his colleagues that the midwives might be doing things better than the doctors were, though he couldn't give a theoretical explanation for this. He tried to get his fellow doctors to experiment with washing their hands between cases. He tried for years and never succeeded; in the end this unbalanced his mind, and he died in a mental institution. It was just too much for the medical profession of that time to accept that midwives might know better.

Fortunately this attitude no longer holds in medicine. Medical researchers pay attention to the wisdom of the community of practitioners. But what about language teaching?

Will this work in language teaching, too?

Look at the 'feed a cold' example again. What the researchers did was to use practitioner wisdom as the basis of their hypothesis, and then to apply their more sophisticated and systematic knowledge about how the immune system worked. OK, they said, we'll take as our hypothesis that feeding a cold and starving a fever is an efficient way to deal with two different kinds of disease. What are the mechanisms that might make this happen, and how can we confirm or falsify this hypothesis?

This is what I am proposing we should do as one strand of enquiry in applied linguistics. We should assume that if teachers as a community have been doing something in numbers for a long time and in many places in the world, they are doing it *because it works*. They may not know why or exactly how it works, any more than my grandmother knew why we should feed a cold: it would be surprising if they did, because the explanations will probably be found at a level of analysis to which they do not have access. But if the community of practitioners thinks something works, it probably does.

I am proposing that the practice of the community of teachers be assumed to be efficacious; that researchers should assume, and indeed use as the basis of some of their enquiries, that accepted pedagogical practice works; and should address themselves to the questions of how and why, in the light of their theoretical and empirical knowledge.

Sometimes researchers may find strong evidence that one or another teaching practice is not the optimum way of proceeding, that there is some basic flaw; but if they proceed on the basis that the teaching community is wise, they may find that 'good enough' is even better than they think.

The author
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