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Initial Educators' Perceptions of Their Readiness for the Classroom Through Co-Teaching and Traditional Models of Student Teaching

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INITIAL EDUCATORS' PERCEPTIONS OF THEIR READINESS FOR THE CLASSROOM
THROUGH CO-TEACHING AND TRADITIONAL MODELS OF STUDENT TEACHING

by

Nathan Joynt

A Dissertation Submitted in
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ABSTRACT

INITIAL EDUCATORS' PERCEPTIONS OF THEIR READINESS FOR THE CLASSROOM THROUGH CO-TEACHING AND TRADITIONAL MODELS OF STUDENT TEACHING

by

Nathan Joynt

The University of Wisconsin-Milwaukee, 2019
Under the Supervision of Dr. Barbara Bales

Research outlines the importance of teacher candidates' clinical experiences in their preparation programs (e.g., Banks, 2015). Research also shows that many initial educators feel unprepared for the challenges of managing their own classrooms once they transition from their preparation programs to their school sites (e.g., Levine, 2006). Teachers who feel unprepared to independently lead in the classroom are less likely to employ instructional behaviors that positively affect student learning (Darling-Hammond, Chung, & Frelow, 2002). An effective clinical experience is critical in building initial educators' sense of preparedness and self-efficacy, qualities that lead to the employment of high-quality teaching practices in the classroom (e.g., Ronfeldt & Reininger, 2012).

Preliminary research on a co-teaching model of student teaching – the student teacher and cooperating teacher collaboratively plan the delivery and assessment of instruction throughout the clinical experience – suggests improved perceived preparedness for teacher candidates (e.g., Bacharach & Heck, 2012). However, few of the initial studies have followed teacher candidates into their own classrooms after the clinical placement to consider the perceived effects of the model on their subsequent teaching practices.

The purpose of this bounded case study was to explore self-perception of readiness for the classroom of initial educators who had completed a co-teaching or traditional model of student teaching during their clinical experience. Situated learning theory (Lave & Wenger, 1991) was used as the lens for this exploration given its focus on the milieu of the classroom and the interactions between the teacher candidate and cooperating teacher. Through completion of a readiness survey and participation in one-on-one interviews during their first months of teaching, initial educators shared their reflections on how their clinical experience model affected their sense of preparedness for leading their own classroom. Based on participants' perspectives, implications for teacher preparation programs and faculty considering a shift to the co-teaching model of student teaching are offered. The findings contribute to the teacher education knowledge base and offer opportunities for future research.

For my children Patrick, Sidney, and Lewis
You made this very difficult to complete – thank you.

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Introduction

The year was 2004, and I was a first-year teacher fresh out of the University of Wisconsin-Madison, full of confidence in my ability to teach. I had taken a job in a suburban district outside of Milwaukee, and I entered my fifth grade classroom in early August ready to get to work. Leaning on my coursework and field experiences in Madison, I set about organizing my room in cooperative desk pods, designing a large paper social contract to guide our class's shared discipline model, and creating opportunities for building a strong classroom community (e.g., shared snack schedule, Student of the Week family visits, etc.). I was prepared. I was ready. Bring on the kids.

A week before the school year began, things changed. I received a large donation of books from a retiring teacher to bolster my classroom library. The school's reading specialist stopped in and told me I needed to make sure all the books were labeled with a reading level so students could pick texts that fit their abilities. I had never leveled books before. During the parent curriculum night, I was asked how I planned to address the 9/11 anniversary in my work with students those first weeks of school. I had no idea. My shared snack schedule hit a snag when I learned that three students had severe nut allergies. I scrapped the plan. A parent emailed and asked that we meet about their child's 504 plan before the first day. I did not know what a 504 plan was, nor that this child had one. My principal dropped in and recommended that I wear ties throughout the year as a way to "improve" my first-year teacher status among students and families. I went on a shopping spree at Goodwill. The first day of school arrived, and I looked out my classroom window at all the students I had been so ready to teach just a few weeks earlier. Now, I felt like I was barely keeping my head above water, a feeling that did not subside throughout my first year of teaching. Was I prepared? Was I ready?

My experience as a first-year teacher is one that I saw repeated by initial educators throughout my years as a teacher and school administrator. Brimming with confidence, new teachers soon learned the challenges of navigating all the academic, social, and professional aspects of their position as a classroom teacher. I often wondered whether it was possible for an education program to entirely prepare a student teacher for the myriad of roles and responsibilities an educator embraces. I brought this history to my dissertation studies.

This chapter introduces my dissertation research. I begin by outlining the problem of initial educators' sense of preparedness for the classroom based on their preparation programs, specifically their clinical experience models. I outline the co-teaching model, an alternative framework¹ to the traditional clinical experience model. Next, I detail the significance of this research. I end the chapter by describing a Midwestern urban university's co-teaching pilot program, which served as the catalyst for this study.

Problem Statement

Research outlines the importance of teacher candidates' clinical experiences in their preparation programs (e.g., Banks, 2015; National Council for Accreditation of Teacher Education [NCATE], 2010; Zeichner, 2002). Research also shows that many initial educators feel unprepared for the challenges of managing their own classrooms once they transition from their preparation programs to their school sites (e.g., Cogshall, Bivona, & Reschly, 2012; Levine, 2006; MetLife Survey of the American Teacher, 2005). Teachers who feel unprepared to independently lead in the classroom are less likely to employ instructional behaviors that positively affect student learning, thus resulting in inequitable learning opportunities for the

¹ The terms "model" and "framework" are used interchangeably in this study when referring to the co-teaching and traditional models of student teaching.

students in their classrooms (Darling-Hammond, Chung, & Frelow, 2002). A dynamic and effective clinical experience is critical in building initial educators' sense of preparedness and self-efficacy, qualities that lead to the employment of high-quality teaching practices in the classroom (Lee, Eckrich, Lackey, & Showalter, 2010; Ronfeldt & Reininger, 2012).

Many initial educators complete a traditional clinical experience as part of their preparation program - the student teacher observes their cooperating teacher and gradually assumes more teaching responsibilities until they take the lead role for a specified period of time. This model has remained largely unchanged for many years (Fraser & Watson, 2014; Greenberg, Powerance, & Walsh, 2011; Zeichner, 2002). Preliminary research on a co-teaching model of student teaching – the student teacher and cooperating teacher collaboratively plan the delivery and assessment of instruction throughout the clinical experience – suggests improved perceived preparedness for student teachers (e.g., Darragh, Picanco, Tully, & Henning, 2011; Soslau, Gallo-Fox, & Scantlebury, 2018; Yopp, Ellis, Bonsangue, Duarte, & Meza, 2014). While these initial studies have considered the effects of the co-teaching model on student teachers' perceived preparation *during* the clinical experience, few studies have continued to follow teacher candidates into their own classrooms after the clinical experience to consider the perceived effects of the model on their subsequent teaching practices.

Research Question

This research seeks responses to the question, “How do initial educators’ perceptions of their readiness for the classroom compare between those who participated in one iteration of a co-teaching model of clinical experience and those who experienced a traditional student teaching model?”

Statement of Purpose

In the burgeoning research on co-teaching as a student teaching model, there exists a gap in how the model affects student teachers' self-perception of readiness to teach once they enter the classroom as a teacher of record. The purpose of this bounded case study is to explore self-perception of readiness for the classroom of initial educators who completed a co-teaching or traditional model of student teaching during their clinical experience. The perception of readiness is generally defined as student teachers' feelings about their ability to individually and successfully perform the duties of classroom teachers upon completion of their clinical experience (Capraro, Capraro, & Helfeldt, 2010). These duties include, but are not limited to, classroom management, lesson planning, differentiating instruction, collaborating with a variety of stakeholders, utilizing technology, and assessing student learning.

Significance

From a practical and ethical standpoint, research into the effects of the clinical experience on initial educators' perceived readiness for the classroom holds the potential to improve equitable learning opportunities for all students. Research in teacher preparation has shown a strong link between teachers' sense of preparedness and their sense of self-efficacy, which often leads to the employment of high-quality teaching practices in the classroom (Lee et al., 2010). A dynamic and effective clinical experience is seen as critical in building this sense of preparedness and self-efficacy (Ronfeldt & Reininger, 2012). If this research reveals that the co-teaching model of student teaching leads to initial educators feeling more prepared to manage their own classrooms and meet the diverse needs of their students, then all students stand to gain from this model. Implications hold special significance for rural and urban school settings, as students in these contexts are more likely to be taught by minimally prepared teachers with little teaching

experience, leading to inequitable learning opportunities in those settings (Knoblauch & Chase, 2015). By ensuring that all initial educators are prepared to lead their own classrooms – “ready to teach” - at the end of their preparation programs, this gap in equitable teacher quality could be addressed.

From a scholarly standpoint, research in this area holds the potential to improve the learning of not only students, but also teacher candidates and cooperating teachers. Through co-teaching and the highly collaborative nature of the model, the theory-practice gap that has plagued teacher preparation for so many years could be addressed (Feiman-Nemser, 2001). Cooperating teachers are exposed to innovative instructional theories and strategies brought to the experience by the teacher candidate, thereby nurturing their professional growth and practice; teacher candidates spend more time actively engaged in the practices of teaching in an authentic classroom context, thereby nurturing their professional growth and practice within a supportive community as well. Students in these settings also stand to benefit from more individualized and personalized instruction as a result of the model (Bacharach, Heck, & Dahlberg, 2010).

Context of the Study – The Co-Teaching for Student Teaching Project at Farnham University²

A co-teaching for student teaching model was introduced to Farnham University, an urban college located in the Midwest, in the fall of 2014 after a group of Farnham faculty attended an American Association of Colleges for Teacher Education (AACTE) conference and learned about the framework. The group contacted Gallagher Public Schools (GPS), a large urban school district located near Farnham University, to see if they would be interested in

² All names in the study, including participants, schools, and organizations, are pseudonyms.

piloting the model at one of their schools. A collaborative partnership was formed, though no formal agreement or policy was put into place.

In the spring of 2015, faculty from Farnham and district administrators from GPS attended a two-day train-the-trainer workshop led by St. Cloud State University (SCSU) faculty. SCSU had been at the forefront of implementing the co-teaching for student teaching model for over a decade.³ The workshop outlined the steps necessary for planning, implementing, supporting, and assessing a co-teaching for student teaching model. The GPS administrators identified a potential PK-8 school for implementation, and the team presented the model to the school principal and teacher leadership team. The school agreed to implement the model, and teachers at the school signed up to host student teachers at their final staff meeting of the school year.

That summer, the Farnham/GPS team led a two-day co-teaching orientation session for the co-teaching teams (cooperating teachers and student teachers) at an urban education conference hosted by Farnham University. The orientation session included an outline of the co-teaching model, including strategies, planning activities, and personality inventories so the teams could better understand their communication styles. Once the school year started, the Farnham research team led twice-monthly after-school professional development sessions for the co-teaching teams. The sessions provided teachers with opportunities to reflect on their practice, discuss benefits and challenges of the model, and plan for continued use of the co-teaching strategies. This support framework remained the same for the duration of the entire school year. While GPS administrators were invited to these sessions, they did not attend any of the meetings

³ For a complete history of this work at SCSU, visit their Academy for Co-Teaching and Collaboration webpage (<https://www.stcloudstate.edu/soe/coteaching/>).

and eventually stated that they would be unable to continue participating in the implementation of the model (though they still supported Farnham's ongoing implementation of the pilot program at the school).

The pilot program continued into the next school year. However, the two-day orientation session was abbreviated to a two-hour meeting with cooperating teachers and student teachers led by members of the Farnham research team due to beginning of the year time constraints identified by the school's principal and teachers. Additionally, the professional development sessions were adjusted based on teacher feedback from the previous year and dwindling student teaching numbers. The meetings still occurred twice-monthly, but one meeting was designated specifically for co-planning, as previous teams had cited planning time as a significant challenge. The other meeting included Farnham research team members sitting in on team planning sessions so the support they provided could be targeted to the specific needs of the individual teams. These meetings often included discussions of how the co-teaching strategies could be used to better meet the needs of students in the classroom. This support model remained the same for the duration of the school year and was met with positive feedback from teachers.

For the next school year, the co-teaching pilot program was expanded to an additional PK-8 GPS school with the support of GPS administrators. Due to time constraints, the beginning of the year orientation was once again shortened, this time to a one-hour meeting with cooperating teachers and student teachers at both schools led by one member of the Farnham research team. The same targeted professional development support model was used, but meetings took place once per month instead of twice due to the expansion of the program and the decrease in Farnham research team members. The meetings were again targeted to meet the individual needs of the teams. Feedback from the teachers regarding the co-teaching model and

support framework was positive, so the program was scheduled to continue into the next school year at both schools. However, due to budgetary constraints, the Farnham research team was forced to discontinue the program. Table 1 provides a summary of the project’s timeline.

Dates	Key Events in Co-Teaching Project Implementation Timeline
Fall 2014	<ul style="list-style-type: none"> • Farnham faculty learn about co-teaching model at AACTE conference • Farnham and GPS form collaborative team to pilot co-teaching model at one GPS school, but no formal policy is created
Spring 2015	<ul style="list-style-type: none"> • Farnham/GPS team attends train-the-trainer workshop at SCSU • PK-8 GPS school agrees to pilot the model, and teachers sign up to host Farnham student teachers for 2015-16 school year
Summer 2015	<ul style="list-style-type: none"> • First group of student teacher/cooperating teacher teams attends two-day Farnham/GPS-led co-teaching orientation session
2015-16 School Year	<ul style="list-style-type: none"> • Farnham research team leads twice-monthly professional development sessions for teaching teams • GPS states that it cannot continue administrative participation in program implementation
2016-17 School Year	<ul style="list-style-type: none"> • Orientation sessions reduced to two hours per school’s stated time constraints • Based on participant feedback, twice-monthly professional development sessions split – one session dedicated to co-planning, and one session dedicated to individual team meetings with Farnham research team member
2017-18 School Year	<ul style="list-style-type: none"> • Program expanded to one additional PK-8 GPS school • Orientation sessions reduced to one hour per schools’ stated time constraints • Professional development sessions reduced to once per month due to expansion of program and decrease in Farnham research team members – session dedicated to individual team meetings with Farnham research team member
Summer 2018	<ul style="list-style-type: none"> • Co-teaching program discontinued due to budgetary constraints at Farnham University

Table 1: Farnham University’s Co-Teaching for Student Teaching Pilot Program Implementation Timeline

As one of the graduate members of the Farnham research team, this dissertation research has been at the core of my doctoral studies since I began the program. Over the next three years, I worked with the Farnham faculty team, GPS teachers, and Farnham student teachers to consider how a co-teaching clinical experience might potentially better serve the needs of teachers and students than the traditional student teaching model. One of the concerns that came up most often in speaking with the cooperating teachers was how student teachers would be prepared to independently lead their own classrooms if they co-taught throughout their clinical experience. It was this research question - *How do initial educators' perceptions of their readiness for the classroom compare between those who participated in one iteration of a co-teaching model of clinical experience and those who experienced a traditional student teaching model?* - as well as a paucity of research in that specific area of the co-teaching for student teaching framework that led me to develop this study for my dissertation.

The next chapter shares the research base for this project. In doing so, I highlight the gaps in the education field's understanding about how initial educators' perceptions of their readiness for the classroom compare between those who participated in a co-teaching model of clinical experience and those who experienced the traditional student teaching model.

Chapter 1: Literature Review

This chapter provides a review of the literature and research addressing the clinical experience in student teaching, including the co-teaching model of student teaching, with a focus on those texts that address initial educators' perceived readiness for the classroom. I begin by defining some of the key terms related to student teaching clinical experiences and the co-teaching model of student teaching in particular. I then outline how I conducted my review of the literature, including a discussion of the criteria I used in determining the studies and articles to include and exclude in the review. Moving into the synthesis portion of the literature review, I start by summarizing the historical context of pre-service teachers' clinical experiences, including the foundations of the traditional student teaching model and calls for reform in teacher education. Next, I outline the co-teaching model of student teaching, including the development of the model and an overview of the framework. I then provide a summary of studies that focus on emerging research on the co-teaching model of student teaching, as well as initial educators' perceived readiness to teach in the classroom based on their preparation programs. I conclude the chapter by outlining the need for greater research in the co-teaching model of student teaching as it relates to initial educators' perceived readiness to teach independently.

Key Terms

To begin, it is necessary to define a number of the terms I use throughout the literature review:

- *Clinical experience (student teaching experience)* – This is the culminating experience pre-service teachers participate in as part of traditional teacher education programs. The experience often includes observing, assisting, and leading small group and whole class instruction in a classroom setting. The clinical experience is designed to provide pre-service

teachers with the opportunity to link theory to practice in an authentic school context (NCATE, 2010).

- *Co-teaching (coteaching)* – This is a teaching strategy rooted in special education; it has traditionally been used to support students with special needs in a general education classroom setting. In this discipline, Cook and Friend (1995) define co-teaching as “two or more professionals delivering substantive instruction to a diverse, or blended, group of students in a single physical space” (p. 2).
- *Co-teaching model of student teaching* – Using the special education model of co-teaching as a foundational framework, the strategy has been applied to pre-service teachers’ clinical experiences. Applied this way, Heck and Bacharach (2014) define co-teaching as “two teachers (teacher candidate and cooperating teacher) working together with groups of students; sharing the planning, organization, delivery and assessment of instruction, as well as physical space” (p. 7).
- *Cooperating teacher* – This is the classroom teacher who supervises and works with teacher candidates during the clinical experience.
- *Initial educator* – This refers to a classroom teacher who is in their first or second year of professional practice.
- *Teacher candidate (pre-service teacher, student teacher)* – This is the undergraduate or graduate student who is taking part in the clinical experience as part of their teacher preparation program.
- *Traditional model of student teaching* – While the length and expectations of student teaching experiences vary across states and teacher preparation programs, the model that has been employed for these experiences has remained relatively unchanged for many years

(Fraser & Watson, 2014; Greenberg et al., 2011; Zeichner, 2002). “Traditional practices during the student teaching experience focus on the candidate spending the initial weeks as a silent observer, gradually assuming the role of teacher, and ultimately accepting full responsibility for the classroom” (Heck & Bacharach, 2014, p. 5).

- *Perception of readiness* – This term refers to teacher candidates’ feelings about their ability to individually and successfully perform the duties of classroom teachers upon completion of their teacher preparation program (Capraro et al., 2010). These duties include, but are not limited to, classroom management, lesson planning, differentiating instruction, collaborating with a variety of stakeholders, utilizing technology, and assessing student learning.

Scope of the Review

In conducting my literature review, I first searched for relevant papers and studies that addressed pre-service teachers’ clinical experiences, the co-teaching model, and initial educators’ classroom experiences. Search terms included: student teaching, student teaching field experience, pre-service teaching, pre-service teaching field experience, teacher preparation program, student teaching clinical experience, pre-service teaching clinical experience, co-teaching (and coteaching), co-teaching field experience, co-teaching clinical experience, co-teaching teacher preparation program, initial educator readiness, initial educator teacher preparation program, initial educator field experience, initial educator clinical experience, and initial educator reflection. From the search results, I selected articles and studies I judged to be of high quality based on Haller and Kleine’s (2001) research evaluation framework; in addition, the selected works were relevant to models of clinical experiences and their perceived and/or measured effects on initial educators’ readiness for the classroom.

During this time, I also chose to exclude articles and studies that focused on co-teaching within the realm of special education, as well as literature that focused on teacher preparation for specific contexts (e.g., urban schools). These topics, while certainly important to educators' continued efforts to meet the needs of all learners, were beyond the scope of this study because they did not specifically address the co-teaching or traditional models of student teaching.

Historical Context of Student Teaching

The history of teacher preparation can be traced back to the 1830s, when James G. Carter proposed that Massachusetts create an institution focused specifically on teacher preparation; his vision soon spread to other states (Fraser & Watson, 2014). The normal schools, teachers colleges, and other teacher preparation programs that developed as a result of Carter's vision included the same basic framework: "foundation courses in content knowledge and educational theory and methods, and then, as the capstone, student teaching with a real class under the watchful eye of supervisors and experienced teachers" (Fraser & Watson, 2014, p. 2). Yet, this model for teacher preparation has undergone very little change since that time (Fraser & Watson, 2014; Greenberg et al., 2011; Zeichner, 2002). Referring specifically to pre-service teachers' clinical experiences, Greenberg et al. (2011) stated that "the time spent in preceding field work, the level of supervision by the preparation program and the length of the experience have all increased, but the fundamentals have remained relatively unchanged" (p. 6).

In the mid-1980s, following closely on the heels of *A Nation at Risk: The Imperative for Educational Reform* (National Commission on Excellence in Education, 1983), calls for teacher education reform were made by a range of groups, including the Carnegie Task Force on the Future of Teaching (1986) and the Holmes Group (1986). As a result, many teacher preparation programs began to consider ways to strengthen their programs, including more intensive

coursework on content pedagogy, a greater focus on strategies for meeting the needs of all learners, and more comprehensive clinical experiences (Darling-Hammond et al., 2002).

In 2010, the NCATE Blue Ribbon Panel report on strategies for transforming teacher education to better serve schools identified the clinical experience as “one of the three aspects of teacher preparation that are likely to have the highest potential for effects on outcomes for students, along with content knowledge and the quality of teacher candidates” (p. 2). Zeichner (2002), sharing his perspective on student teacher learning during field experiences, stated that “student teaching is a critical aspect of preservice teacher education” (p. 59). Given the importance of the clinical experience, a number of innovative changes to the traditional student teaching model have been put into motion in recent years, including the development of professional development schools (PDS) (e.g., Darling-Hammond, 2006; NCATE, 2010; Zeichner, 2002), context-specific residencies (e.g., Fraser & Watson, 2014; Futrell, 2010; Matsko & Hammerness, 2014), an increase in the length of time teacher candidates spend in the placement (e.g., Banks, 2015; Capraro et al, 2010; Ronfeldt & Reininger, 2012), and a co-teaching model of student teaching (Heck & Bacharach, 2014).

Historical Context of the Co-Teaching Model of Student Teaching

The co-teaching model of student teaching speaks to reform efforts focused on increasing the length of teacher candidates’ engagement in their clinical experiences; student teachers are involved in collaborative lesson planning, classroom instruction, and student assessment for the entirety of their clinical experience. However, the model also gained traction due to an unintended consequence of the neoliberal push for high-stakes assessment and accountability in education during the past few decades. With the onset of compulsory state testing as part of the No Child Left Behind Act (NCLB) of 2002, university placement coordinators began to have

difficulties finding field placements for pre-service teachers, particularly in the semester that students took their state's standardized assessment. In part, cooperating teachers were hesitant to release control of their classroom to a pre-service teacher for a significant period of time because they remained accountable for their students' learning (e.g., Bacharach & Heck, 2012; Darragh et al., 2011; Ellis & Bogle, 2008). "Co-teaching was used to bridge the concerns of all parties because it allowed both the cooperating teacher and the teacher candidate to be actively engaged in the classroom" (Heck & Bacharach, 2014, p. 6).

While pockets of co-teaching models of student teaching developed before this time, the efforts were often small in scale and failed to gain widespread use in preparation programs (e.g., Eick, Ware, & Williams, 2003; Roth, Masciotra, & Boyd, 1999; Wassell & LaVan, 2009). The model employed by teacher education programs to address the concerns of cooperating teachers due to NCLB had its roots in a Virginia consortium's pilot program. In 1997, the Virginia Department of Education had approved a two-year grant for the MidValley Consortium for Teacher Education to develop and pilot a co-teaching model for student teaching (Perl, Maughmer, & McQueen, 1999). This was based on a study of Maryland's minimum competency test that showed that the passage rates for students in co-taught classrooms (a general education and special education teacher) were significantly higher than those for students in traditional classrooms (Walsh & Snyder, 1993). Schools in the MidValley Consortium for Teacher Education continued to use the model after the grant term had ended, citing the benefits for students, teacher candidates, and cooperating teachers (Perl et al., 1999). As the model grew and was recognized as a potential solution for the difficulty in finding placements for pre-service teachers due to increased accountability measures, the consortium began to provide training opportunities for university and PK-12 educators (Heck & Bacharach, 2014).

Teacher educators at SCSU attended one of the training opportunities and began to develop their own co-teaching model of student teaching in the early 2000s. Initial feedback from the cooperating teachers and teacher candidates who participated in the SCSU pilot was positive, and the university was awarded a grant by the United States Department of Education Teacher Quality Enhancement Partnership to further investigate the impact of co-teaching on cooperating teachers, teacher candidates, and students (Heck & Bacharach, 2014). Shortly after, SCSU collaborated with The Renaissance Group, a national consortium of teacher preparation institutions, and began hosting training opportunities for the model. At the time, the SCSU co-teaching model was recognized as a “Promising Practice” by the NCATE (2010) Blue Ribbon Panel report on transforming teacher preparation through clinical practice experiences.

Presently, the framework has gained traction in a number of teacher education programs, including Whitworth University (Darragh et al., 2011), the University of Central Missouri (Hartnett, Weed, McCoy, Theiss, & Nickens, 2013), Purdue University and Ball State University (Fraser & Watson, 2014), California State University-Fullerton (Yopp et al., 2014), Western Kentucky University (Stobaugh & Gichuru, 2017), the University of Delaware (Soslau et al., 2018), and Farnham University.

Description of the Co-Teaching Model of Student Teaching

The co-teaching model of student teaching traces its roots to the field of special education, which first employed the framework as a service delivery option, combining the knowledge and efforts of special and general educators to facilitate the full inclusion of students with special needs into general classroom settings (Friend, Embury, & Clarke, 2015). As a student teaching framework, co-teaching is defined as “two teachers (teacher candidate and cooperating teacher) working together with groups of students; sharing the planning,

organization, delivery and assessment of instruction, as well as physical space” (Heck & Bacharach, 2014, p. 7). The model allows for both the cooperating teacher and the student teacher to be actively engaged with students for extended periods of time (both within the school day and throughout the clinical experience), capitalizing on their combined professional knowledge and skills to meet the needs of all learners in the classroom.

Co-teaching during student teaching consists of three major components: co-planning, co-instruction, and co-evaluation (Soslau et al., 2018). During co-planning, the teacher candidate and cooperating teacher collaboratively develop lessons, discussing the rationale behind instructional decisions and offering ideas and suggestions as a team. Co-instruction, which involves the teacher candidate and cooperating teacher teaching together, can take many forms, including the seven co-teaching strategies outlined by Heck and Bacharach (2014): One Teach, One Observe; One Teach, One Assist; Station Teaching; Parallel Teaching; Supplemental Teaching; Alternative or Differentiated Teaching; and Team Teaching. These strategies are chosen collaboratively by the teaching team based on the curriculum and their students’ needs. Co-evaluation entails collaborative reflection between the student teacher and cooperating teacher on their students’ learning, their own instruction, and future planning for the classroom. Through these collaborative actions, the teaching team’s practices become aligned, space is made for the equal sharing of ideas between the team members, and the co-teachers are able to externalize their own thinking and practices (Soslau et al., 2018). In short, the invisible aspects of teaching are made visible, resulting in the growth and development of both teachers, as well as the students they serve.

The Co-Teaching Model Compared with the Traditional Model of Student Teaching

Heck and Bacharach (2014) outlined nine major differences between the co-teaching model of student teaching and the traditional model. These differences are summarized in Table 2.

	Traditional Model	Co-Teaching Model
Preparation	Participants receive little formal training.	Team members receive specific training about roles, expectations, and co-teaching strategies.
Introduction	“Student teacher” initially observes with minimal participation.	“Teacher candidate” is involved in classroom routines and instruction from day one.
Involvement	One teacher is “on” while the other teacher is “off.”	Teachers remain actively involved with students throughout to best meet their needs.
Relationship Building	Participants have little opportunity to build a relationship before starting.	Team members are brought together before starting to establish trust and respect.
Communication and Collaboration	Student teachers are assumed to bring communication and collaboration skills to their clinical placements.	Team members receive instruction and are given opportunities to practice communication and collaboration skills with each other.
Planning	Student teachers plan individually and present lessons to the cooperating teacher for feedback.	Team members co-plan, identifying co-teaching strategies that would support their learners. The planning leadership is shared, and both teachers are expected to contribute to the lesson planning.
Solo Compared with Lead Teaching	The student teacher is left solely in charge of the classroom for a specified period of time and is fully responsible for meeting the needs of all students.	Teacher candidates become fully responsible for the classroom for a specified period of time, but the cooperating teacher remains actively involved, taking direction from the teacher candidate while working with students.
Modeling and Coaching	Student teachers are assumed to enter the placement skilled in all aspects of instruction (e.g., classroom management).	Cooperating teachers provide ongoing modeling and coaching for teacher candidates throughout the placement, sharing the rationale for instructional decisions.
Power Differential	This aspect of the relationship is rarely addressed.	Team members are expected to (and provided guidance on how to) work collaboratively as a team, evening the power differential between them.

Table 2: Traditional Model Compared with Co-Teaching Model of Student Teaching (Heck & Bacharach, 2014)

In considering the differences outlined in Table 2, one of the most important pedagogical distinctions is the amount of time teacher candidates and cooperating teachers are engaged in planning, instruction, and assessment. In the traditional model, student teachers often silently observe in the classroom for the initial weeks of their clinical placement, and then they are gradually given instructional responsibilities by the cooperating teacher (e.g., teach math first, then teach math and social studies the next week, etc.). Eventually, the student teacher assumes full responsibility of the classroom for a specified period of time, during which the cooperating teacher does not assist and/or leaves the classroom. This “sink or swim” approach is ineffective in supporting and nurturing pre-service teachers as they learn to teach in isolation (Giebelhaus & Bowman, 2002).

In the co-teaching model, the teacher candidates and cooperating teachers are actively involved in all aspects of teaching throughout the clinical experience. Even during the student teacher’s lead teaching time, the cooperating teacher is present and engaged in planning, instruction, and evaluation, following the teacher candidate’s direction and providing feedback in real time. The invisible aspects of teaching are made visible, resulting in the growth and development of the teacher candidate. “The co-teaching partnership enables cooperating teachers to provide consistent mentoring, giving teacher candidates the time and support necessary to gain [the] skills and confidence required to teach successfully” (Heck & Bacharach, 2014, p. 4). Additionally, students in the classroom benefit from the presence and engagement of both teachers, as the teaching team is better able to meet the needs of all learners through their shared efforts.

Another key difference between the two models is the power differential between the cooperating teacher and student teacher in the two models. In the traditional student teaching

model, the cooperating teacher is often considered the “all-knowing” member of the team and serves as the student teacher’s primary resource in all aspects of their teaching education. Rikard and Veal (1996), outlining the power and influence cooperating teachers hold over student teachers, contended that supportive relationships are more difficult for teams to establish given this power differential. Compounding this issue, the clinical experience is often the first time student teachers are applying the pedagogical theory they learned through their teacher education courses in an authentic classroom setting, so cooperating teachers are tasked with helping them to navigate the often difficult transition from theory to practice (Feiman-Nemser, 2001). Cooperating teachers in the traditional model often lack training in this aspect of their role, and this can cause confusion for the student teacher as they struggle to understand how the theory they learned in their coursework manifests itself in the daily instructional decisions made by their cooperating teacher (Cochran-Smith & Zeichner, 2005). Given the power differential between the two teachers, student teachers may shy away from asking questions or offering their own perspectives in planning and instruction, thereby hampering their own development as a teacher.

In the co-teaching model of student teaching, efforts are made to balance the power differential between the cooperating teacher and the teacher candidate. Through training workshops, this power differential is explicitly addressed, and team members are provided with collaboration and communication strategies to enhance the effectiveness of their partnership (Heck & Bacharach, 2014). By engaging the teacher candidate in planning and instruction right from the start, they are empowered to share ideas and suggestions, contributing to the partnership and offering their own theoretical perspectives based on what they learned through their coursework. Both the teacher candidate and the cooperating teacher are expected to grow and learn through the experience. The student teacher’s involvement in all aspects of planning,

instruction, and evaluation throughout their clinical experience enables them to build confidence in their own abilities as a teacher (Soslau et al., 2018).

From a theoretical standpoint, major differences between the two models speak to Roth and Tobin's (2004) comparison of the co-teaching framework to apprenticeship models of learning.⁴ The authors maintained that this model of student teaching helps to weaken the traditional power relationship between student teachers and cooperating teachers, enabling both participants to learn together from the shared experience. Both participants are fully engaged in shared teaching practices throughout the clinical experience, enabling the teacher candidate and cooperating teacher to learn from and with each other. Additionally, Tobin and Roth (2005) argued that the co-teaching framework moves teaching teams beyond the process of "mimesis," the imitation of an action based solely on observation (as is the case with teaching in the traditional model). Through a process of "mutual entrainment," both the teacher candidate and the student teacher learn, understand, and perform teaching practices (Tobin & Roth, 2005). In short, student teachers (and their cooperating teachers, to a degree) learn to teach through their prolonged engagement in shared instruction, not simply through observation. This is a hallmark of the co-teaching model of student teaching and sets it apart from the traditional model of student teaching.

Research on the Co-Teaching Model of Student Teaching

Due to the relevantly recent growth of the co-teaching model in teacher preparation programs, early research (pre-1999) was limited. Although the research base has expanded, many of these earlier pieces provided an overview of the model and outlined potential benefits of the framework with limited evidence (e.g., Carambo & Stickney, 2009; Diana, 2014; Hartnett et

⁴ The theoretical underpinnings of the two models are described in greater detail in Chapter 2.

al., 2013). Within the pool of more recent studies, some researchers employed qualitative research techniques (e.g., Eick et al., 2003; Roth et al., 1999; Wassell & LaVan, 2009), while others employed mixed methods research techniques (e.g., Bacharach & Heck, 2012; Darragh et al., 2011; Yopp et al., 2014). This review of the literature chronicles those studies with findings that inform the co-teaching model of student teaching as a framework for teacher learning.

Roth et al. (1999) provided a case study of one student teacher's experience in a six-week co-teaching framework in a middle school science course. Based on observations and interviews with the student teacher, the authors argued that the model allowed the pre-service teacher to better develop her skills and practice through her observation of and collaboration with her cooperating teacher. "Coteaching provides an ideal situation because teachers come to build the necessary common ground (and therefore, the necessary intersubjectivity) to construct a viable professional discourse during their reflections on actions" (Roth et al., 1999, p. 783).

Eick et al. (2003) detailed the use of a co-teaching model as part of the field component in ten secondary teacher candidates' science methods course. Based on observations and teacher candidates' written reflections, the authors found that co-teaching provided the pre-service teachers more comfort in learning to teach, increased opportunities to critically reflect, the ability to develop confidence in teaching and managing students, and increased opportunities to employ inquiry-based teaching methods. "Greater assuredness in interacting with classroom students is evidence of the beginning development of classroom management and discipline skills. This coteaching arrangement appears to have begun this process of development in a teacher-supportive environment sooner" (Eick et al., 2003, p. 82).

Wassell and LaVan (2009) provided a case study of two secondary math and science teachers, following them from their co-taught placement settings into their first year of teaching

independently. The teachers were able to transfer many of the practices they learned in their clinical experiences to their classrooms, such as the importance of shared reflection and responsibility and the benefits of building relationships with students. The two initial educators admitted that they struggled with some aspects of teaching without a co-teacher in the room, including critically reflecting on their practice, taking pedagogical risks, and classroom management. Overall, the authors and teachers felt the model benefitted them in their preparation for classroom teaching; “the practices that [the students] displayed during coteaching were indeed transposable into their first years as independent teachers” (Wassell & LaVan, 2009, p. 430).

Bacharach et al. (2010), using four years of quantitative data from K-6 students’ performance on the Minnesota Comprehensive Assessment (MCA), showed that student achievement scores in math and reading were greater in co-taught classrooms (teacher candidate and cooperating teacher) than in non-co-taught classrooms (classrooms without a student teacher, as well as classrooms with a student teacher and cooperating teacher using a traditional student teaching model). The authors also provided qualitative data from focus group sessions with 400 PK-6 students outlining the perceived benefits of the co-teaching model, which included getting help when students needed it, fewer classroom disruptions, and improved student behavior. “Coteaching will have a tremendous impact on the academic achievement of learners throughout the United States, and it has the potential to unequivocally change the face of teacher preparation and student teaching as we know it today” (Bacharach et al., 2010, p. 13).

Darragh et al. (2011), using data from a three-question survey given to 156 teacher candidates who had just completed their clinical experience using the co-teaching model of student teaching, concluded that the majority of the teacher candidates found co-teaching

beneficial to their students' learning, a valuable practice for their professional training, and an experience that enabled them to feel prepared to implement co-teaching in their own classrooms. Only two of the respondents indicated that they did not feel prepared to teach independently. "Co-teaching not only prepares teacher candidates in a true apprenticeship model, it prepares them for the collaborative environment in schools today and shows them how to utilize more than one adult in the classroom to improve student achievement" (Darragh et al., 2011, p. 102).

Bacharach and Heck (2012) provided a summary of four years of data from surveys and focus groups that showed perceived benefits of the co-teaching model for student teaching from the perspectives of teacher candidates, PK-12 students, and cooperating teachers. Teacher candidates felt they developed better classroom management skills, collaboration skills, a deeper understanding of the curriculum, and increased confidence in themselves as teachers. Students felt they were able to get more help with questions and more individual attention. Cooperating teachers felt they were able to provide more help for students with high needs, grew professionally through co-planning with their teacher candidates, and appreciated being able to host a student teacher without giving up their classrooms. The authors also outlined quantitative data from teacher candidates' summative assessments, based on the ten Interstate (New) Teacher and Assessment Support Consortium (InTASC) standards for new teachers, that showed that pre-service teachers in a co-taught model of student teaching outscored pre-service teachers in a traditional model of student teaching at statistically significant levels in the areas of professional development, partnerships, and professional dispositions.

Yopp et al. (2014), using data from surveys and interviews of 10 cooperating teachers and 20 teacher candidates in secondary math classes in an urban California school district, found that the majority of participants felt that the co-teaching model of student teaching provided a

positive alternative framework to the traditional student teaching model. The teacher candidates, half of whom were teaching in their own classrooms at the time of the interviews, reported feeling better prepared for teaching due to the co-planning opportunities and ability to explore a variety of pedagogical approaches to instruction that were a part of the co-teaching model. “It was primarily through their shared experience of learning together how to successfully implement new strategies that the teachers, new and experienced, grew professionally” (Yopp et al., 2014, p. 108).

Soslau et al. (2018), using video recordings, audio recordings, and interviews of 12 teaching teams’ co-instruction, co-planning, and co-evaluation meetings, compared the co-teaching model as theorized to its manifestation in practice. They found that there were opportunities for improvement in the areas of positioning, power, and agency-building for the team members; focus on student learning in team meetings; and cooperating teachers embracing the dual roles of teacher and learner of teaching. The authors recommended reconceptualizing the role of the university field instructor so they served both as instructor of the teacher candidate and teaching team facilitator/co-teaching model supporter. “This change reflects a shift in focus for field instructors from supporting candidate learning with a secondary focus on pupil learning, to supporting classroom practice and candidate, clinical educator, and field instructor learning that maximizes pupil learning” (Soslau et al., 2018, p. 12).

In considering themes from the emerging research on the co-teaching model of student teaching, a number of studies outlined the perceived benefits of the model for teacher candidates (Bacharach & Heck, 2012; Bacharach et al., 2010; Darragh et al., 2011; Eick et al., 2003; Roth et al., 1999; Soslau et al., 2018; Wassell & LaVan, 2009; Yopp et al., 2014); fewer studies considered the perceived benefits for cooperating teachers and/or students in the classroom

(Bacharach & Heck, 2012; Bacharach et al., 2010). While many of the studies considered the effects of the co-teaching model on participants during the clinical experience (Bacharach & Heck, 2012; Bacharach et al., 2010; Darragh et al., 2011; Eick et al., 2003; Roth et al., 1999; Soslau et al., 2018; Wassell & LaVan, 2009; Yopp et al., 2014), few continued to follow teacher candidates into their own classrooms after the clinical experience to consider the effects of the model on their subsequent teaching practices (Wassell & LaVan, 2009; Yopp et al., 2014). It is expected that this research base will continue to grow as the co-teaching model of student teaching is implemented in more teacher education programs.

Research on Initial Educators' Perceived Readiness for the Classroom

In considering research on initial educators' perceived readiness for the classroom, studies generally focused on the traditional model of student teaching. These studies often employed mixed method research techniques, relying on feedback from pre-service teachers and initial educators obtained through surveys, interviews, written reflections, and/or focus group sessions (e.g., Ashley, 2016; Capraro et al., 2010; Oh, Ankers, Llamas, & Tomyoy, 2005). Additionally, in reviewing the literature in this area, there existed a number of studies that linked pre-service teachers' perceived preparedness for the classroom to feelings of self-efficacy (Darling-Hammond et al., 2002; Lee et al., 2012; Ronfeldt & Reininger, 2012); therefore, studies that considered teacher candidates' and initial educators' sense of self-efficacy have been included in this section. Following is a chronological summary of these studies.

Darling-Hammond et al. (2002), using data from a survey of 2,956 initial educators in New York City, concluded that teachers felt adequately prepared overall for their first year in a classroom based on their preparation programs. Additionally, the authors found that teachers' sense of preparedness was the strongest predictor of their sense of self-efficacy, which they tied

to positive instructional behaviors that affect student learning, such as a willingness to try new instructional techniques, persistence in trying to solve learning problems, and enthusiasm for and commitment to teaching.

Oh et al. (2005), using data from a survey of 204 K-12 teachers in an urban school district, found that the quality of the cooperating teacher played the most important role in participants' assessment of their student teaching experiences. The authors also concluded that teachers who had a longer student teaching experience tended to show a higher level of confidence in their ability to change student learning in positive ways.

Yost (2006) used observations, interviews, and the reflective writings of eight second-year K-12 teachers in a variety of settings to consider the factors that lead to initial educators leaving the field in such high numbers. She concluded that the teachers' field experiences, particularly the quality of the cooperating teacher and the school setting, played a critical role in the development of the teachers' sense of self-efficacy.

Capraro et al. (2010) used data from a readiness survey completed by 135 teacher candidates in a southwestern teacher preparation program to find that student teachers who participated in an inquiry-focused PDS placement reported significantly higher levels of readiness in all areas of the survey than student teachers who participated in a traditional placement or a PDS placement (without an inquiry focus). The authors advocated for clinical placements that were more structured around and focused on inquiry-based learning procedures.

Lee et al. (2012), using data from a pre/post survey of 130 PK-4 teacher candidates in an urban-based teacher preparation program, found that student teachers' perception of their preparedness to teach before and after the clinical experience showed statistically significant growth in the areas of pedagogical content knowledge, planning and preparation for instruction,

classroom management, promoting family involvement, and professionalism. The authors also connected teacher candidates' sense of self-efficacy to successful practices in the classroom, highlighting the importance of the clinical experience in building self-efficacy.

Ronfeldt and Reininger (2012) used data from 1,057 pre/post student teaching surveys completed by pre-service teachers in a large urban school district to show that the quality of a teacher candidate's field experience played a pivotal role in improving their feelings of preparedness, sense of self-efficacy, and commitment to stay in teaching. Specifically, the authors found that the cooperating teacher had the strongest positive effect on teacher candidates' perceived preparedness and sense of self-efficacy for teaching in a classroom.

Ronfeldt, Schwartz, and Jacob (2014), using data from 3,145 surveys of K-12 teachers with five or less years of experience in the classroom, concluded that teachers who completed more methods-related coursework and practice teaching during their preparation programs felt better prepared to lead their own classrooms as first-year teachers, and they were more likely to stay in teaching. The authors found that these elements of preparation programs were particularly significant in rural and urban settings.

Knoblauch and Chase (2015), using data from surveys and self-assessments completed by 368 teacher candidates in a Midwestern teacher preparation program, found that all student teachers, regardless of a rural, suburban, or urban placement setting, experienced significant growth in their sense of self-efficacy as a result of their clinical experience. The authors tied teacher candidates' perception of self-efficacy to successful teaching practices in the classroom. The authors also noted that while student teachers in urban placement settings experienced growth in their sense of self-efficacy as a result of the clinical experience, the overall level was lower than that of student teachers in rural and suburban placement settings.

Ashley (2016), using data from a survey of 74 suburban and rural K-12 teachers in the state of New York, found that teachers felt only somewhat prepared to teach as first-year teachers by their preparation programs. The author stated that the majority of respondents felt they learned more from being a teacher of record in a classroom than they learned in their teacher preparation programs.

In considering themes from the research on initial educators' perceived readiness for the classroom, many studies detailed the importance of the clinical experience in improving teacher candidates' sense of preparedness and self-efficacy (Knoblauch & Chase, 2015; Lee et al., 2012; Oh et al., 2005; Ronfeldt & Reininger, 2012; Ronfeldt et al., 2014; Yost, 2006). Research also outlined the link between initial educators' sense of preparedness and self-efficacy and their use of quality teaching practices (Darling-Hammond et al., 2002; Knoblauch & Chase, 2015; Lee et al., 2012; Ronfeldt & Reininger, 2012; Ronfeldt et al., 2014; Yost, 2006). Finally, while some studies found value in lengthening the clinical experience (Oh et al., 2005; Ronfeldt et al., 2014), other studies found greater value in the quality of the placement, especially as it relates to the cooperating teacher and school site (Capraro et al., 2010; Ronfeldt & Reininger, 2012; Oh et al., 2005; Yost, 2006). "It might not be the amount of time, so much as *how* the time is spent during the field experiences, which seems to determine its effectiveness" (Capraro et al., 2010, p. 145).

Based on these studies, continued research in the area of initial educators' perceived readiness for the classroom is necessary, especially as it relates to the effects of recent innovations in pre-service teachers' clinical experiences, such as the co-teaching model. Darling-Hammond (2016) highlighted the recent increase in studies focused on isolating the positive effects of these innovations to strengthen the research base around the clinical

experience, a research base that is weak due to the newer nature of these models (Cochran-Smith et al., 2015).

Argument for Further Research

This literature review suggests that despite widespread acknowledgement that the clinical experience in teachers' preparation programs is critical for their future success (e.g., Banks, 2015; NCATE, 2010; Zeichner, 2002), initial educators continue to report feeling underprepared for the classroom in their first years of teaching (e.g., Coggshall et al., 2012; Levine, 2006; MetLife Survey of the American Teacher, 2005). This sense of unpreparedness can lead to high teacher turnover and, in turn, inequitable learning opportunities for students (Knoblauch & Chase, 2015). As a result, there has been a call for reform in teacher preparation programs, particularly pre-service teachers' clinical experiences, which have remained relatively unchanged for many years (Fraser & Watson, 2014; Greenberg et al., 2011; Zeichner, 2002). One such alternative framework is the co-teaching model of student teaching, which entails the teacher candidate engaging in planning, instruction, assessment, and reflection with the classroom cooperating teacher for the duration of their clinical experience (Bacharach et al., 2010). Due to this model providing opportunities for the teacher candidate to more fully engage in the practices that make up effective teaching, initial educators are potentially more prepared for teaching in their own classrooms after their clinical experiences than their peers who participated in more traditional models of student teaching.

The purpose of this research, then, was to explore self-perception of readiness for the classroom of initial educators who completed a co-teaching or traditional model of student teaching during their clinical experience. The next chapter introduces the theoretical framework

that guided this study. This is important because the theoretical lens through which one approaches a study focuses both the research design and, in turn, the findings that emerge.

Chapter 2: Theoretical Framework

This chapter provides a description of the theoretical lens through which I approached all aspects of the study. Situated learning theory, with its emphasis on the importance of the social context in which learning takes place, can be found at the heart of the clinical experience, regardless of the model. I begin this chapter by tracing the theory's development from its roots in social learning theory to its current application in teacher pedagogy. I then outline the main tenets of situated learning theory and how they pertain to the clinical experience models. I conclude the chapter by comparing the co-teaching and traditional models of student teaching through the lens of situated learning theory.

Situated Learning Theory

This study explored initial educators' perceptions of how the framework of their clinical experience (co-teaching or traditional) prepared them to lead their own classrooms. Both models are situated in classrooms; thus, situated learning theory, with its focus on the milieu of the classroom and the interactions between the pre-service teacher and cooperating teacher, seems appropriate. "The physical and social contexts in which an activity takes place are an integral part of the activity, and ... the activity is an integral part of the learning that takes place within it" (Putnam & Borko, 2000, p. 4). To fully understand situated learning theory, one must first consider its roots in the broader social learning theory framework.

From a social learning theory perspective, learning is considered a continuous reciprocal interaction among cognitive, behavioral, and environmental influences (Crittenden, 2005). This perspective posits the idea that a great deal of human learning occurs in a social environment through learners observing others; through these observations, "people acquire knowledge, rules, skills, strategies, beliefs, and attitudes" (Merriam, Caffarella, & Baumgartner, 2007, p. 288).

Furthermore, people learn about the application of these behaviors, including the appropriateness and consequences of the behaviors, resulting ultimately in their acting in accordance with their beliefs as related to the expected outcomes of the actions.

Albert Bandura, one of the earliest researchers of social learning theory, focused on the cognitive processes involved in learners' observations (Merriam et al., 2007). He proposed a four-step pattern of learning, which entailed the learner noticing something in the environment, remembering what was noticed, producing a behavior, and the environment delivering a consequence (positive or negative) that affected the probability of the learned behavior happening again (Crittenden, 2005). Bandura contended that, contrary to other learning theories of the time, an individual could learn from observation without having to imitate what was observed; learning could occur solely through observation, including learning the behavior and its consequences (Merriam et al., 2007).

An additional component of Bandura's work in social learning was his concept of self-efficacy, an individual's perspective of how successful they feel they are likely to be in a specific environment (Merriam et al., 2007). Because an individual's self-efficacy is developed internally through external observations, it in essence represents one's personal perception of external factors, pulling together much of Bandura's research within social learning theory (Kattari, 2015). If a learner has a high sense of self-efficacy, they are more likely to be motivated to engage and persevere through potentially difficult and complicated learning experiences. A learner with a low sense of self-efficacy may avoid potentially challenging learning experiences as they do not see a positive outcome resulting from their involvement and efforts.

Lave and Wenger (1991), building on social learning theory, proposed that the "social" of learning was situated within the context in which it occurred and moved beyond learning simply

through observation and imitation. Learning, they argued, focuses “on activity in and with the world; and on the view that agent, activity, and the world mutually constitute each other” (p. 33). When viewed through a situated learning theory lens, active, meaningful participation is a necessary component of learning.

In their description of situated learning theory, Lave and Wenger (1991) detailed legitimate peripheral participation, a process central to the learning experience. As participants in a community of practitioners, learners gradually build knowledge and confidence through increased engagement in the sociocultural practices of the community, ultimately leading them to become causative members of that community. The gradual empowerment of the learner through continued engagement with and understanding of the community’s practices speaks directly to the clinical experience for both the co-teaching and traditional models; teacher candidates develop their skills as teachers through ongoing collaboration with their cooperating teacher and students in an authentic classroom environment. “Learning is as much a matter of enculturation into a community’s ways of thinking and dispositions as it is a result of explicit instruction in specific concepts, skills, and procedures” (Putnam & Borko, 2000, p. 5).

Situated learning theory places emphasis on the human relationships in a learning experience. Learning is a result of people’s actions in relation to others; hence, learning outcomes are socially constructed (Lave & Wenger, 1991). Knowledge is not simply gained via transmission from one person to another. It is through the learner and teacher’s collaborative efforts and experiences in an authentic context that learning takes place. This aspect of situated learning theory, with its emphasis on the mutual learning of the people involved, speaks to effective clinical experience frameworks (Putnam & Borko, 2000; Roth & Tobin, 2004). Roth and Tobin (2004) argued that by placing student teachers and cooperating teachers in the roles of

co-learners, the traditional power relationship between the two participants is weakened, enabling both people to learn together from the shared experience. “New possibilities for acting and learning arise whenever teachers teach together, thereby creating more (collective) room to maneuver and expanding the agency for all participants in the field” (Roth & Tobin, 2004, p. 172).

Korthagen (2010) tied situated learning theory specifically to teacher pedagogy and developed a three-level model for teacher development based on Lave and Wenger’s (1991) work. In the first level, *gestalt formation*, the teacher candidate takes concrete experiences from their clinical placement and begins to form a basic understanding of their role. In the second level, the *schema level*, the teacher candidate, through reflection, becomes more consciously aware of their experiences and actions in the clinical placement and begins to tie that understanding into broader networks of how to act in particular situations in the classroom. In the third level, the *theory level*, through continued reflection, the teacher candidate connects the networks developed in the previous level to form more coherent teaching theories that guide their practice. Through these levels, the student teacher moves from observation on the periphery to more legitimate active participation in the center, ultimately resulting in their growth and development as a teacher.

Most fundamental to this approach is the idea that what is needed for a process of schematization... is the organization of sufficient suitable and realistic experiences tailored to the needs and concerns of student teachers, and at the same time preparing the way for the intended process of schematization through opportunities for reflection on those experiences. (Korthagen, 2010, p. 104)

Korthagen’s (2010) model of teacher development, illustrated in Figure 1, speaks directly to the need for reflective opportunities in both the co-teaching and traditional models of student teaching and provides a clear connection between situated learning theory and the clinical experience.

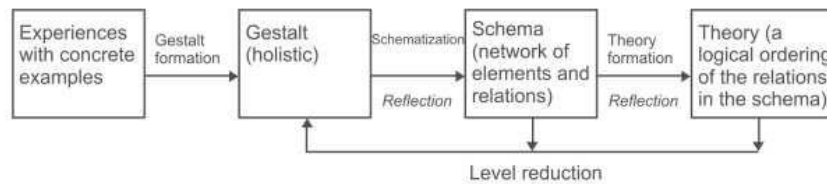


Figure 1: Korthagen’s (2010) Model of Teacher Development

Tenets of Situated Learning Theory

As detailed in the previous section, one of the defining characteristics of situated learning theory is the concept of legitimate peripheral participation (Lave & Wenger, 1991). Participants in an authentic learning context gradually build confidence and knowledge as they engage in the sociocultural practices of a community, eventually becoming a causative member of that community. “Legitimate peripheral participation is proposed as a descriptor of engagement in social practice that entails learning as an integral constituent” (Lave & Wenger, 1991, p. 35). From a teacher education perspective, this concept relates directly to student teachers’ growth and development throughout the clinical experience. Pre-service teachers often begin their clinical placement on the periphery of the classroom, observing and learning about the norms and expectations of the classroom community. As the semester progresses and they build confidence and knowledge in their own teaching abilities through active engagement in the classroom, they move towards becoming a more causative member of that learning community. The ultimate goal, obviously, is that the novice teacher has become a more experienced and capable teacher by the end of the clinical placement, confident in their abilities to meet the needs

of all learners due to their social participation in the classroom community. Soslau et al. (2018) referred to this as transformation of participation.

A second tenet of situated learning theory is the concept of communities of practice, which Wenger (1998) covered in greater depth after his initial work with Lave. Communities of practice are groups of people who share a common interest about something they do, and together they learn how to do it better through their interactions (Wenger, 1998). Through these communities of practice, members share responsibility and accountability in nurturing the development and growth of all members. In the field of teacher education, student teachers can be seen as the “newcomers” in educational communities of practice, and the “old-timers,” or cooperating teachers, work collaboratively with them to support their learning in practice. In effective communities of practice, cooperating teachers and student teachers are mutually engaged and accountable for helping the teacher candidate to move towards the center of the educational community as they take on more responsibility in the classroom. This concept of a community of practice also takes into account the influence of other members integral to the student teacher’s development, such as the field experience supervisor, grade level teacher team members, special education teachers, and the building principal.

A final tenet of situated learning theory is the power dynamic inherent in the teacher/learner relationship. This power imbalance can lead to conflict between the members of the learning partnership (Lave & Wenger, 1991). However, when the expert accepts their dual role as teacher and learner, the relationship becomes more reciprocal as both people grow and develop through their collaborative efforts. This includes the old-timers granting the newcomers access to legitimate participation opportunities within the community of practice and trusting their abilities as the newcomers develop their identities as causative members of that community

(Lave & Wenger, 1991). From a teacher education perspective, this tenet speaks directly to the importance of developing and nurturing a positive and collaborative relationship between the cooperating teacher and student teacher. As detailed earlier, Roth and Tobin (2004) outline the value of the participants viewing themselves as co-learners; the traditional power relationship between the cooperating teacher and student teacher is weakened, enabling both people to learn together from the shared experience. An additional benefit of this co-learner perspective is that the theory-practice gap so often identified as a problem in the clinical experience - student teachers struggle to connect the theory learned in their coursework to the everyday practices in their clinical placement (Feiman-Nemser, 2001) - is addressed as the cooperating teacher learns new instructional theory and strategies from the student teacher while also imparting their own experiential knowledge to the teacher candidate. The power structure in the relationship is better balanced, leading to improved growth and development for both participants.

Situated Learning Theory as a Lens for Comparing Clinical Experience Frameworks

Situated learning theory as a lens for this study is appropriate due to many of its characteristics described earlier, particularly its application to teacher education and the clinical experience, regardless of the framework. By utilizing a theoretical framework that applies to both models, my goal was to provide a balanced foundation from which to consider participants' perceptions of their readiness for the classroom based on their clinical experience framework (in other words, I did not want to weight the research right from the start by choosing a theoretical lens that favored one model over the other).

That being said, there are aspects of situated learning theory that illuminate major differences between the co-teaching and traditional models of student teaching. One such area is the concept of legitimate peripheral participation (Lave & Wenger, 1991), outlined earlier. In

short, teacher candidates are empowered through active participation and engagement in teaching in an authentic classroom context during the clinical experience. The co-teaching and traditional student teaching models diverge in practice here. The goal of the co-teaching framework is that the teacher candidate is fully engaged in collaborative planning, instruction, and assessment with the cooperating teacher throughout the clinical experience (Heck & Bacharach, 2014). In the traditional model, the student teacher gradually increases their participation in those activities during the course of the clinical experience. From the lens of situated learning theory, initial educators who participate in a co-teaching model of student teaching may be better prepared to lead their own classrooms because they have been more deeply and frequently engaged in learning to teach during the clinical experience than their traditional student teaching model peers.

Another area of difference between the two models addressed by situated learning theory is the emphasis on collaborative feedback and reflection. In the co-teaching framework, continuous and real-time feedback are encouraged through the co-teaching process. “Coteaching affords opportunities for feedback in situ, aligning the coteaching model more closely with sociocultural theories where learning opportunities are afforded during an authentic context” (Soslau et al., 2018, p. 2). Additionally, the co-teaching model is intentional in making collaborative reflection part of the co-planning process; in this way, the invisible is made visible as teaching teams discuss the rationales behind various instructional decisions (Heck & Bacharach, 2014). This reflective process is also integral in helping student teachers move through the three levels of development outlined by Korthagen (2010), better enabling them to become experienced and effective teachers. In the traditional model of student teaching, this type of collaborative feedback and reflection is not a given, particularly during the teacher

candidate's solo lead teaching period. Student teachers in this model "may base their pedagogical decisions based on their interpretation of clinical educators' unexplained decisions resulting in mimicry without a deep understanding of clinical educators' rationales" (Soslau et al., 2018, p. 2). From the lens of situated learning theory, initial educators who participate in a co-teaching model of student teaching may be better prepared to lead their own classrooms because they have engaged in collaborative reflective discussions with their cooperating teachers regarding instructional decisions, both in real-time and in co-planning sessions.

A third area of difference between the two models highlighted by situated learning theory is the power dynamic between the cooperating teacher and student teacher. The co-teaching model seeks to intentionally destabilize this power imbalance through teacher team training, the acknowledgement of shared expertise in co-planning, and the acceptance of dual roles as teacher and teacher learner (Heck & Bacharach, 2014). In this framework, the "knowledgeable other" is fluid, and equal participation in planning, instruction, and assessment is encouraged and expected. This ever-changing role between teacher and learner is a way to address issues of power in the participant relationship. In the traditional model, the cooperating teacher is often considered the "all-knowing" member of the team and serves as the student teacher's primary resource in all aspects of their teaching education. Rikard and Veal (1996), outlining the power and influence cooperating teachers hold over student teachers, contended that supportive relationships are more difficult for teams to establish given this power differential. As a result, student teachers may shy away from asking questions or offering their own perspectives in planning and instruction, thereby hampering their own development as a teacher. Using the lens of situated learning theory then may shed light on how initial educators who participate in a co-teaching model of student teaching are prepared to lead their own classrooms because they have

built a sense of agency in their own teaching abilities due to their increased responsibilities and input as an equal member of the teaching team.

Cochran-Smith et al. (2015), in their summary of research on teacher preparation programs, concluded, “This body of research portrays learning to teach as an inherently social activity that occurs within a community of practice through which candidates learn the norms of teaching” (p. 113). This finding supports the use of situated learning theory for this study. Through this lens, I could explore the social aspects and relationships of the clinical experience that initial educators perceived to be most influential in terms of their readiness to lead their own classrooms. In the next chapter, I outline the research design I followed for this work.

Chapter 3: Methodology

This is a bounded case study that employed both qualitative and quantitative techniques. Surveys and semi-structured interviews were used to gather initial educators' perceptions of how their clinical experiences prepared them to lead classrooms on their own. This chapter details how the study was designed and how data was gathered and analyzed so participants' perceptions of their readiness for the classroom based on their clinical experience framework (co-teaching or traditional) could be explored. The chapter begins with a discussion of my ontological and epistemological positions. Next, I describe the study's research design, including the population/sample and protection of human subjects. Then I provide an outline of the study's implementation, including a timeline of the data collection and analysis. Following this, I outline how I addressed issues of validity and reliability in my research, as well as summarize my presentation of the findings. The chapter concludes with a discussion of the limitations of the study.

Reflexivity - Ontological and Epistemological Positions

As my research question centers on how new teachers learn their craft through the clinical experience, it is important to share my ontological understandings of the world and make explicit the preconceptions and beliefs I brought to the study and how those perspectives influenced all aspects of the study's design, data collection, analysis, and reporting of findings. Here, I draw from Scotland (2012), who identified relativism as the ontological position within the interpretive paradigm. Reality is subjective and differs from person to person; it is individually constructed through people's interactions with the world around them. This ontological perspective fits this research because I collected the stories and perspectives of individual initial educators, focusing on their perceptions of how their clinical experiences

prepared them to lead their own classrooms. Their experiences, and their perspectives of what they took from those experiences, were individual and subjective.

My epistemological position is situated on the reflective end of Sleeter's (2005) continuum of teachers' epistemological beliefs: absolutist beliefs (knowledge is fixed and certain), relativist beliefs (knowledge rests on personal opinion and individual experience), and reflective beliefs (knowledge is situated within the context in which people create it). In this study, the social context and learning environment played an integral role in student teachers' learning experiences. This epistemological perspective is in line with the interpretive research paradigm as described by Scotland (2012). He stated that the interpretive epistemology is one of subjectivism. "Knowledge...[is] constructed in and out of interaction between humans and their world and [is] developed and transmitted in a social context" (Scotland, 2012, p. 12). These ontological and epistemological perspectives framed not only my views on how the study participants approached learning within their clinical experiences, but also my interactions with them to unpack how the clinical experience framework affected their perceptions of their readiness for the classroom.

As evidenced by my theoretical discussion of situated learning theory (Lave & Wenger, 1991) and its place in the co-teaching model of student teaching in Chapter 2, I entered this research project with a deep belief in the potential power of this social learning framework for new teachers. I needed, however, to be cautious about how that perspective colored my development of the research project and my interactions with the participants. For example, in conducting interviews with participants, I had to be cautious about formulating questions that unintentionally led participants to respond in a way that was reflective of my own beliefs in the social context of learning. Additionally, as I moved to analyzing the qualitative data from the

interviews, I had to approach the analysis in such a way that I was not simply looking for themes that supported my epistemological and ontological stances. Thus, my epistemological and ontological beliefs, as well as my involvement as an insider in the Farnham co-teaching pilot program outlined in the Introduction, played a role in the development, implementation, and analysis of this research project. I tried to minimize these effects, but, as Merriam and Tisdell (2016) argued, researcher reflexivity throughout the research process is necessary, as one must be transparent about their own potential biases, dispositions, and assumptions and how those shaped all aspects of a study.

Research Design – Bounded Case Study

A bounded case study methodology was employed for this study. Creswell (1998) defined the approach as “an exploration of a ‘bounded system’ or a case (or multiple cases) over time through detailed, in-depth data collection involving multiple sources of information rich in context” (p. 61). As the goal of this study was to explore the learning experiences of participants under their differing clinical experience frameworks (co-teaching or traditional), this approach allowed for the contextual differences between and among the participants to come to the fore. One advantage of a case study approach to research is that the design is particularly suited to situations in which it is impossible to separate the variables of the phenomenon being studied from their context (Merriam & Tisdell, 2016). In this study, the research focused on the effects of the clinical experience framework on participants’ perceived readiness for the classroom, so it was impossible to isolate that variable without considering the countless other factors that play into student teachers’ learning during the clinical experience (e.g., cooperating teacher experience, school culture, student population, etc.). Thus, by employing a case study approach,

I was better able to detail the contexts in which participants' learning took place, thereby improving the generalizability of the study for potential readers.

In considering Creswell's (1998) aforementioned definition of a case study, it is necessary to outline the *bounded system* for this study; Merriam (1998), in fact, stated that "fencing in" that which is to be studied is the most crucial aspect of any case study. The bounded system is bounded by time and place (Creswell, 1998). For this study, each participant was an individual case bounded by time (the end of their clinical experience to the end of their third month as a teacher of record in their first classroom) and place (the schools and classrooms in which they taught). The focus of each case was the participant's perception of how their clinical experience model prepared them to lead their own classroom. The multiple cases were analyzed and compared to address the research question, thereby creating a collective case study made up of the individual cases studied. Figure 2 provides a visual graphic of this collective case study.

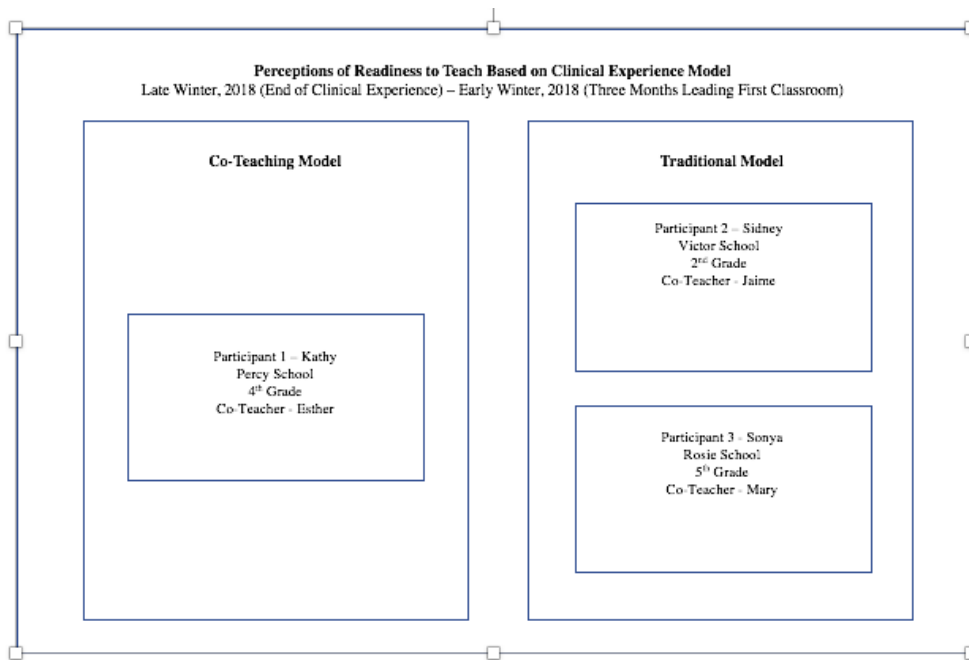


Figure 2: A Visual Representation of the Collective Case Study

Quantitative and qualitative techniques were used within this case study. Participants completed an online readiness survey focused on teacher preparedness at two points in time: 1) the end of their clinical experience, and 2) the sixteenth week of their classroom experience as a teacher of record. After the surveys had been analyzed at each point, teachers in the study took part in one-on-one interviews. Interview questions were developed based on the findings from the surveys, which allowed participants to voice their insights and beliefs as they related to the survey responses, thereby providing a more nuanced understanding of the participants' preparation experiences.

My goal in employing both quantitative and qualitative techniques was to address the *what* and *why* of the research question. In other words, *what* were participants' perceptions of their readiness for the classroom based on their clinical experience model, and *why* did they feel that way? In this sense, the "quantitative and qualitative methods [of the design] complement each other and allow for a more robust analysis" (Ivankova, Creswell, & Stick, 2006, p. 3). Solely collecting quantitative data about participants' perceptions of readiness for the classroom based on their clinical experience would have run the risk of losing their voices and insights about the process. Likewise, solely collecting qualitative data would have run the risk of removing the personalized context of the participants' perceptions of their readiness for the classroom.

Population/Sample

Quota sampling was used to select the participants for this study. The benefit of this sampling technique, a non-probability strategy, is that it allows the researcher to ensure that a certain characteristic of a population sample is represented to the extent the researcher desires. The researcher is able to collect and compare different perspectives on an issue based on

relatively similar-sized groups, allowing for sub-group analysis (Robinson, 2014). This type of sampling is necessary for collective case studies such as this project, as it allows for better generalization of the findings (Creswell, 1998).

For this study, the potential participant pool included 17 student teachers from the Middle Childhood - Early Adolescence (MCEA) education program at Farnham University. All participants completed their clinical experience during the Fall 2017 semester and graduated in December of 2017, though their clinical experiences continued into January of 2018. Using an Institutional Review Board (IRB)-approved recruitment script, I asked for the voluntary participation in this study of the MCEA student teachers at one of their weekly cohort meetings in December of 2017. Two co-teaching model student teachers volunteered to take part in the study; four traditional model student teachers volunteered to take part in the study as well. Participants who completed the study received a \$100 stipend that came from funds Farnham University received to study implementation of the co-teaching for student teaching model.

I also used an IRB-approved recruitment script to email and call the six participants' cooperating teachers to determine if they would be interested in participating in the study through a one-on-one interview. This was done to obtain an additional perspective of how the clinical experience models affected teacher candidates' preparation for the classroom. Two of the six cooperating teachers (one from the co-teaching model and one from the traditional model) agreed to participate in the study. They received no compensation for their participation.

Shortly after the study began, one of the co-teaching model student teachers and two of the traditional model student teachers chose to withdraw from the study. In all three situations, the participants identified the overwhelming nature of first-year teaching as the reason for withdrawing from the study.

Protection of Human Subjects

As this study involved the participation of initial educators and cooperating teachers, it was necessary that I comply with legal protections for research involving human subjects. The IRB granted approval for this study on November 20, 2017.⁵ Although my work with participants concluded in December of 2018, the IRB approval extended to June 1, 2019, so I could complete analysis of the data.

Research Plan and Timeline

As I used participants' survey responses to develop the questions for my semi-structured interviews, I divided my research plan and timeline into separate phases, which are described herein. Within each phase, I describe the measures, procedure, and analysis employed to complete this study.

Phase I – The InTASC Readiness Survey (IRS): Weeks of January 15 and May 14, 2018.

Measures. All study participants completed an online version of the InTASC Readiness Survey (IRS)⁶ twice during the course of the study. The survey is “a Likert-type instrument that is closely aligned with the 10 InTASC standards [for beginning teachers]” (Capraro et al., 2010, p. 140). The 65-item survey measures beginning teachers' perceived readiness for the classroom in three domains: knowledge, dispositions, and performances (Capraro et al., 2010). Participants read each item and marked the level of preparedness that best described them (ranging from *1 – Not Yet Prepared* to *5 – Well Prepared*). They had one week to complete the survey upon

⁵ The IRB approval letter can be found in Appendix A.

⁶ The IRS (Capraro et al., 2010) can be found in Appendix B.

receipt (I emailed the survey to each participant); individuals were able to save their progress on the survey so it did not need to be entirely completed in one sitting.

Procedure. Participants completed the IRS twice during the Spring 2018 semester: 1) the week of January 15 at the close of their clinical experience, and 2) the week of May 14 during the sixteenth week of their first classroom experience as a teacher of record. I analyzed the responses to inform my questions for the follow-up semi-structured interviews.

Analysis. Participants' responses were entered into an Excel spreadsheet for analysis. For sub-group analysis (co-teaching compared with the traditional model of student teaching), the values were averaged. However, given the small sample size (one co-teaching model participant and two traditional model participants), little significance could be attributed to the resulting values. Individual responses were also analyzed, with outlying responses noted (e.g., if the majority of a participant's responses were in the 4 or 5 range, a response of 1 to a preparedness question was highlighted for follow-up questioning in the subsequent semi-structured interview). The survey responses informed construction of the follow-up semi-structured interviews.

Phase II – Semi-structured interviews: Weeks of January 29, March 26, May 28, and December 10, 2018.

Measures. Based upon analysis of the data gathered from the IRS, questions for semi-structured interviews with participants were developed. "There is a great deal of versatility in the semi-structured interview, and the arrangement of questions may be structured to yield considerable and often multi-dimensional streams of data" (Galletta & Cross, 2013, p. 24). The objective of this type of interview is to guide the participant in sharing their own personal experiences as they relate to the topic of study, thereby providing a more nuanced picture of the

phenomenon of interest. The semi-structured nature of the interview allows for a measure of uniformity across the participant interviews, while also providing the researcher with the latitude to ask clarifying questions, filling in any gaps and/or pursuing any related lines of thought pertinent to the topic (Merriam & Tisdell, 2016). However, one of the potential drawbacks of these types of interviews is interviewer effects. “The interviewer’s expectations, training, and personal characteristics...can influence how respondents interpret and respond to interview questions” (Maruyama & Ryan, 2014, p. 401). The tendency of participants to provide socially desirable answers based on what they think the researcher wants to hear can negatively affect the validity of the study. This is, in fact, one limitation in the study, which is discussed in more detail later in this chapter.

Procedure. In order to minimize interviewer effects, a standardized protocol for the interviews must be established (Creswell & Creswell, 2018). This includes, beyond the set interview questions and data-gathering forms, “standardized probes for additional information, standardized kinds of feedback to respondents, and standardized ways to ask questions” (Maruyama & Ryan, 2014, p. 401). After analyzing the data obtained from the IRS, I developed a list of standard open-ended interview questions (example questions provided below), which focused on findings from the surveys.⁷

- 1) What factors or aspects of your clinical experience do you think influenced your preparation for leading your own classroom?

⁷ The interview protocols for the four rounds of initial educator interviews can be found in Appendix C; the interview protocol for the cooperating teacher interviews can be found in Appendix D.

- 2) What specific instructional skills do you feel most confident about in your own practice?
What do you feel least confident about? Why (what part of your clinical experience supported this)?
- 3) How, if at all, do you see your clinical experience reflected in your work and interactions with students?
- 4) Describe your relationship with your cooperating teacher.
- 5) Describe your ideal clinical experience and how it would prepare you for your own classroom.

Follow up questions were dependent on participants' responses in an effort to follow participants' lines of thinking in greater depth.

Interviews were scheduled for 30 minutes and took place via telephone. I digitally recorded each interview and made notes based on the established protocol. Audio recordings were stored as a digital file on my laptop computer; the laptop was password protected, and the audio files were encrypted using the program FileVault for further security.

A fourth interview (week of December 10, 2018) was added to the study based on the suggestion of one committee member. Although I reached out to the three participants via email and telephone in November and December, the late addition of this request resulted in only one participant responding to my request.

Analysis. Each recorded interview was transcribed, and I analyzed each transcribed interview and my interview notes individually. Merriam and Tisdell (2016) recommended approaching the process with the research question and theoretical framework firmly in mind given the somewhat overwhelming nature of initial coding for analysis, particularly for novice

researchers. Thus, I approached my analysis of the data using Lave and Wenger's (1991) situated learning theory as an initial coding framework.

In Saldana's (2009) description of coding methods, he separated the coding process into two cycles. The first cycle methods are fairly simple and direct, while the second cycle methods are more analytic (Saldana, 2009). Similar to Merriam and Tisdell (2016), Saldana (2009) argued that the coding methods should reflect the purpose of the study, enabling the researcher to cultivate themes and categories that address the research question. With this in mind, I used an initial (or open) coding method for the first cycle, as Saldana (2009) stated that this method is useful for breaking down qualitative data into discrete parts that can be used for comparison. I manually coded the interview transcripts line-by-line, which enabled me to identify general themes between and among the cases, as well as outline the context for each case so the participants' experiences could be described. This first cycle coding resulted in a better understanding of what was significant from the participants' clinical experiences in their preparation for leading their own classrooms (e.g., relationship with the cooperating teacher, school culture, lead teaching opportunities, etc.).

I then used an axial coding method for the second cycle, as Saldana (2009) stated that this method helps to reorganize and synthesize the codes from the initial analysis, determining which codes are dominant and which are less important. This method followed logically from the first cycle initial coding method (Saldana, 2009) and allowed me to develop more meaningful categories related to my research question (e.g., relationship with the cooperating teacher, school culture, and lead teaching opportunities fell under the broader theme of key influences on preparation).

After completing these two rounds of coding, I returned to the interview data to analyze the participants' reflections through the lens of situated learning theory. Specifically, I considered how the initial educators perceived their readiness for the classroom based on their clinical experience model via three main tenets of situated learning theory described in Chapter 2: legitimate peripheral participation, communities of practice, and the power dynamic inherent in the cooperating teacher/student teacher relationship. I manually coded the interview transcripts line-by-line using the three tenets as my lens. In doing so, I was able to identify commonalities and differences within and across the three cases and determine whether the framework of the participants' clinical experiences (co-teaching or traditional) affected the inherently social nature of learning to teach.

Throughout these analytical cycles, I maintained analytic memos, as these reflections further aid in the development and identification of themes and concepts in the data (Saldana, 2009). I also developed a coding manual to organize my coding efforts.⁸

Validity and Reliability

Merriam and Tisdell (2016) stated that validity and reliability are concerns for all types of research, but these concerns can be addressed “through careful attention to a study’s conceptualization and the way in which the data are collected, analyzed, and interpreted, and the way in which the findings are presented” (p. 238). The authors provided strategies for addressing these concerns throughout the research process. One such strategy I employed in this study was data triangulation, using multiple sources of data to inform my findings and conclusions about participants’ perceived preparedness for the classroom based on their clinical experience model. I used the IRS responses, as well as the semi-structured interviews with the

⁸ A copy of my coding manual can be found in Appendix E.

initial educators and cooperating teachers, in my data collection and analysis. These multiple data sources and perspectives helped to ensure greater validity and reliability in my findings (Merriam & Tisdell, 2016).

Another strategy I employed was respondent validation, obtaining feedback from participants regarding my thoughts and findings throughout the research process. Merriam and Tisdell (2016) stated that this strategy helps to rule out the possibility of misinterpretation on the researcher's part, as well as identify potential researcher biases and misunderstandings in the analysis process. Additionally, the sharing of the findings and openness to feedback help to establish greater trust among the participants and the researcher. During the interviews, I stopped periodically to restate what I heard the participants saying in an effort to ensure that their responses and thoughts, not my interpretations of them, were driving the discussion (e.g., "What I hear you saying is...is that correct?"). I also shared the transcripts of the interviews with participants to make sure they felt that the data were representative of their thoughts regarding how the clinical experience framework affected their perceived readiness for the classroom. Finally, after analyzing the interview responses, I shared my initial categories and themes with the individual participants to obtain their feedback and insights about my interpretations. Through these efforts, my goal was to provide a true representation of the participants' perspectives, not my own interpretation of them.

A final strategy I used was "thick description," a highly descriptive and detailed presentation of the context and findings of a study (Merriam & Tisdell, 2016). This strategy helps to address concerns about the transferability of the findings of a qualitative study, particularly one like mine which involves a small sample size. In the presentation of my findings from the study (Chapter 4), I detail the context of each case, as well as provide adequate

evidence for each of the themes derived from my analysis in the form of participant quotes. My goal in providing these thick descriptions was to provide enough context to the study so readers could determine whether the results applied to their own settings.

Presentation of the Findings

In considering the themes derived from my analysis of the interview data, I chose to first present the themes of the situated learning theory coding analysis because that lens provided a window into the participants' experiences and growth as *teachers in action* during their clinical experiences. The participants' perceptions of how their clinical experience prepared them to lead their own classroom as they learned in an authentic classroom environment came to the fore during this analysis. I then chose to present the themes of the open and axial coding analysis because that lens provided a window into the participants' *reflections on the clinical experience*, particularly what skills and knowledge they learned and applied in their subsequent work as licensed teachers. The participants were able to look back on their experiences as a student teacher and consider what aspects of the clinical experience shaped them as an educator. In essence, the presentation of the findings draws a through line, tracing how the participants' socially situated learning during the clinical experience resulted in their perceived readiness for the classroom as they reflected on that critical learning experience. I report these findings in Chapter 4.

Chapter 4 begins with a within-case analysis of each participant in an effort to describe the context of each initial educator's clinical experience. I follow this with a cross-case analysis of the three cases, comparing the participants' reflections on how their specific clinical experience framework affected their perceived readiness for the classroom in order to render a response to the study's research question. Table 3 outlines the themes of this generated data.

		Participant 1 Kathy (Co-Teaching)	Participant 2 Sidney (Traditional)	Participant 3 Sonya (Traditional)
Situated Learning Theory (Reflections on Teaching in Action)	Tenet 1 – Legitimate Peripheral Participation	<ul style="list-style-type: none"> • Gradual instructional engagement • Importance of authentic lead teaching opportunities • Importance of co-instruction and co-planning from co-teaching model 	<ul style="list-style-type: none"> • Gradual instructional engagement • Importance of authentic lead teaching opportunities • Value of reflective conversations 	<ul style="list-style-type: none"> • Gradual instructional engagement • Importance of authentic lead teaching opportunities • Importance of engagement in school activities beyond classroom
	Tenet 2 – Communities of Practice	<ul style="list-style-type: none"> • Wished for more opportunities to collaborate outside the classroom 	<ul style="list-style-type: none"> • Many opportunities to collaborate with school staff members • Felt comfortable seeking out help and resources 	<ul style="list-style-type: none"> • Many opportunities to collaborate with school staff members • Felt comfortable seeking out help and resources
	Tenet 3 – Power Dynamic	<ul style="list-style-type: none"> • Less balanced mentor/student relationship • Lack of duality in learner roles • Positive relationship 	<ul style="list-style-type: none"> • More balanced teacher/teacher relationship • Positive relationship 	<ul style="list-style-type: none"> • More balanced teacher/teacher relationship • Duality in learner roles • Positive relationship
Open and Axial Coding (Reflections on the Clinical Experience – Readiness to Teach)	Theme 1 – Key Influences on Preparation	<ul style="list-style-type: none"> • Lead teaching opportunities • Cooperating teacher 	<ul style="list-style-type: none"> • Cooperating teacher • School culture 	<ul style="list-style-type: none"> • Cooperating teacher • School culture • Involvement in school activities
	Theme 2 – Focused Learning Outcomes	<ul style="list-style-type: none"> • Classroom management strategies • Individualizing instruction through co-teaching strategies • Building student relationships 	<ul style="list-style-type: none"> • Ability to seek out resources • Classroom management strategies 	<ul style="list-style-type: none"> • Building student relationships • Classroom management strategies
	Theme 3 – Reflections on the Perfect Clinical Experience	<ul style="list-style-type: none"> • Gradual instructional engagement • Longer clinical experience, fall start 	<ul style="list-style-type: none"> • Longer clinical experience, fall start • Variety of site placements during program 	<ul style="list-style-type: none"> • Longer clinical experience • More time in the classroom, less coursework • Intentional pairing of student teacher and cooperating teacher

Table 3: Overview of Themes and Evidence from Analysis of the Generated Data

Limitations

Limitations in any study design complicate the potential findings. In this study, readers should be aware of two limitations, the first being the small number of participants in this study. In part, this was a result of my focus on Farnham's MCEA program. Adding another program would have introduced a different course preparation sequence. By focusing the study on one cohort in one semester, I was able to create a bounded system for the case study. That said, it also limited the number of original participants. This number dwindled, in part, because of the inherent challenges of being a first-year teacher, which have been outlined extensively in research literature (e.g., Dias-Lacy & Guirguis, 2017; Fantilli & McDougall, 2009; Moir, 1990). Many of the student teachers in the original potential participant pool were hesitant to participate in the study as they felt they would not have time to complete the necessary requirements. Additionally, as mentioned earlier, three participants withdrew from the study at the beginning of the research phase, citing their concerns about balancing their classroom workload with their participation in the study. The small number of participants, however, allowed me to more feasibly complete the qualitative portion of the study, providing a more complete view of participants' perceptions of their readiness for the classroom based on their clinical experience model. While the small sample size limits any generalizability of the study's findings, it does offer a springboard of evidence for future research.

A second limitation in this study centers on when the cohort finished their program and my collection of data around their experiences. As the MCEA cohort being studied graduated at the end of the Fall 2017 semester, they were searching for classroom positions in the middle of the school year. It is likely that the only positions available were day-to-day or long-term subbing duties. While the participants were leading classrooms on their own in these positions,

they might not have truly embraced the role of a classroom teacher of record, as one might at the start of the school year (e.g., establishing student connections, sharing expectations with students to develop their own classroom environment, etc.). This potentially affected the lens through which participants viewed their preparedness for the classroom. I attempted to address this limitation by adding a fourth interview with participants in December of 2018, three months into their first experience as a teacher of record in their own classroom (all three participants were hired for full-time classroom positions for the 2018-19 school year), but only one of the participants responded to my requests for the interview.

This research design rendered findings to the research question, “How do initial educators’ perceptions of their readiness for the classroom compare between those who participated in one iteration of a co-teaching model of clinical experience and those who experienced a traditional student teaching model?” In the next chapter, I present the findings of the study based on my analysis of the data collected throughout the research process.

Chapter 4: Findings

This study considered the perceptions of readiness for the classroom of three initial educators based on their clinical experience framework (co-teaching or traditional). As with any collective case study, it is necessary to consider not only the individual context and experiences of each case, but also how those cases connect to illuminate the phenomenon of interest in the study. In this chapter, I begin by providing a within-case analysis of each participant, first detailing the context in which their clinical experience took place and then considering their learning experiences as teachers in action through the lens of three main tenets of situated learning theory: legitimate peripheral participation, communities of practice, and the power dynamic inherent in the cooperating teacher/student teacher relationship. Next, I connect those learning experiences to each participant's reflections on what they perceived as influential and important from their clinical experiences in their preparation for the classroom. Following this within-case analysis, I offer a cross-case analysis of the findings, comparing the initial educators' experiences and reflections and identifying notable commonalities and differences across the cases based on the participants' clinical experience models and their effect on the participants' perceived readiness for the classroom. Finally, I detail how the findings render a response to the study's research question, "How do initial educators' perceptions of their readiness for the classroom compare between those who participated in one iteration of a co-teaching model of clinical experience and those who experienced a traditional student teaching model?"

The Within-Case Analysis: Kathy and Esther, Sidney and Jaime, Sonya and Mary

In this section, I detail the context of each participant's clinical experience setting, as well as analyze each participant's reflections regarding how their clinical experience model affected their perceived readiness for the classroom through the lens of three main tenets of situated

learning theory: legitimate peripheral participation, communities of practice, and the power dynamic inherent in the cooperating teacher/student teacher relationship. Next, I outline the participants' considerations of their learning from the clinical experience and its effect on their readiness to teach, including key influences on their preparation, focused learning outcomes, and reflections on the perfect clinical experience. Direct quotes from the interviews are offered as evidence to support the findings.

Co-teaching case 1 – Kathy and Esther. Kathy is a white female teacher in her early 20s who grew up in a self-described middle class family. She said that she had chosen to enter the teaching profession because she had always enjoyed school and working with kids. Her clinical experience took place in a fourth grade classroom in Percy School, a PK-8 school in GPS that served as one of the pilot schools in Farnham's co-teaching for student teaching program study. The school is located on the south side of the city and serves a student population that is 69% Hispanic, 14% White, 11% Black, 3% Asian, and 2% American Indian. Eighty-nine percent of the students in Percy are eligible for free or reduced lunch. There were 26 students in Kathy's classroom, eight of whom were categorized as English language learners (ELL).

Esther was Kathy's cooperating teacher. She has been a fourth grade classroom teacher at Percy for 25 years, and she has been hosting student teachers from Farnham University for over ten years. While Esther had originally signed up to be a part of the co-teaching pilot program, she had missed the initial two-day orientation session provided by Farnham and GPS in the summer of 2015 due to family health issues. Esther had attended the subsequent abbreviated co-teaching training sessions provided by the Farnham research team at the beginning of each semester. In discussing the co-teaching model of student teaching, she identified the increased co-planning time and use of the seven co-teaching strategies as benefits of the framework in

comparison to her previous work with student teachers in the more traditional model. However, as outlined in the next paragraph, Esther was hesitant to implement all parts of the co-teaching model.

In describing Kathy's engagement in the classroom over the semester, both team members outlined a more traditional approach to the clinical experience, in which Kathy was slowly and gradually given more responsibilities in her work with the students. Kathy described it thus:

I started with one subject, then picked up another, and then, like, halfway through, maybe a little bit sooner, I was teaching, you know, half a day, and then December came, and it was the two full weeks [Farnham requires its student teachers to fulfill the role of lead classroom teacher for at least two weeks during their clinical experience], and then after that, I gradually started giving subjects back to [Esther]. (Co-Teaching Case 1 – Kathy, February 14, 2018)

Esther maintained that it was more conducive to preparing Kathy for leading her own classroom. In reflecting on this more traditional approach to engaging her student teacher in working with students, she said:

When [student teachers] come in, they're more dependent on [the cooperating teacher] for absolutely everything, and there's so much of the rigor of teaching and stuff like that that I think they need a lot of the one-on-one...and then toward the end, they need to have that independence because when they get out there, classes aren't gonna be with someone else in the classroom. (Co-Teaching Case 1 - Esther, February 16, 2018)

It is important to note this aspect of Kathy's clinical experience, as it points to the fact that this study is not comparing a clear representation of the co-teaching model of student

teaching as described by Heck and Bacharach (2014) and the SCSU model. Rather, a more “hybrid” iteration of the model is presented, combining elements of both the traditional and co-teaching frameworks. The implications of Esther’s sense-making are discussed in greater detail in Chapter 5, but it bears attention here before a deeper analysis of the cases.

After becoming a licensed teacher, Kathy’s first job was an elementary-level substitute teacher in a suburban public school district in a Midwestern state. According to her, she led small- and full-group instruction using the lesson plans left for her by the classroom teachers, but she said that she was often able to incorporate her own teaching techniques as well. She taught in a variety of grade levels (K5-5) at four different schools in the district. At the end of the school year, she accepted a full-time third/fourth mixed-grade classroom teacher position at one of the elementary schools in the same suburban district for the 2018-19 school year.

Throughout our interviews, Kathy maintained that she felt very prepared for the classroom by her clinical experience at Percy. In reflecting on her first days of substitute teaching after her time at Percy, she said, “I felt very confident, more confident than I was expecting myself to feel, but I felt good. And I feel like Percy, my experience at Percy, really helped me move in the right direction” (Co-Teaching Case 1 - Kathy, April 17, 2018). From the lens of situated learning theory, with its emphasis on the physical and social contexts in which learning takes place (Lave & Wenger, 1991), Kathy identified her two-week lead teaching period and her relationship with Esther as highly influential in her preparation. Her reflections on the importance of these aspects of her clinical experience and the co-teaching model of student teaching are broken down through the three tenets of situated learning theory.

Legitimate peripheral participation in Kathy and Esther's relationship. In considering her engagement in the classroom, Kathy outlined a gradual increase in instructional responsibilities during the course of the semester. Recall, her statement shared earlier:

I started with one subject, then picked up another, and then, like, halfway through, maybe a little bit sooner, I was teaching, you know, half a day, and then December came, and it was the two full weeks, and then after that, I gradually started giving subjects back to [Esther]. (Co-Teaching Case 1 – Kathy, February 14, 2018)

In terms of legitimate peripheral participation, Kathy, as her responsibilities increased, gradually moved from partial participation in her learning community to full participation during her two-week lead teaching period. The skills and strategies she learned through her increased participation in the community helped her to understand what being a classroom teacher entailed (e.g., lesson planning, classroom management, and parent contacts), but it was ultimately her solo lead teaching time that she felt was most influential in her preparation:

I really was in charge, and I feel like those two weeks, they were very difficult, but I feel like those weeks really prepared me to be on my own, and like, now with subbing, [the] majority of the time it's just me in the room with the kids, and I feel fine! I mean, I'm sure it'll be a bit different when I'm the one in charge planning the lessons and it's my own room, but I'm going into it feeling good. I feel prepared for it. (Co-Teaching Case 1 – Kathy, June 15, 2018)

Kathy felt strongly that the gradual engagement timeline she and Esther followed was necessary for student teacher success in the clinical experience. She stated that her full participation in the classroom right from the start of the semester, as outlined in a true co-teaching model of student teaching, would have been overwhelming.

As mentioned earlier, this aspect of Kathy's clinical experience framework mirrored more of a traditional approach than the co-teaching approach, in which she would have been fully engaged in co-planning, co-instruction, and co-evaluation throughout the semester (Soslau et al., 2018). This is an important deviation from the co-teaching model to note, as one of the arguments proponents of the framework offer is that teacher candidates are more fully engaged in the actual act of teaching throughout the semester, not just silent observers for portions of the experience, thereby improving their learning and preparation (Bacharach et al., 2010). From the perspective of legitimate peripheral participation, student teachers in the co-teaching model spend increased time as full participants in the classroom learning community, thereby gaining a greater understanding of what it means to be a causative member in that community (Lave & Wenger, 1991). This consistent full participation was not the case in this particular iteration of the co-teaching model, yet Kathy felt that her gradual engagement in the classroom adequately prepared her for her role as a classroom teacher. It is unclear whether she would have felt differently if she participated in a true co-teaching framework during her clinical experience.

In considering the specific co-teaching model employed by Kathy and Esther in this study, the teaching team stated that co-instruction and co-planning were the most influential aspects of the co-teaching model that helped Kathy move from the periphery towards the center in her own learning and preparation:

I think just actually teaching, like co-teaching with [Esther] and...getting to jump in and take over little parts of the lesson, I'd say that was helpful cuz I know a lot of my previous clinical placements, the teacher did all the teaching. I kind of just sat in the back, but with Esther, I, you know, I was up and interacting with the students and

jumping into the lesson when needed. So, I'd say that was really helpful and beneficial.

(Co-Teaching Case 1 - Kathy, February 14, 2018)

In terms of the co-planning, Kathy and Esther stated that their discussions allowed Kathy to build a better understanding of how to differentiate and use multiple instructional strategies to meet the needs of the learners in the classroom. From the perspective of legitimate peripheral participation, these aspects of the co-teaching model speak to Kathy's full participation in her learning community, building an understanding of teaching through her authentic involvement in teaching and planning in a classroom context. However, it is again necessary to note that Kathy's experiences in these areas, while attributed to the co-teaching model by the team, closely mirrored the experiences of student teachers in a traditional framework given the instructional timeline followed by Kathy and Esther. It is possible that the authentic learning she experienced through her placement was similar in many respects to the experiences of her peers in traditional models.

Communities of practice in Kathy and Esther's relationship. Throughout our interviews, this tenet of situated learning theory was an area that Kathy returned to as lacking in her clinical experience. While she valued her relationship with Esther, she wished that she had been able to collaborate with more people outside of their classroom. When discussing the ideal clinical experience, Kathy talked about the need for opportunities to move beyond the classroom walls:

I would say...having to maybe collaborate with other teachers from [your] grade level so you could learn how to work as a team...sitting in on the meetings, like, the staff meetings when it's, like, the whole school...cuz that's what you're gonna have to do in

the real world as a teacher, so I know I didn't really do that...so that's one thing. (Co-Teaching Case 1 - Kathy, April 17, 2018)

This aspect of Kathy's clinical experience may have been more a result of Percy's approach to classroom placement than anything else. Kathy and Esther stated that the administration generally split students with special needs and ELL students between grade-level classrooms, with one classroom getting all students with Individualized Education Programs (IEPs) and one classroom getting all students with language support services. In this case, the ELL students had been placed in their classroom, so they rarely planned with the other grade level teacher, as she was often planning with the special education teacher. In addition, the ELL support teacher was stretched across three GPS schools, so they were rarely able to plan with her either. As outlined later in the other two cases in this study, the participants found great value in the collaborative relationships they developed with the support teachers in their schools, but Kathy did not have this opportunity.

Lave and Wenger (1991) did not identify a minimum number of participants necessary for a community of practice, so it is feasible to identify Kathy and Esther's classroom as such, particularly based on the authors' assertion that members of a community of practice are mutually engaged and accountable for helping the newcomer (student teacher) to move towards the center of the community as they take on more responsibilities in their work. This was certainly the case with Kathy and Esther. However, the value of multiple community members supporting newcomers, particularly school staff members supporting student teachers during their clinical experiences, has been documented in education research (Capraro et al., 2010; Ronfeldt & Reiningger, 2012; Yost, 2006), and it is something that Kathy identified as lacking in

her own clinical experience. Therefore, it is an important perceived absence to note in this case, particularly from the perspective of situated learning theory.

While Kathy participated in an iteration of the co-teaching model of student teaching, it is difficult to attribute her perceived absence of a community of practice to the specific framework. The model focuses mainly on the relationship between the student teacher and cooperating teacher; it does not address components of the school placement in general, such as developing relationships with staff outside classroom walls. It could be argued that the co-teaching framework puts too much emphasis on this classroom team relationship at the expense of collaboration with other educators in the building, but research on the co-teaching model of student teaching shows that teacher candidates in co-teaching frameworks report higher levels of collaboration skills than their peers in traditional frameworks (Bacharach & Heck, 2012). As such, this may simply be a case of Percy's approach to student placement hampering Kathy's collaboration opportunities, as opposed to the co-teaching framework preventing her from working with others outside her classroom.

Power dynamics in Kathy and Esther's relationship. During our interviews, Kathy frequently discussed how influential Esther was in her preparation for the classroom. In reflecting on their relationship, she returned often to the consistent support and guidance Esther provided:

Esther was a very good mentor, and she gave me really good feedback...it was definitely more of, like, a mentor and student relationship rather than, like, two teachers that are too close in age and, like, too friendly. So, I feel like I learned a lot from her during that time...she was there to support me when I needed that, which I really appreciate. (Co-Teaching Case 1 - Kathy, February 14, 2018)

Esther shared this view of herself as a mentor, saying that it was her responsibility to “guide [student teachers] through things, help them through the ups and downs of being in a classroom” (Co-Teaching Case 1 - Esther, February 16, 2018).

From the lens of situated learning theory, an important aspect of the student teacher/cooperating teacher relationship is the balanced roles of teacher and learner embraced by the participants (Lave & Wenger, 1991). For the co-teaching model of student teaching in particular, Roth and Tobin (2004) outlined the value of the team members viewing themselves as co-learners; the traditional power relationship between the cooperating teacher and student teacher is weakened, enabling both people to learn together from the shared experience. Kathy and Esther’s description of their relationship as “mentor and student” within their co-teaching framework seemed at odds with this mutual role-taking, and their responses to further questioning on the topic revealed a desire to move in that direction, but not a truly balanced relationship.

For example, Esther, in reflecting on the co-teaching model of student teaching and her role as learner within the framework, said that “student teachers [in the co-teaching model] actually bring stuff to the table, in my opinion. They have a lot more, maybe the updated stuff that they bring onto the table to, you know, input into the classroom” (Co-Teaching Case 1 - Esther, February 16, 2018). When I asked for an example, Esther briefly mentioned a website or link from one of her previous student teacher’s university courses, but then moved into how dependent her teacher candidates were on her, particularly due to her experience as a classroom teacher:

I definitely gave [Kathy] everything I have, and I told her everything I can, and it’s up to [the student teacher] to receive it, and I’ve had student teachers that...I would tell them,

and they would literally turn around and do the opposite thing, and they didn't make it. It's those that, you know, listen, they listen, they understand, and they see the results when I'm up there that they can, you know, see that. (Co-Teaching Case 1 - Esther, February 16, 2018)

Esther didn't see the student teachers' dependence as a weakness; rather, it was a reality of being a novice teacher learning the ins and out of the profession, and it was her role to tell them everything about it. As such, she did not seem to embrace the role of learner in her relationship with Kathy, despite the co-teaching framework, until much later in the semester when Kathy had more experience lead teaching. She was more of the "all-knowing one" common in traditional student teaching model relationships (Heck & Bacharach, 2014). Rikard and Veal (1996) contended that supportive relationships are more difficult for teams to establish when this power differential exists, but it did not appear to adversely affect Kathy's experience and learning, nor her overall relationship with Esther.

Part of this may be due to another important component of the power dynamic in situated learning theory, which is old-timers granting the newcomers access to legitimate participation opportunities within the learning community and trusting their abilities as the newcomers develop their identities as causative members of that community (Lave & Wenger, 1991). As detailed earlier, Esther certainly provided Kathy with authentic opportunities to lead and fully participate as a teacher in the classroom, which enabled Kathy to learn and grow in her role as an initial educator. Kathy felt that Esther trusted her and was there to support her, and this built her confidence in herself as a teacher. While Kathy and Esther may not have embraced the balanced power dynamic advocated for by co-teaching model proponents, they still found success with their relationship and Kathy's development as a teacher within the co-teaching framework.

During Kathy's co-teaching clinical experience, she moved from partial to full participation in her learning community through a gradual increase in her teaching responsibilities. She found great value in the community of practice formed through her collaborative work with Esther in the classroom, but Kathy wished that she had been able to work with other educators outside her classroom walls to expand her learning community. Though Kathy and Esther did not demonstrate a fully balanced power dynamic in their working relationship, they both saw the relationship as a positive one that nurtured Kathy's growth and development as a teacher. Next, I outline Kathy's reflections on her learning and key takeaways from her clinical experience and its effect on her readiness to teach.

Kathy's readiness to teach: Her story. In all three interviews, Kathy talked about her solo lead teaching time, particularly the two-week lead teaching period mandated by Farnham, as instrumental in building her preparation for leading her own classroom:

[Esther] really, like, left me in charge. She would leave the room and just be out in the hallway, and I had to learn to handle, you know, little behavioral situations, kids not doing their work, and I think that really helped me out because...she wasn't there. I had to do it on my own, so that was a good learning experience. (Co-Teaching Case 1 - Kathy, February 14, 2018)

Even when discussing the benefits of the co-teaching model of student teaching, Kathy returned consistently to the opportunities she had to lead teach on her own:

The co-teaching was really helpful at first, but then when my cooperating teacher had to step back and I was in charge, that really, it was a big change. But after that, I was like, "Okay, if I can do this for two weeks, like, I think, I think I'll be okay." (Co-Teaching Case 1 - Kathy, February 14, 2018)

As discussed earlier, it is important to note Esther's decision to break from the co-teaching model in terms of Kathy's two-week lead teaching period. In the co-teaching model outlined by SCSU, Heck and Bacharach (2014) stated that during a teacher candidate's mandated lead teaching period, the cooperating teacher should remain in the classroom and take direction from the student teacher, maintaining a co-teaching approach to instruction. In the iteration of the co-teaching model presented in this study, Esther was not present in the classroom during Kathy's lead teaching time, and Kathy felt like her absence benefitted her growth and confidence as a teacher. It is unclear whether she would have felt the same way had Esther still been present in the classroom, albeit in a more deferential role, as outlined in a true co-teaching model of student teaching.

In two of the three interviews, Kathy also talked about Esther as highly influential in terms of her readiness for the classroom:

I loved Esther. I loved working with her. Esther was a very good mentor, and she gave me really good feedback. I feel like I learned a lot from her during that time...she was there to support me when I needed that, which I really appreciate. (Co-Teaching Case 1 - Kathy, February 14, 2018)

The importance of this student teacher/cooperating teacher relationship is in line with the findings of Oh et al. (2005), Ronfeldt and Reinger (2012), and Yost et al. (2006). Student teachers who are paired with quality cooperating teachers and given opportunities to develop a strong relationship with them report higher feelings of confidence and self-efficacy in terms of their own abilities as teachers. The cultivation of this relationship is a primary focus of the co-teaching model of student teaching, particularly in terms of team-building opportunities before the school year begins (Heck & Bacharach, 2014). Kathy and Esther participated in the

abbreviated orientation session provided by the Farnham research team at the beginning of the semester, which included some of the team-building activities recommended by SCSU. It is possible that this provided the foundation for a strong team teaching relationship, which Kathy benefitted from in terms of her own preparation.

When discussing Kathy's primary takeaways from her clinical experience in terms of her preparation for her own classroom, she discussed classroom management in all three interviews:

I came out of Percy totally different, with a totally different classroom management style. I feel a lot more confident with that now. I had to be a little more tough at Percy, and now I know that I can handle different types of students. (Co-Teaching Case 1- Kathy, April 17, 2018)

Kathy outlined ways she applied those classroom management strategies to her work as a substitute teacher, such as frequent personal check-ins with students throughout the day. Classroom management is frequently identified by initial educators as an area in which they struggle (MetLife Survey of the American Teacher, 2005), so it makes sense to connect Kathy's learning about classroom management through her clinical experience to her strong feelings of preparedness for the classroom.

Kathy also mentioned individualized instruction as a key takeaway from her clinical experience in all three interviews:

I feel like teaching content to many types of learners, differentiating my instruction, just for those kids that might need a little extra assistance, the English learners, or those higher-level learners that need, just, a little bit more out of the lesson. I feel like, I feel like that was really helpful. (Co-Teaching Case 1- Kathy, June 15, 2018)

This was an area in which Kathy specifically identified the co-teaching model as beneficial in her development. In particular, co-planning with Esther and their utilization of the seven co-teaching strategies outlined by Heck and Bacharach (2014) in their work with students provided her with multiple approaches and ideas for meeting the needs of all learners in the classroom. Kathy's use of this learning in her work as a substitute teacher reflects the findings of Lee et al. (2010) and Ronfeldt and Reininger (2012), who connected effective learning in clinical experiences to initial educators' application of high-quality teaching practices in their subsequent work as teachers in their own classrooms.

A final takeaway that Kathy identified in two of our three interviews was the importance of building relationships with students in the classroom:

Just the time I took to get to know the kids at Percy. Now, when I briefly interact with kids subbing, and...when I learn something about them and I remember that, like, later on in the day and mention it, they get really excited. So just that connection that I made with the kids at Percy, making those connections with the kids during subbing, I could tell that they really like that. (Co-Teaching Case 1 - Kathy, April 17, 2018)

As Kathy discussed this aspect of her preparation throughout our interviews, it was unclear whether making connections with students was something she learned through her time at Percy or if it was innate in her own approach to teaching. For example, she said that she took it upon herself to eat lunch with a different group of her students two or three times per week during her clinical experience, which she enjoyed as it allowed her to get to know the children on a more personal level. The importance of the student/teacher relationship is prevalent in education research (Hattie, 2012), so Kathy's learning in this area was critical. However, it may be the

case that she already understood this aspect of teaching upon entering Percy, and her experiences throughout the semester simply confirmed the importance of that area of her instruction.

In considering how the clinical experience could best prepare a student teacher for their role as a classroom teacher, Kathy maintained throughout our conversations that the format and timeline she and Esther followed, outlined earlier (gradually increasing her instructional responsibilities and engagement with students throughout the semester), was ideal. “The way that we did it was nice. I thought that that was really smart to do it that way instead of just throwing everything at me. Like, I don’t think I would have been able to do that” (Co-Teaching Case 1 - Kathy, February 14, 2018). Kathy was aware that this was a break from a true co-teaching model of student teaching, but she felt this more traditional approach allowed her to better engage by getting to know the students first before moving into her instructional role in the classroom. She also felt that the solo lead teaching time in the more traditional model was integral to a student teacher’s preparation, as it allowed them to get a sense of what it would be like to lead the classroom on their own.

The only parts of the co-teaching model of student teaching that Kathy said she would recommend for the clinical experience were the co-teaching strategies, which she felt she could use in her own classroom with the support of a special education teacher or a teacher’s aide, and the co-planning sessions, which helped her consider multiple perspectives and strategies for teaching different learners. Overall, though, she saw little transfer from the co-teaching model of student teaching to her subsequent work as a substitute teacher, mainly because she rarely had another adult in the classroom with her.

A final recommendation for the clinical experience that Kathy brought up in multiple interviews was the length and timing of the experience. Specifically, she felt that a fall start was

necessary for student teachers so they had a sense of what went into the preparation for a school year. “[Fall student teachers] got to go to those, like, trainings that were at the beginning of the school year, so that helped really familiarize me with the school...so that was one thing that I feel is good” (Co-Teaching Case 1 - Kathy, April 17, 2018). Research shows that the beginning of the school year can be a significant challenge for initial educators as they struggle to navigate the multitude of responsibilities placed upon classroom teachers (Lundeen, 2004), so Kathy’s perspective supports the value of a fall placement, as the timing enables student teachers to gain a better understanding of what beginning of the year preparation entails.

In Kathy’s reflections on her co-teaching clinical experience and its effect on her readiness to teach, she identified her solo lead teaching time and her cooperating teacher Esther as highly influential on her perceptions of readiness for the classroom. Her key takeaways from the experience included classroom management, the ability to individualize instruction, and the importance of making connections with students. Kathy’s recommendations for an effective clinical experience in terms of preparing teachers for the classroom included a gradual increase in instructional responsibilities throughout the experience, as well as a fall start. Next, I present the second case in the study, a traditional model of student teaching.

Traditional case 1 – Sidney and Jaime. Sidney is an Asian-American female teacher in her mid-20s who grew up in a self-described lower middle class family; both her parents are immigrants. Sidney had initially planned to complete a pharmacy program at another college in the Midwest, but she transferred to Farnham to become a teacher due to her third grade teacher. Her family had moved from an inner city to a suburban location during that time, and her teacher had gone to great lengths to make her feel cared for as a new student. Sidney hoped to share that sense of community and kindness with her future students, just as her third grade teacher had

done for her. Her clinical experience took place in a second grade classroom in Victor School, a PK-8 school in GPS. The school is located on the south side of the city and serves a student population that is 50% White, 33% Hispanic, 9% Asian, and 8% Black. Forty-nine percent of the students in Victor are eligible for free or reduced lunch. There were 22 students in Sidney's classroom, seven of whom were categorized as students with special needs. Sidney's cooperating teacher was Jaime, a second grade classroom teacher at Victor for 17 years. She has been hosting student teachers from Farnham University for three years.

In describing Sidney's engagement in the classroom during the course of the semester, both teachers outlined a traditional approach to the clinical experience, as Sidney was gradually given more responsibilities in her work with the students:

So right from the start, I was able to teach Second Step, which is, like, an emotional social skill program...and then, as the weeks progressed, I was able to take on more subjects. Per Farnham University, I had to teach a half, a full week of half days...and then I, I think, a couple weeks after that, I had two full weeks, so from the beginning of the day to the end, I was leading the kids through transitions and going from lesson to lesson. So just two full weeks, and then it kind of tapered off after that. (Traditional Case 1 - Sidney, February 27, 2018)

Jaime added that she attempted to provide more opportunities for Sidney to lead teach beyond Farnham's recommendations, especially with her in the classroom as the cooperating teacher, as she found great value in the lessons student teachers gleaned from those independent experiences and the feedback they received from her in terms of their preparation for the classroom:

We let [Sidney] lead more than she was supposed to so she was ready for those two weeks and because I think when [student teachers] get more of an opportunity to do that

with me in the room and being able to say, “Okay, here’s what maybe you should do different next time. Here’s what you, here’s where your strengths [were], here were your weaknesses,” those kinds of things...because once you do those two weeks, we’re not in the room to give any feedback to anybody. (Traditional Case 1 - Jaime, February 13, 2018)

After becoming a licensed teacher, Sidney’s first job was a kindergarten and first grade guided reading specialist at a Catholic elementary school in Gallagher. She led small-group literacy lessons for students and provided extra support for struggling readers in their classrooms. This was a full-time position, so she was at the school working with students five days per week. At the end of the school year, she accepted a full-time first grade classroom teacher position at a rural public elementary school in a Midwestern state for the 2018-19 school year.

Sidney stated throughout our interviews that she felt prepared for the classroom by her clinical experience at Victor. In reflecting on her first weeks as a guided reading specialist, she said, “I felt very prepared. I think Jaime did a good job of being my cooperating teacher, and I felt comfortable going into [my first teaching position]” (Traditional Case 1 – Sidney, April 4, 2018). From the lens of situated learning theory, with its emphasis on the physical and social contexts in which learning takes place (Lave & Wenger, 1991), Sidney identified her relationship with Jaime and the school culture at Victor as highly influential in her preparation. Her reflections on the importance of these aspects of her clinical experience and its framework (the traditional model of student teaching) are broken down through the three tenets of situated learning theory.

Legitimate peripheral participation in Sidney and Jaime's relationship. In discussing her instructional engagement in the classroom, Sidney outlined a gradual increase in teaching responsibilities during the course of the semester. As shared earlier:

So right from the start, I was able to teach Second Step, which is, like, an emotional social skill program...and then, as the weeks progressed, I was able to take on more subjects. Per Farnham University, I had to teach a half, a full week of half days...and then I, I think, a couple weeks after that, I had two full weeks, so from the beginning of the day to the end, I was leading the kids through transitions and going from lesson to lesson. So just two full weeks, and then it kind of tapered off after that. (Traditional Case 1 – Sidney, February 27, 2018)

In terms of legitimate peripheral participation, Sidney gradually moved from partial participation in her learning community to full participation throughout the semester. The skills and strategies she learned through her increased participation in the community helped her to understand what being a classroom teacher entailed (e.g., flexibility during instruction, lesson planning, and classroom management). However, Sidney felt that it was the moments in which she was leading the class on her own that truly shaped her development as a teacher:

[Jaime] would always find ways to be out of the classroom during the time that I was teaching, which I didn't think would make a difference, but I think I almost taught better without her there. And I think, again, it was just, like, the confidence level. I think that all of that practice gave me a chance to really find my, I think, philosophy and kind of practice that before I was actually in charge of students. (Traditional Case 1 – Sidney, April 4, 2018)

Related to this, Jaime shared in our discussion that she frequently gave Sidney opportunities to lead beyond the recommended timeline provided by Farnham because she saw such value in the learning student teachers took from their lead teaching experiences. “I find that the [student teachers] that...just watch what I do, it doesn’t tend to always be successful because what works for me doesn’t work for everybody” (Traditional Case 1 – Jaime, February 13, 2018). This perspective speaks to Lave and Wenger’s (1991) assertion through situated learning theory that learning focuses on activity in and with the environment, not simply observation and imitation. In order for Sidney to become a causative member of the learning community, she had to fully participate as a teacher and learn from those experiences. Jaime worked to provide Sidney with more of those opportunities.

Jaime also added that in her conversations with Sidney, she would find ways to help her reflect critically on her own work and growth. She talked about the importance of helping student teachers to “look at, at themselves critically, to say more, you know, ‘Well, how did you think that went?’ instead of me telling them how it went” (Traditional Case 1 – Jaime, February 13, 2018). This approach speaks to Korthagen’s (2010) model of teacher development, which ties situated learning theory to teacher pedagogy. While student teachers move from observation on the periphery to more legitimate active participation in the center, they must be provided with reflective opportunities to become consciously aware of their experiences and actions, tying those to how to act in particular situations in the classroom once they move beyond the clinical experience (Korthagen, 2010). Through her reflective approach in their discussions, Jaime helped Sidney do that, thereby improving her readiness for leading her own classroom.

Sidney’s gradual increase in instructional responsibilities throughout the semester certainly falls in line with a traditional model of student teaching, but the additional opportunities

Jaime gave her to lead teach beyond the standard timeline provided her with more opportunities to engage in the work of an educator. She was granted greater access to legitimate participation at the center of the learning community. Even with these additional opportunities, both Sidney and Jaime felt that increasing the length of the clinical experience would benefit student teachers as it would enable them to further understand and experience the dynamics of a full school year. That being said, Sidney stated that through the framework she and Jaime followed, she felt prepared for her subsequent classroom role as a lead teacher.

Communities of practice in Sidney and Jaime's relationship. Throughout our interviews, this was a tenet of situated learning theory that Sidney frequently returned to as a strength in her clinical experience at Victor. She felt that the culture at Victor and the collaborative relationships she formed with staff there greatly influenced her preparation and development as a teacher. For example, she often reflected on her relationship with Donna, a special education teacher at Victor who planned and supported students daily in their second grade classroom. “[Donna] was in class and I felt comfortable coming to her with any questions about what [students’] IEP was labeled as, and what accommodations were made for students, which I don’t think you could ever get from a book” (Traditional Case 1 – Sidney, February 27, 2018). Beyond this authentic collaborative learning experience, Sidney said that their relationship helped her in her teaching roles after the clinical experience:

I was able to form a pretty good relationship with [Donna] and ask for help with...how to, like, have lesson plans that were best catered to those students’ needs, and so I think that really helped me not be so intimidated to ask for help from other staff members [at her new school] if I needed it...I think just, like, the act of going up and asking them and

taking the initiative and being proactive was really something that I learned at Victor.

(Traditional Case 1 – Sidney, April 4, 2018)

In addition to Donna, Sidney stated that the constructive feedback and support she received from her cooperating teacher, her university supervisor, and Victor's student services coach during her clinical experience helped her to be confident in seeking out similar types of feedback and support from her principals and mentor teachers in her first classroom positions.

In communities of practice, Wenger (1991) states that members share responsibility and accountability in nurturing the development and growth of all members. This is evident in the way the staff at Victor embraced Sidney as a student teacher. While Jaime served as her primary mentor, other teachers, administrators, and her university supervisor made sure she felt supported and provided her with opportunities to experience and understand the various responsibilities of being an educator. This support was not only influential in Sidney's perceived preparedness for leading her own classroom, but the collaboration and help was also something she felt comfortable seeking out in her positions after leaving Victor. Similar to Kathy, I do not think this aspect of Sidney's clinical experience is attributable to the specific student teaching model she participated in (traditional), but its strong influence on her preparedness for the classroom certainly is notable from a teacher preparation standpoint.

Power dynamics in Sidney and Jaime's relationship. During our interviews, Sidney often discussed how influential Jaime was in her preparation for the classroom. In reflecting on their relationship, she frequently mentioned how Jaime treated her as an equal and asked for her insights and suggestions in classroom matters:

[Jaime] was always asking me for my opinions and what I thought we should do. And I remember once [a student] said they couldn't see, and I told [Jaime] that maybe she

should be moved to the front, like her desk should be moved, and Jaime said, “Well, you should just move it. Like, don’t feel like you have to tiptoe around me.” And so, I think since then, I felt more comfortable looking into that classroom as my classroom as well.

(Traditional Case 1 – Sidney, February 27, 2018)

Sidney said that Jaime’s trust in her allowed her to build greater confidence in herself, thereby helping her to feel more prepared in her ability to lead her own classroom.

Jaime’s perspective of their relationship was similar, as she talked about strategies and skills she learned from Sidney in lesson planning and small group work during their time together. Additionally, Jaime notably used the terms *we*, *us*, and *together* whenever discussing their second grade classroom and students. For example, in reflecting on the value of Sidney experiencing beginning of the school year preparation and planning, she stated, “Sidney and I were able to do things together to, just, start our whole classroom and the whole, you know, the whole tenor of how our classroom rolls and vibes...and we got to do that together” (Traditional Case 1 – Jaime, February 13, 2018). This language reflects the democratic and balanced nature of their relationship; they were a team who shared in the responsibilities of leading their classroom and working with their students.

From the lens of situated learning theory, it is evident that Sidney and Jaime maintained a balanced relationship during the clinical experience, embracing their roles as both teachers and learners (Lave & Wenger, 1991). Sidney certainly learned from Jaime through the authentic opportunities she provided her to plan, instruct, and evaluate, but Jaime also made it clear that Sidney brought valuable knowledge and experience to the table and sought her input. As a result of this balanced power structure, both members grew and developed within their learning community (Lave & Wenger, 1991), particularly Sidney in her preparation for leading her own

classroom. Despite this being a traditional model of student teaching, the imbalanced power relationship between the cooperating teacher and student teacher associated with the framework (Heck & Bacharach, 2014) was not present. Instead of the framework, it seemed to be Jaime's approach as the cooperating teacher, letting Sidney know through their discussions and interactions that she saw her as a peer instead of a student teacher, that developed and nurtured this balanced relationship. As such, it may be the people instead of the clinical experience model who drive this important relationship.

During Sidney's traditional clinical experience, she moved from partial to full participation in her learning community through a gradual increase in her teaching responsibilities. She identified the importance of the community of practice she found at Victor, as the staff there supported her through multiple collaborative efforts. Sidney and Jaime saw each other as peers and maintained a balanced power dynamic, resulting in learning and growth for both of them. Next, I outline Sidney's reflections on her learning and key takeaways from her clinical experience and its effect on her readiness to teach.

Sidney's readiness to teach: Her story. In all four interviews, Sidney talked at length about the importance of her relationship with Jaime and the positive influence she had on her preparation. In particular, Sidney often returned to the fact that Jaime treated her as an equal in their classroom:

I think, well, Jaime, I think something that stuck with me was just to not really tiptoe around anything, and that was really helpful. She really saw me as, like, on the same level, like, as a peer instead of me just, like, entering her classroom as a guest, which I was, so I appreciated that a lot. (Traditional Case 1 – Sidney, April 4, 2018)

This, in turn, built Sidney's confidence in herself as a teacher, something that helped her feel more prepared for leading a classroom on her own. The importance of this balance of power in the student teacher/cooperating teacher relationship has been outlined in research (e.g., Feiman-Nemser, 2001; Rikard & Veal, 1996; Soslau et al., 2018), but it is interesting to note that proponents of the co-teaching model of student teaching argue that the model provides greater opportunities for this balance to be established (Heck & Bacharach, 2014; Tobin & Roth, 2005). In this case, Jaime's approach and interactions with Sidney in a traditional clinical experience model enabled the development of an effective balance of power, one in which Sidney saw her confidence and abilities as a teacher grow. Again, it is possible that it is the people, more so than the clinical experience model, who are the drivers of this important relationship development.

In all four interviews, Sidney also talked about the school culture at Victor as highly influential in terms of her readiness for the classroom:

I think the school culture at Victor was really great also...all the teachers would keep on wondering how I was doing and check in with me, which was really nice. The [professional development], the staff development meetings, were always really helpful...and I think the perspective of the teachers in going into new, I don't know, teaching methods or styles was very open-minded. And so that was very helpful, I think, in helping me to be very positive and having, kind of, a growth mindset. (Traditional Case 1 – Sidney, February 27, 2018)

Even after completing her clinical experience, Sidney said that she maintained her connections with the staff at Victor, turning to them for help with issues that came up in her work as a guided reading specialist and classroom teacher (e.g., reading strategies for struggling students). The importance of school culture on a student teacher's development during the clinical experience is

in line with the findings of Capraro et al. (2010), Ronfeldt and Reininger (2012), and Yost (2006). Teacher candidates who are surrounded by strong, supportive educators throughout the school see greater value in collaboration and community-building in their subsequent roles as teachers in their own classrooms. This strong school culture is also something initial educators seek out and value in their first jobs, which was certainly the case with Sidney as she reflected on her first full-time classroom position during our final interview:

Both personally and professionally, I think that the school genuinely cares about each other...the staff here is just super amazing, and they even still have been helping me with my testing if I need it, or just, like, stopping in the hallway and asking how I'm doing, and that's very much of what I saw at Victor...I remember at Victor I needed help with some inquiry circle stuff, and the success coach there was very, like, willing to do that, like, she didn't seem burdened, and that's the same thing here. (Traditional Case 1 – Sidney, December 13, 2018)

Sidney placed great emphasis on the importance of school culture in both her clinical experience at Victor and her first months as a teacher of record at her new school.

When discussing Sidney's primary takeaways from her clinical experience in terms of her preparation for her own classroom, she discussed the confidence and ability to seek out help and resources in three of the four interviews. "I really don't feel self-conscious about asking any questions or anything. I'm always, kind of willing to, you know, walk and figure out an answer, which I thought I would be nervous doing as a first-year teacher" (Traditional Case 1 – Sidney, December 13, 2018). When I asked Sidney whether this might simply be a quality innate in her character, she returned to her relationship with Jaime:

It's not really my first, like, reaction to ask for help, and so the fact that [Jaime] was so willing to help and that she asked me for help when she needed it kind of allowed me to get in that same mindset. (Traditional Case 1 – Sidney, December 13, 2018)

While at first blush it may seem that having to ask for help and being prepared for the classroom are teaching qualities at odds with each other, research shows that one of the characteristics of highly effective educators is the ability and willingness to seek out resources and support when necessary (Wormeli, 2015). Hence, Sidney's learning in this area is an important component of her development and preparation as a teacher, one that she attributed directly to her cooperating teacher and clinical experience.

Sidney also mentioned classroom management and student discipline as a key takeaway from her time at Victor in two of the four interviews. "I think at Victor, whenever a student was misbehaving, Jaime made it a point to not call out that student in front of the classroom, and that's something that I have found really works" (Traditional Case 1 – Sidney, April 4, 2018). This was an area that Jaime said she emphasized in her discussions with Sidney during their clinical experience, so it follows that Sidney would consider it a key learning outcome from her time at Victor. As outlined earlier, classroom management is often identified by initial educators as an area in which they struggle (MetLife Survey of the American Teacher, 2005), so it makes sense to connect Sidney's learning about classroom management through her clinical experience to her strong feelings of preparedness for the classroom.

In considering how the clinical experience could best prepare a student teacher for their role as a classroom teacher, Sidney, like Kathy, maintained throughout our conversations that the timing and length of the clinical experience were important. She argued that a full-year placement would be most beneficial for student teachers. "I think it probably would have been

more helpful to just see more classroom time with a cooperating teacher...so I could see the students' growth and, like, how teachers set up, like, and the end of the year" (Traditional Case 1 – Sidney, June 14, 2018). This perspective falls in line with the research of Oh et al. (2005) and Ronfeldt et al. (2014), who found that student teachers who participated in longer clinical experiences felt better prepared for leading their own classrooms. Sidney acknowledged some of the logistical concerns of increasing the length of the clinical experience (e.g., teacher candidates are basically working a full-time job without any sort of pay), but she felt the benefits outweighed these concerns.

If a full-year placement were not feasible, Sidney maintained that a fall start was necessary, as the beginning of the school year was one of the more challenging aspects of being a new teacher:

I really liked seeing Jaime before all the students arrived and coming up with a plan with her and seeing how her plan before the students came was so much different than when they came, and she had to adapt. I feel like it would have been tough if I were starting in winter, where all of the procedures and routines have already been in place and then, kind of, guessing on how that came to be. (Traditional Case 1 – Sidney, December 13, 2018)

Jaime shared this perspective, stating that in her experience working with student teachers, those who started in the fall took away much greater knowledge in terms of classroom logistics and culture-building than those who began in the middle of the school year. This perspective falls in line with research, identified earlier, that outlines the value of initial educators being exposed to the various aspects of preparing a classroom for the beginning of a school year (Lundeen, 2004).

A final component of an improved clinical experience that Sidney brought up in three of the four interviews was the need for a variety of site placements throughout student teachers' field and clinical experiences, particularly from a curricular standpoint:

I think a lot of my placements were, all of them were in GPS, and so you're working with the same curriculum over and over, and while it's really comfortable and nice, it would have been nice to, like, take a look at different school districts and how they might, like, look at literacy or math. (Traditional Case 1 – Sidney, April 4, 2018)

While Sidney appreciated Farnham's partnership with GPS to focus on urban education through placements in GPS, she said that she struggled in her initial positions as a guided reading specialist and classroom teacher because she only knew one way to teach different subjects. By broadening district partnerships and increasing school placement sites, it is possible that Farnham could provide student teachers with a better variety of curricular options from which to approach their instruction in their subsequent roles as classroom teachers.

In Sidney's reflections on her traditional clinical experience, she identified her cooperating teacher Jaime and the school culture at Victor as highly influential on her perceptions of readiness for the classroom. Her key takeaways from the experience included the confidence to seek out help and resources, as well as classroom management strategies. Sidney's recommendations for an effective clinical experience in terms of preparing teachers for the classroom included a longer clinical experience, a fall start, and a wider variety of placement sites. Next, I present the third case in the study, another traditional model of student teaching.

Traditional case 2 – Sonya and Mary⁹. Sonya is a white female teacher in her late 20s who grew up in a self-described middle class family. She had previously completed an

⁹ Mary did not participate in the study.

undergraduate degree in preparation for law school, but after working in South America as part of the Peace Corps, she decided to pursue a career in education and entered Farnham's post-baccalaureate program. Sonya stated that through teaching, she hoped to empower children to realize their own potential and to create good for themselves, their communities, and the world. Her clinical experience took place in a fifth grade classroom in Rosie School, a PK-5 school in a district adjacent to GPS. The school is located on the west side of the city and serves a student population that is 62% White, 17% Hispanic, 9% Asian, and 4% Black. Forty-seven percent of the students in Rosie are eligible for free or reduced lunch. Rosie also serves as the district's center for students with special needs, so there is a great deal of special education programming in the school. Sonya's cooperating teacher was Mary, a classroom teacher of 17 years. She had experience with hosting student teachers from Farnham in the past. Sonya and Mary split instruction with another fifth grade teacher, trading homerooms during the course of the day for subject-specific instruction.

In describing Sonya's engagement in the classroom during the course of the semester, she outlined a traditional approach to the clinical experience, as she was gradually given more responsibilities in her work with the students:

So it started off, the first week I essentially just observed. I did a couple ice breaker activities...and then the next week...I took over their inquiry, which was at the beginning of the year, so it was community-building. And then the third week in, I took over math completely, and by the fourth week, I was teaching reading, math, and inquiry.

(Traditional Case 2 – Sonya, February 19, 2018)

Sonya added that Mary was extremely open to allowing her to take on more teaching responsibilities when she wanted to, enabling her to gain additional experience as the lead

teacher. “[Mary] was the type of person that was like, ‘Do your thing, girl.’ Like, ‘If you want to take over math the second week, like, by all means’” (Traditional Case 2 – Sonya, February 19, 2018).

After becoming a licensed teacher, Sonya was hired as a daily building substitute teacher at Rosie. According to her, she spent most of her time teaching and supporting students with emotional and behavioral disorders (EBD) in the school’s regular and special education classrooms. She finished the final six weeks of the school year as a long-term substitute teacher in one of Rosie’s first grade classrooms. In the summer, Sonya accepted a full-time fifth grade classroom teacher position at a suburban public elementary school located near Gallagher for the 2018-19 school year.

Sonya maintained throughout our interviews that she felt very prepared for the classroom by her clinical experience at Rosie. In reflecting on her first weeks as a building substitute at Rosie, she said, “Yeah, without a doubt...I definitely felt like I was ready and willing to go and have my own classroom...I’m very fortunate to be, to have been placed at [Rosie]” (Traditional Case 2 – Sonya, February 19, 2018). From the lens of situated learning theory, with its emphasis on the physical and social contexts in which learning takes place (Lave & Wenger, 1991), Sonya identified her relationship with Mary, the school culture at Rosie, and her involvement in school activities outside the classroom as highly influential in her preparation. Her reflections on the importance of these aspects of her clinical experience and its framework (the traditional model of student teaching) are broken down through the three tenets of situated learning theory.

Legitimate peripheral participation in Sonya and Mary’s relationship. In discussing her instructional engagement in the classroom, Sonya outlined a gradual increase in teaching responsibilities during the course of the semester. As shared earlier:

So it started off, the first week I essentially just observed. I did a couple ice breaker activities...and then the next week...I took over their inquiry, which was at the beginning of the year, so it was community-building. And then the third week in, I took over math completely, and by the fourth week, I was teaching reading, math, and inquiry.

(Traditional Case 2 – Sonya, February 19, 2018)

In terms of legitimate peripheral participation, similar to the other two study participants' clinical experiences, Sonya gradually moved from partial participation in her learning community to full participation throughout the semester. The skills and strategies she learned through her increased participation in the community helped her to understand what being a classroom teacher entailed (e.g., classroom management, organization, and lesson planning). More so than any coursework Sonya completed at Farnham, she felt that her time in the classroom teaching during her clinical experience was most influential in her preparation:

It's letting that student teacher get their feet wet in a more realistic way... I feel like teaching is, kind of, something you just, I mean, like, like anything. It's something that you just have to do. You can't just keep talking about it and reading about it and reading case study after case study about different types of learners that are going to be in your classroom. (Traditional Case 2 – Sonya, June 27, 2018)

In an effort to increase her legitimate participation in the learning community, Sonya said that she frequently requested (and Mary was extremely supportive of) additional lead teaching opportunities beyond Farnham's recommended timeline. In order for Sonya to become a causative member of the learning community, she had to fully participate as a teacher and learn from those experiences. Sonya advocated for more of those opportunities for herself.

Sonya also identified her engagement in school activities outside the classroom as influential in her preparation for becoming a teacher. Through her participation and leadership in Rosie's student council, community meetings committee, and an all-school field trip, Sonya said that she was exposed to elements of being a teacher that she had not considered before the clinical experience:

Jumping into Rosie's community as a school was really helpful to gain confidence as a new teacher. And not just to create those relationships with students...but also just to show myself that I am a part of this community, and once you take the time to show yourself, you know, more than anyone, that you really belong here, it made me feel more open and comfortable...I feel like I gained, I gained a lot of respect from the other teachers, as well as the principal...I definitely would say that that was a really influential decision. (Traditional Case 2 – Sonya, June 27, 2018)

From the perspective of legitimate peripheral participation, Sonya was able to more effectively move to the center of her community of practice through her engagement in the learning community as she became a causative and contributing member of the school.

Sonya's gradual increase in instructional responsibilities throughout the semester reflects a traditional model of student teaching, but the additional opportunities Mary provided her to lead teach beyond the standard timeline, as well as Sonya's engagement in Rosie's school activities, provided her with increased opportunities to engage in the work of a teacher. She was granted greater access to legitimate participation at the center of the learning community by her cooperating teacher and the school staff. Even with these additional opportunities, Sonya felt that increasing the length of the clinical experience would benefit student teachers as it would provide them with more opportunities to experience the daily work of a teacher. However,

Sonya concluded that through the framework she and Mary followed, she felt prepared for her subsequent roles as a substitute and classroom teacher.

Communities of practice in Sonya and Mary's relationship. This was a tenet of situated learning theory that Sonya frequently discussed in our interviews as a strength in her clinical experience at Rosie. She felt that the culture at Rosie, particularly the school's focus on making connections with students, fit with her educational philosophy and was highly influential in her preparation for the classroom:

I don't know if it was just because of the, the school I was in, but the support that I had...and not just for the academic side, but community-building and focusing on emotional and relationships in general with students. Yeah, I definitely felt like I was ready and willing to go and have my own classroom, so...I'm very fortunate to be, to have been placed at that school. (Traditional Case 2 – Sonya, February 19, 2018)

Sonya found the staff at Rosie “really open and willing to get to know me, not only as a teacher, but as a person” (Traditional Case 2 – Sonya, June 27, 2018). This openness, combined with her efforts to get involved in school activities beyond the classroom walls discussed earlier, helped Sonya feel confident seeking out assistance and support in her work, both during the clinical experience and after:

I was so comfortable with my principal and asking for support [from] other staff members, such as teachers, you know, to get advice on a specific student, or I was really open and honest if I was struggling with an area of the curriculum when I covered, you know, the first grade class for the end of the school year. I was, I knew I just had so much support in the school. So with that, I felt like I was really capable of doing

anything, and that was a good feeling as a new teacher, knowing that I had that support.
(Traditional Case 2 – Sonya, June 27, 2018)

As outlined earlier, in communities of practice, Wenger (1991) states that members share responsibility and accountability in nurturing the development and growth of all members. This is apparent in the way the staff at Rosie supported Sonya as a student teacher and substitute teacher. While Mary served as her primary mentor, other staff members and her principal worked with her to provide opportunities to experience and understand the various responsibilities of being an educator, both in the classroom and in the larger school environment. This support was highly influential in Sonya’s perceived preparedness for leading her own classroom, and it was something she sought out in her classroom position after leaving Rosie. Similar to the other two cases in this study, I do not think this aspect of Sonya’s clinical experience is attributable to the specific student teaching model she participated in (traditional), but its strong influence on her perceived preparedness for the classroom certainly is notable from a teacher preparation standpoint.

Power dynamics in Sonya and Mary’s relationship. During our interviews, Sonya often discussed how influential Mary was in her preparation for the classroom. In reflecting on their relationship, she consistently mentioned the openness with which Mary approached their discussions and work together:

I think having that relationship with Mary, my co-op, and being able to express, like, that side of my personality, which is really who I am, just being honest and raw, I think having that, having that capability...[was] really, really great. (Traditional Case 2 – Sonya, March 29, 2018)

Additionally, Sonya said that Mary's high expectations and encouragement to push herself further as a teacher were important in her development:

I was lucky enough to have a teacher that...listened to my needs and my hesitations and doubts but also was like, "Stop. Just do it. Go do it. I don't care if you, you know, feel like you're going to bomb this lesson. Go do it. I'll be in the back taking notes. Go try." Yeah, I, I was really grateful to have that, sort of, mother figure almost. It was, kind of, keep pushing me out of my comfort zone. (Traditional Case 2 – Sonya, June 27, 2018)

Sonya said that Mary's constant encouragement, willingness to listen, and trust in her allowed her to build greater confidence in herself, thereby helping her to feel more prepared in her ability to lead her own classroom.

From the lens of situated learning theory, as outlined earlier, an important aspect of the student teacher/cooperating teacher relationship is the balanced roles of teacher and learner embraced by the participants (Lave & Wenger, 1991). Sonya's description of her relationship with Mary, though positive, seemed to at times be at odds with this mutual role-taking, particularly her description of Mary as a "mother figure." She seemed to view Mary as the "all-knowing one" in their relationship, but upon discussing their collaborative work further, Sonya talked about how open Mary was to her input throughout the semester, particularly Sonya's focus on the affective side of teaching. She revealed that Mary felt she grew in her own practice during the course of the clinical experience:

I definitely think [the relationship] was, was mutual. I think that [Mary] realized it...we chatted, like, a couple weeks ago. She, she realized how personal I was with students when I started asking, you know, more, a personal question about a student in her class, and she was like, "Oh, how did you remember that about that student?" I think, she, she

seems to be a little bit more sensitive now with her new [student teacher] and building those relationships...it felt like she's recognizing more, like, how, how you can have those relationships and still, still have your space as a person and, and as a teacher.

(Traditional Case 2 – Sonya, March 29, 2018)

A more reciprocal relationship can be seen here when considering Mary's growth through the clinical experience. Sonya learned from Mary through the authentic opportunities she provided her to teach in the classroom, but Mary also learned from Sonya's approach to developing and nurturing student relationships. As a result of this balanced power structure, both members grew and developed within their learning community (Lave & Wenger, 1991), particularly Sonya in her preparation for leading her own classroom. Similar to Sidney, despite this being a traditional model of student teaching, the imbalanced power relationship between the cooperating teacher and student teacher associated with the framework (Heck & Bacharach, 2014) was not present. Instead of the framework, it seemed to be Sonya's willingness to jump into her role as a teacher, coupled with Mary's consistent support and encouragement, that built and maintained this balanced relationship. Again, it may be the people instead of the clinical experience model who drive this important relationship.

During Sonya's traditional clinical experience, she moved from partial to full participation in her learning community through a gradual increase in her teaching responsibilities. She identified the importance of the community of practice she found at Rosie, as the staff there supported her through multiple collaborative efforts in and outside the classroom. Sonya and Mary embraced their roles as mutual teachers and learners, resulting in growth for both of them. Next, I outline Sonya's reflections on her learning and key takeaways from her clinical experience and its effect on her readiness to teach.

Sonya's readiness to teach: Her story. In all three interviews, Sonya talked extensively about the importance of her relationship with Mary and the positive influence she had on her preparation. In particular, Sonya reflected on how Mary grounded her and balanced her more affective approach to teaching:

I'm usually a really emotional, sensitive person that really likes, you know, those, like, relationships with students, but [Mary] taught me that you can have that, but you really need to realize, like, what is it? She was just very matter-of-fact, and I think I really needed that. She was just so much more, like, logistics-based, you know? So, I think having that, that dichotomy, you know, working with her has really influenced who I am as a teacher now in a good way, I think. It, it definitely balanced out my more emotional side. (Traditional Case 2 – Sonya, March 29, 2018)

In addition to this balance, Sonya was appreciative of the openness and constant support Mary provided during the clinical experience. As shared earlier:

I was lucky enough to have a teacher that...listened to my needs and my hesitations and doubts but also was like, "Stop. Just do it. Go do it. I don't care if you, you know, feel like you're going to bomb this lesson. Go do it. I'll be in the back taking notes. Go try." Yeah, I, I was really grateful to have that, sort of, mother figure almost. (Traditional Case 2 – Sonya, June 27, 2018)

This relationship built Sonya's confidence in herself as a teacher, something that helped her feel more prepared for leading a classroom on her own. The importance of the cooperating teacher in a student teacher's development falls in line with the research of Lee et al. (2012) and Ronfeldt and Reininger (2012). When paired with high-quality cooperating teachers (both in terms of teaching abilities and mentoring skills), teacher candidates report greater satisfaction with their

clinical experience from a learning standpoint, as well as higher confidence in their teaching abilities.

Throughout the interviews, Sonya also talked about the school culture at Rosie as highly influential in terms of her readiness for the classroom. “I knew I just had so much support in [Rosie]. So with that, I felt like I was really capable of doing anything, and that was a good feeling as a new teacher, knowing that I had that support” (Traditional Case 2 – Sonya, June 27, 2018). Additionally, Sonya said that the school’s emphasis on building student relationships inspired her to do more as a teacher, both during the clinical experience and after. “It made me want to [celebrate student relationships] more when I saw people...doing that in their own [work]” (Traditional Case 2 – Sonya, June 27, 2018). As outlined earlier, the importance of school culture on a student teacher’s development during the clinical experience follows the findings of Capraro et al. (2010), Ronfeldt and Reininger (2012), and Yost (2006). Teacher candidates who are surrounded by supportive educators throughout the school see greater value in collaboration and community-building in their subsequent roles as teachers in their own classrooms. It is important to note that Sonya’s transition from the clinical experience to her initial role as a substitute teacher presents a unique case in that she remained in the same school for that transition. It is unclear whether her perspective on the importance of school culture would have remained the same had she taken a position in a different school, though Sonya did say that as she looked for a permanent position as a classroom teacher, school culture was high on her list of priorities.

A final important influence Sonya discussed in each of our conversations was her involvement beyond the classroom in activities at Rosie. She felt that her willingness to go

above and beyond in her role as a student teacher helped her to gain more from the clinical experience:

I got really involved with the school in general. I helped, started helping with different committees around the school, so I started a student council, I jumped on a committee for community meetings...I decided to bring speakers in, I asked some Farnham professors to come speak. I think that [staff members] were more apt to...hear me out within the classroom and outside of the classroom when they found that I really wanted to stick around. (Traditional Case 2 – Sonya, February 19, 2018)

Sonya said that participating in these activities gave her greater confidence in herself as a teacher and exposed her to elements of being a teacher that a standard clinical experience generally would not. In discussing this part of her experience, she acknowledged that her desire to get involved stemmed more from an innate desire to connect and be a greater part of a community than any particular push from her cooperating teacher or a specific clinical experience framework, but the effects of these experiences on Sonya's perceived readiness to lead her own classroom certainly bear mentioning here.

When discussing Sonya's primary takeaways from her clinical experience in terms of her preparation for her own classroom, she discussed the importance of building relationships with students in all our interviews:

I think building relationships, I, that just naturally is part of my personality, but I think working and being able to work in a school that really emphasized the importance of building relationships between student and teacher was really, it reminded me to honor that part of my personality and not to bury it. (Traditional Case 2 – Sonya, June 27, 2018)

As Sonya alluded to in the above quote, this aspect of her instruction was not necessarily learned through the clinical experience; rather, the importance of it was affirmed through her work at Rosie. As outlined earlier, the importance of the student/teacher relationship is prevalent in education research (Hattie, 2012), so Sonya's learning in this area was critical.

Sonya also mentioned classroom management as a key takeaway from her time at Rosie in two of the three interviews:

I think classroom management, honestly, is the first thing that comes to mind. I was really lucky enough...to have a cooperating teacher who was really firm and clear about her expectations and rules within her classroom [but] was really open to creating dynamic and firm, at the same time, expectations and rules with students, so making that classroom environment run off of what students want and...how they want their classroom to work. So I feel like that was one area in which I really tried to bring forward, even as a substitute. (Traditional Case 2 – Sonya, June 27, 2018)

Sonya saw significant overlap between the classroom management style she learned from Mary and her own drive to make meaningful connections with her students, so she found the two worked hand-in-hand. As described in the previous two cases, classroom management is often identified by initial educators as an area in which they struggle (MetLife Survey of the American Teacher, 2005), so it makes sense to connect Sonya's learning in this area during her time at Rosie to her strong feelings of preparedness for the classroom.

In considering how the clinical experience could best prepare a student teacher for their role as a classroom teacher, Sonya maintained throughout our conversations that the length of the clinical experience was critical. She stated multiple times that a full-year placement would have been more beneficial than Farnham's one semester placement. "I honestly feel like student

teaching should be more than a semester long. I don't feel like it was enough time for me to really feel like I was 125% ready" (Traditional Case 2 – Sonya, February 19, 2018). As outlined earlier, this perspective falls in line with the research of Oh et al. (2005) and Ronfeldt et al. (2014), who found that student teachers who participated in longer clinical experience felt better prepared for leading their own classrooms.

Related to this, Sonya also mentioned in multiple interviews that she felt like student teachers needed less time in university coursework and more time in actual classrooms throughout their preparation programs:

I feel like teaching is, kind of, something you just, I mean, like, like anything. It's something that you just have to do. You can't just keep talking about it and reading about it and reading case study after case study about different types of learners that are going to be in your classroom. Yeah, more time in the classroom, less time at Farnham. (Traditional Case 2 – Sonya, June 27, 2018)

While Sonya said that she valued Farnham's overall teacher education program, she found that her greatest growth in terms of her preparation for the classroom came during her time in classrooms through her field and clinical experiences. Her perspective speaks to alternative models of teacher preparation that place student teachers' learning opportunities throughout the program in the authentic contexts in which they will teach, such as professional development schools (Darling-Hammond, 2006) and context-specific residencies (Matsko & Hammerness, 2014).

A final component of an improved clinical experience that Sonya brought up in two of the three interviews was the need for intentional and thoughtful pairings of student teachers and cooperating teachers by preparation programs. "I would say maybe that would be something to

think about, like, who you're pairing with what school and who they will be working with" (Traditional Case 2 – Sonya, March 29, 2018). She made the point that Mary was perfect for her because she was so open and supportive of what she wanted to do, resulting in an "all-star experience" for her, but Sonya acknowledged that Mary may not have been the best cooperating teacher for other types of student teachers. Given the importance of the student teacher/cooperating teacher relationship in teacher candidate learning and growth (Lee et al., 2012; Ronfeldt & Reininger, 2012), Sonya's perspective speaks to the need for preparation programs to consider how they match student teachers with classroom teachers in order to foster positive learning relationships and environments.

In Sonya's reflections on her traditional clinical experience, she identified her cooperating teacher Mary, the school culture at Rosie, and her involvement in extracurricular activities at the school as highly influential on her perceptions of readiness for the classroom. Her key takeaways from the experience included the importance of making connections with students and classroom management strategies. Sonya's recommendations for an effective clinical experience in terms of preparing teachers for the classroom included a longer clinical experience, more time in the field throughout the preparation program, and thoughtful pairings of student teachers and cooperating teachers. Next, I present a cross-case analysis of the cases in this study, focusing on the frameworks of the participants' clinical experiences (co-teaching or traditional) and their effect on the initial educators' perceived readiness for the classroom.

The Cross-Case Analysis: Kathy and Esther, Sidney and Jaime, Sonya and Mary

In considering the three cases presented in this study, I outline notable similarities and differences across the participants' clinical experiences, with a focus on the framework of the experiences. This section is first broken into the three tenets of situated learning theory:

legitimate peripheral participation, communities of practice, and the power dynamic inherent in the cooperating teacher/student teacher relationship. Then I compare the three themes identified from participants' reflections on their clinical experience and its effect on their readiness to teach: key influences on preparation, focused learning outcomes, and reflections on the perfect clinical experience.

Legitimate peripheral participation across the three cases. In all three cases in the study, the participants identified the authentic opportunities they had to lead the classroom as instrumental in their preparation for the classroom. Specifically, they focused on the *act* of teaching, not simply observing, as the piece that helped them understand best what it felt like to lead in the classroom. This lends credence to Lave and Wenger's (1991) assertion in situated learning theory that learning occurs through activity in the world, not solely watching and listening. "Learning is as much a matter of enculturation into a community's ways of thinking and dispositions as it is a result of explicit instruction in specific concepts, skills, and procedures" (Putnam & Borko, 2000, p. 5). Whether it was Kathy's two-week lead teaching period, Jaime's efforts to give Sidney additional opportunities to lead beyond the Farnham timeline, or Sonya's engagement in Rosie's school-wide activities, the student teachers' actions in their clinical experiences helped them build the confidence and instructional skills they needed as they moved from partial to full participants in their learning environments.

Based on this finding, it stands to reason that more active teaching and less passive observation would benefit student teachers' preparation during their clinical experience. This, in fact, is one of the aspects of the co-teaching model of student teaching that proponents identify as a benefit over the traditional model (Bacharach et al., 2010). However, all three participants identified their gradual increase in instructional responsibilities as necessary in their

development and preparation. Even Kathy, who participated in a co-teaching framework that resembled a more traditional model in terms of her engagement in the classroom, felt that the full co-teaching model would have been overwhelming for her. All three participants found value in being able to integrate themselves into the classroom community gradually, increasing their responsibilities as they gained confidence in their own abilities. Instead of full engagement throughout the semester as proposed by the co-teaching model, the participants felt that increasing the length of the clinical experience would be beneficial, as this would provide student teachers with more opportunities to experience authentic teaching situations throughout an entire school year, thereby helping prepare them for everything that happens in a standard academic year (e.g., beginning of the year preparation, report cards, parent/teacher conferences, maintaining student connections, and end of the year responsibilities). Yet, it is difficult to fully conclude that the traditional model's gradual engagement timeline is most beneficial to teacher candidates during their clinical experience, particularly from a legitimate peripheral participation standpoint, because Kathy did not actually experience a clear representation of the co-teaching model. Further research is necessary in this area, especially given that this aspect of the co-teaching model is identified as one of the main features differentiating it from the traditional clinical experience framework.

Communities of practice across the three cases. All three participants in the study, regardless of the clinical experience model, found great value in the collaborative opportunities and support they were provided through their work with their cooperating teachers during their clinical experiences. At its core, the work of these student teacher/cooperating teacher teams matched Wenger's (1998) description of effective communities of practice: old-timers (cooperating teachers) and newcomers (student teachers) are mutually engaged and accountable

for helping the newcomer to move towards the center of the learning community as they take on more responsibility in their work. This was certainly the case in each participant's experience, and it resulted in feelings of strong preparedness for the classroom for each initial educator in the study.

However, communities of practice, particularly in schools, often encompass a larger group of people, such as school staff, and they play an important role in the newcomer's growth and development. These communities share responsibility and accountability in nurturing the development and growth of all members (Wenger, 1998). Sonya echoed this perspective, stating, "The whole school culture around you really does play a role in your preparation as well. You know, you don't just work in a silo" (Traditional Case 2 – Sonya, March 29, 2018). The degree to which the participants in this study were able to collaborate beyond their immediate classroom settings differed between Kathy (co-teaching model) and Sidney and Sonya (traditional models). Sidney and Sonya provided multiple examples of positive relationships they maintained with staff beyond their cooperating teachers (e.g., special education teachers and building administrators), which resulted in them feeling comfortable seeking out help and support in their subsequent teaching positions. Wormeli (2015) identified the ability to seek out resources and support as one of the critical characteristics of effective educators; Sidney and Sonya were provided with the opportunity to build this skill through their clinical experiences.

Kathy said that she rarely collaborated with anyone at Percy outside of Esther and wished for more opportunities to work with others in the building during her clinical experience. As outlined earlier, this appeared to have been more a result of Percy's student placement procedures than anything else. However, Kathy's responses on the IRS in terms of her collaboration skills did not differ notably from Sidney and Sonya's, nor did she identify

collaborating with other teachers (or the ability to seek out resources) as an issue in her initial role as a substitute teacher. Considering the specific clinical experience models, research on the co-teaching model identifies collaboration skills as one of the main benefits to teacher candidates over the traditional model (Bacharach & Heck, 2012), but that did not appear to be the case in this study. All three participants felt prepared from a collaboration standpoint.

Power dynamics across the three cases. In all three cases in this study, the participants identified the positive relationships they had with their cooperating teachers as highly influential in their perceived readiness for the classroom. Through the openness and support provided by the cooperating teachers, the student teachers developed confidence in their own abilities and skills as teachers. The participants also discussed the trust the cooperating teachers put in them as they provided them with opportunities to lead the classroom and work with students. Lave and Wenger (1991) detailed the importance of this trust in the relationship, outlining through situated learning theory how the old-timers must grant the newcomers access to legitimate participation opportunities within the community of practice and trust their abilities as the newcomers develop their identities as causative members of the community.

Another important component of the relationship is the need to establish an even power balance between the two team members. This balance results in a more reciprocal relationship in which the participants both learn and grow (Lave & Wenger, 1991). Despite proponents of the co-teaching model of student teaching stating that this balanced power dynamic is better developed through the model than the traditional model (Heck & Bacharach, 2014; Roth & Tobin, 2004), the opposite was found in this study. Kathy and Esther (co-teaching model) seemed to view Esther as the knowledgeable one whose primary role was to guide Kathy through the ebbs and flows of the semester and share her knowledge and experience to help Kathy

understand what it took to be a teacher. There did not appear to be a mutual sharing of knowledge on Kathy's part to help Esther grow as well until she had the opportunity to lead teach later in the semester. Sidney and Jaime (traditional model), discussed their perspective of each other as peers, working together to ensure the growth of their students. Sonya (traditional model) reflected on the mutual learning that took place for both her and Mary, as she learned the more academic elements of being a teacher, while Mary grew in her affective abilities as an educator. Despite these differences, none of the participants felt that the dynamic of their student teacher/cooperating teacher relationships, balanced or not, negatively affected their preparation for the classroom. Again, each participant felt that their relationship with their cooperating teacher was a positive one that resulted in their growth and development as a teacher. As such, this finding suggests that regardless of the specific clinical experience model, it is possible for a balanced power dynamic to be established based on how the cooperating teacher and student teacher approach the relationship. As stated throughout this chapter, it may be the people, more so than the framework, who drive this important relationship.

In comparing the effects of the co-teaching and traditional models of student teaching on initial educators' perceptions of readiness for the classroom through the lens of situated learning theory, the value of gradual engagement in moving student teachers from the periphery to the center of the learning community was identified across all three cases. Additionally, regardless of the model, the *act* of teaching, as opposed to simply observing, was seen as the key learning component in preparing teacher candidates for the classroom. Effective communities of practice were integral in the participants' perceived readiness for the classroom, but the establishment of those communities, especially on broader school-wide scales, was independent of the clinical experience framework. Finally, though the power dynamics of each student teacher/cooperating

teacher relationship varied across the three cases, the participants, regardless of the clinical experience framework, found the relationships to be positive, supportive, and highly influential in their preparation for the classroom. Next, the participants' reflections on their clinical experiences and their effect on their readiness to teach are compared.

Teasing apart the differences in readiness to teach: Key influences on preparation.

In all three cases, the participants identified their cooperating teacher as a major influence on their perceived readiness for the classroom, reflecting existing research on the importance of the cooperating teacher in student teachers' learning and development (Lee et al., 2012; Ronfeldt & Reininger, 2012). In particular, the participants focused on the support their cooperating teachers provided throughout the semester as they navigated the challenges of learning to lead a classroom. They felt comfortable being open with their cooperating teachers, and their cooperating teachers' trust in them built their confidence in their own abilities. The participants also noted the willingness of their cooperating teachers to seek out and listen to their input in instructional decisions, which speaks to previous research about the student teacher/cooperating teacher dynamic (e.g., Feiman-Nemser, 2001; Rikard & Veal, 1996; Soslau et al., 2018). While proponents of the co-teaching model of student teaching identify the framework as more conducive to maintaining a balance of power between the teacher candidate and cooperating teacher (Heck & Bacharach, 2014), this was not the finding in this study. Rather, all three participants, regardless of their clinical experience framework, felt that their perspectives were heard and valued by their cooperating teachers. Again, it may be the case that it is the people in the clinical experience, not the framework, who drive this critical relationship.

Related to the significance of the student teacher/cooperating teacher relationship, Sonya's discussion of the importance of thoughtful and intentional pairings of student teachers

and cooperating teachers for an effective clinical experience bears mentioning here. Given the importance of this relationship in the learning and development of student teachers outlined above, it would behoove teacher preparation programs, regardless of what clinical experience framework they employ, to consider how they are pairing teacher candidates in the field.

Potthoff and Alley (1996) advocated for this careful consideration as well, identifying in their study that student teacher learning was shown to be more productive when pairings were made in which the teacher candidate felt suited to their cooperating teacher. Again, the importance of the cooperating teacher in the participants' clinical experiences was central across the two frameworks, so Sonya's discussion of its significance presents a noteworthy finding from this part of the analysis, independent of the models.

One notable difference between the clinical experience models is that Kathy frequently identified her solo lead teaching time as influential in her perceived readiness for the classroom; Sidney and Sonya did not focus on this as much in their discussions. Taken at face value, one might attribute Kathy's reflections here to the argument that the co-teaching model causes the student teacher to become too reliant on the cooperating teacher in their development; Kathy did not appreciate or understand what it felt like to teach on her own until the two-week lead teaching period because she was solely co-teaching before that time. However, it is important to note that Kathy's gradual engagement in classroom instruction throughout the semester more closely resembled the traditional model than a true co-teaching model.

In essence, all three participants had similar clinical experiences from an instructional engagement standpoint, so this difference cannot be attributed solely to a difference in frameworks. However, both Sidney and Sonya stated that their cooperating teachers agreed to let them lead teach on their own for periods beyond Farnham's recommendations. Kathy and

Esther seemed to adhere more closely to the instructional timeline. Hence, it is possible that when it came time for the two-week lead teaching period, Sidney and Sonya were more used to leading on their own, and the impact of that time period was felt less by them than it was by Kathy. However, it is difficult to provide one specific reason for this difference in the participants' perspectives.

One other notable difference between the clinical experience models is that Sidney and Sonya identified school culture as influential in their perceived readiness for the classroom; Kathy did not. It is difficult to attribute this difference to the clinical experience model, as the co-teaching model primarily targets the student teacher/cooperating teacher relationship, not the entire school culture. School culture is developed and nurtured over years (Kohm & Nance, 2009), not something that simply happens due to a shift in a clinical experience model. In reality, it is likely simply the case that Sidney and Sonya were placed in schools with more visible positive school cultures, while Kathy was not. While this finding has no initial bearing on the value of one clinical experience framework over another, it is an important aspect of the clinical experience to consider from a teacher preparation standpoint.

Teasing apart the differences in readiness to teach: Focused learning outcomes. In all three cases, the participants identified classroom management as an important learning outcome from their clinical experiences. They felt that their experiences helped them develop comprehensive overall classroom management plans, as well as strategies for dealing with individual student behavior. In each case, the participants said that they used their cooperating teacher's plan as a jumping off point, taking what parts they liked and adding what they felt was necessary for their own classroom. The cooperating teachers interviewed for this study agreed with this approach, saying that the student teachers had to make classroom management

strategies their own, not carbon copies of what they did. Research identifies classroom management as one of the primary struggles for initial educators (MetLife Survey of the American Teacher, 2005), particularly in urban settings like each of the participants' placements (Knoblauch & Chase, 2015), so it is not surprising that classroom management was a focus of the Farnham preparation program, as well as the participants' cooperating teachers. Regardless of the clinical experience model, this aspect of the student teachers' learning development and preparation was emphasized and applied in their initial positions as teachers of record in their own classrooms.

One notable difference between the clinical experience models is that Kathy identified individualized instruction as a main instructional learning outcome, while Sidney and Sonya did not mention it in their reflections. This is an area in which Kathy and Esther found the co-teaching model particularly beneficial, both in terms of the use of the seven co-teaching strategies outlined by Heck and Bacharach (2014), as well as their shared instruction during lessons:

I think it was nice the, the co-teaching, [students] were able to get more than one perspective on the content...like, I would have some different strategies...and then Esther would have her strategies...so I guess, just, I don't know, different perspectives of content. So I liked that, getting, like, a lot of difference, for, like, a lot of different ways of the teaching for the different learners. (Co-Teaching Case 1 - Kathy, June 15, 2018)

Esther added that this aspect of the co-teaching model enabled Kathy to better understand how to group students and use different adults in the classroom to target instruction to individual student needs.

Initial research on student achievement in co-taught classrooms (student teacher and cooperating teacher) supports the teaching team's view that they were better able to individualize instruction for their students (Bacharach & Heck, 2012; Bacharach et al., 2010), as the model capitalizes on the skills and abilities of two teachers at all times (Soslau et al., 2018). The findings in this study build on that research base, suggesting that those differentiation skills transfer to the student teacher's future classroom and work with students, providing them with a stronger ability in this area than those initial educators who completed a traditional model of student teaching.

Teasing apart the differences in readiness to teach: Reflections on the perfect clinical experience. All three participants focused on the timing and length of the clinical experience in their reflections about how the clinical experience could best prepare student teachers for the classroom. They agreed that a longer clinical experience beyond the single semester provided by Farnham would have been beneficial, as it would have allowed them to see and understand the ebbs and flows of an entire school year. This perspective falls in line with the research of Oh et al. (2005) and Ronfeldt et al. (2014), who found that student teachers who participated in longer clinical experiences felt better prepared for leading their own classrooms. This finding in the study goes against the argument that the co-teaching model of student teaching better prepares initial educators for the classroom because they are fully engaged in all aspects of teaching throughout the clinical experience (as opposed to the gradual engagement of student teachers in the traditional model) (Heck & Bacharach, 2014), but again, it is important to note that Kathy's instructional experience within the co-teaching model mirrored more of a traditional engagement model. Therefore, this finding cannot be applied to the co-teaching model of student teaching in its true form.

Related to the length of the clinical experience, all three participants felt fortunate to have begun their clinical experiences in the fall, as it enabled them to get a sense of what it felt like to prepare for the beginning of the school year. While this perspective supports Lundeen's (2004) findings on the importance of preparing initial educators for beginning of the school year challenges, it is not attributable to any one clinical experience model over another. It applies to all clinical experience frameworks and is an important consideration for teacher preparation programs.

In comparing effects of the co-teaching and traditional models of student teaching on initial educators' perceptions of readiness for the classroom, the influence of the cooperating teacher was strong across both models, and classroom management was a key takeaway for all participants regardless of the framework. Additionally, all participants felt that they would have benefitted from a longer clinical experience than the single semester provided by Farnham. The only notable difference between the models was the identification of individualized instruction as a key learning outcome for the teacher candidate working within the co-teaching framework. Important teacher preparation outcomes not attributable to the clinical experience framework included the importance of school culture and thoughtful student teacher/cooperating teacher pairings.

Conclusion

This study renders a response to the study's research question, "How do initial educators' perceptions of their readiness for the classroom compare between those who participated in one iteration of a co-teaching model of clinical experience and those who experienced a traditional student teaching model?" Based on the analysis and the findings detailed from these cases, there is little difference between initial educators' perceptions of readiness for the classroom between

the two frameworks. Each participant felt that their clinical experience prepared them well to lead their own classroom.

Looking at each case through the lens of situated learning theory, all three participants outlined the importance of legitimate peripheral participation in their perceived readiness for the classroom. Authentic opportunities to teach, particularly on their own, built confidence in their abilities. Each of the three participants also identified the influence of the school-wide communities of practice on their preparedness for the classroom. Through opportunities (or a lack thereof) to collaborate with staff throughout the school, the initial educators found additional sources of support and learned important lessons about how to seek help and resources. Finally, while Kathy seemed to experience a less balanced power dynamic in her relationship with her cooperating teacher than Sidney and Sonya, all three found the relationship with their cooperating teacher positive; they provided the support they needed to grow and develop as teachers.

In considering the participants' reflections on their clinical experiences, particularly what they learned and their perceived readiness for the classroom, all three participants identified their cooperating teachers and lead teaching opportunities as highly influential. Sidney and Sonya also identified school culture as influential; Kathy did not. However, this did not appear to be the result of their specific clinical experience frameworks. All three participants discussed classroom management strategies as a valuable learning outcome from their clinical experiences, which they were applying in their current positions. Although Kathy also identified individualized instruction strategies as a key learning outcome, Sidney and Sonya did not. This marked a key difference between the two student teaching models and has been demonstrated in co-teaching for student teaching research (e.g., Bacharach & Heck, 2012; Bacharach et al.,

2010). Finally, all three participants maintained that a longer clinical experience than the single semester provided by Farnham would have been beneficial in their preparation.

While these findings add to the research base on the co-teaching model of student teaching specifically and pre-service teachers' clinical experiences generally, more robust differences between the co-teaching and traditional models may be identified through future research. These lines of research are discussed in the next chapter.

Chapter 5: Conclusions, Implications, and Future Research

The conclusions outlined in this section address the study's research question, "How do initial educators' perceptions of their readiness for the classroom compare between those who participated in one iteration of a co-teaching model of clinical experience and those who experienced a traditional student teaching model?" The purpose of the study was to address gaps in the current research base for the co-teaching model of student teaching, particularly initial educators' reflections on the fruitfulness of their clinical experience framework in preparing them to teach once they had begun their work as a teacher of record in their own classroom. The conclusions drawn in this study add to the research on the co-teaching model of student teaching, as well as hold implications for teacher preparation programs and the clinical experience in particular. In this chapter, I begin by summarizing conclusions drawn from my analysis of the participants' reflections on their clinical experiences through our interviews. Next, I outline implications for teacher education programs, as well as faculty considering the co-teaching model for the clinical experience. I close this chapter with considerations for future research.

Clinical Influences on One's Readiness to Teach

The participants in this study felt well prepared to lead their own classrooms based on their clinical experiences. As they reflected on their clinical placements, they identified important components of the experiences that influenced their feelings of readiness. The people and activities detailed in this section supported the participants' growth and development as future classroom teachers.

Influence of the cooperating teacher on readiness to teach. Across the co-teaching and traditional cases in this study, the three participants identified their cooperating teacher as highly influential in their preparation for leading their own classrooms. From an instructional

standpoint, cooperating teachers provided these student teachers with valuable opportunities to lead the classroom, constructive feedback about their performance, and ideas and resources for their instruction. From an affective standpoint, the cooperating teachers provided constant support and encouragement, listened to teacher candidates' questions and concerns, and instilled confidence in the participants. The cooperating teacher's role in shaping new teachers supports the findings of Lee et al. (2012) and Ronfeldt and Reininger (2012), who detailed this influence on pre-service teachers' learning and development.

In this study, a more balanced power structure between the student teacher and cooperating teacher, as advocated for by Lave and Wenger (1991), was not necessary for participants to feel prepared for leading their own classrooms. In fact, the relationship between Kathy and Esther in the co-teaching model case was more unbalanced than the two traditional model cases, even though the co-teaching framework lends itself to a more reciprocal learning dynamic (Heck & Bacharach, 2014; Roth & Tobin, 2004). It appeared that the positive relationship between the student teacher and cooperating teacher influenced participants' perceived readiness for the classroom more than the specific framework of the clinical experience.

Esther's influence as a cooperating teacher could also be seen in how she implemented the co-teaching framework in her classroom. Despite the Farnham-led orientation sessions, Esther chose to employ a more hybrid version of the model, combining elements of both the traditional and co-teaching models based on what she felt was best for Kathy's development. This aspect of Esther's influence on her student teacher's preparedness is discussed later in the chapter.

Influence of authentic teaching opportunities on readiness to teach. Across the co-teaching and traditional cases in this study, participants identified the authentic opportunities they were provided to teach during their clinical experiences as highly influential. These opportunities, particularly when they occurred while the student teacher was solo teaching, were instrumental in their preparation for leading their own classrooms. It was through these experiences that the participants came to understand the dynamics of leading a group of students and became familiar with a teacher's responsibilities in the classroom and beyond. These experiences also built confidence in their instructional abilities. The importance of these authentic learning opportunities aligns with Lave and Wenger's (1991) concept of legitimate peripheral participation, the process in which learners gradually build knowledge and confidence through increased engagement in the sociocultural practices of a learning community, ultimately helping them become contributing and causative members of that community.

Despite these experiences, all three participants advocated for longer clinical experiences, as they felt the increased time in the classroom and in front of students, authentically participating in the work of a teacher, would help student teachers feel even more prepared for leading their own classrooms. This finding supports the research of Oh et al. (2005) and Ronfeldt et al. (2014), who found that teacher candidates who participated in longer clinical experiences felt better prepared for leading their own classrooms. This conclusion, on the surface, contradicts current research on the co-teaching model of student teaching that identifies teacher candidates' full engagement in teaching practices throughout the semester as more beneficial than the gradual engagement timeline found in traditional models (Bacharach et al., 2010). However, as noted throughout Chapter 4, the co-teaching model described in this study utilized a more traditional gradual engagement timeline for the student teacher, so this

conclusion may not apply to more faithful representations of co-teaching models of student teaching. In sum, it was more the authentic opportunities to teach and act within the classroom environment that influenced participants' perceived readiness for the classroom than the clinical experience framework.

The school community as a learning community and its influence on readiness to teach. Across the co-teaching and traditional cases in this study, an understanding and appreciation for school culture and community were identified as influential on participants' preparation for leading their own classrooms. Participants shared how opportunities (or a lack thereof) to collaborate outside their classroom walls increased confidence in their abilities. These opportunities also helped them develop the skills to seek out help and resources in their subsequent teaching positions, as well as additional forms of instructional and emotional support for their learning and development. The importance of these learning communities reflects the findings of Wenger (1998), who outlined the significance of communities' shared responsibility and accountability in nurturing the development and growth of all members.

While school culture is an element of the clinical experience independent of any specific student teaching framework, all three participants' understanding of collaboration skills as a result of their clinical experiences is important to note as it contradicts current research on the co-teaching model of student teaching. Bacharach and Heck (2012) identified collaboration skills as one of the main benefits to co-teaching teacher candidates over the traditional model. However, in this study, the traditional model student teachers felt equally prepared in terms of their abilities to collaborate due to the opportunities they had to work with other educators in their clinical experience school communities. More so than the specific clinical experience

framework, it was the positive school culture and community that influenced participants' perceived readiness for the classroom.

Focused Learning Outcomes from the Clinical Experience

During the interviews, participants often connected what they were doing in their current positions to what they had learned during their clinical experience. These areas of learning were instrumental in building the initial educators' confidence as they transitioned into the role of lead classroom teacher. The focused learning outcomes described in this section highlight the application of skills and strategies learned during the clinical experience to participants' subsequent teaching positions.

Classroom management as a focused learning area. Across the co-teaching and traditional cases in this study, participants identified classroom management strategies as a key takeaway from their clinical experiences that helped them feel prepared for leading their own classrooms. They felt that their experiences helped them develop comprehensive overall classroom management plans, as well as strategies for dealing with individual student behavior. The cooperating teachers interviewed in this study identified developing a classroom management plan as one of their main focus areas for the student teachers, and the concept is prioritized in Farnham's teacher preparation program curriculum. The importance of this skill and its effect on initial educators' feelings of preparation for the classroom, particularly in urban settings like the three cases in this study, has been covered in education research (Knoblauch & Chase, 2015), so this conclusion supports those findings. Again, the participants' understanding and development of classroom management strategies and their subsequent application in their classroom teaching roles were independent of any specific clinical experience model.

Individualizing instruction as a focused learning area. Developing strategies for individualizing instruction was the only area in which there was a notable divergence between the two clinical experience models in this study. Kathy, the co-teaching model student teacher, felt that the increased co-planning with her cooperating teacher and their use of the seven co-teaching strategies helped her better understand how to group students and use different adults in the classroom to target instruction to individual student needs. Through co-planning, Kathy and Esther were able to discuss a variety of strategies for best meeting the needs of their students, and the seven co-teaching strategies provided them with multiple frameworks in which they could break the students into smaller groups for more personalized instruction. These were skills that Kathy applied in her subsequent work as a substitute and lead classroom teacher. Sidney and Sonya, the two traditional model student teachers, did not discuss individualized instruction as a key takeaway from their clinical experiences, nor did they discuss the application of this skill in their initial teaching roles. Research on the co-teaching model of student teaching argues that the model allows for increased attention to individual learners in the classroom, as it capitalizes on the skills and abilities of two teachers at all times (Bacharach & Heck, 2012; Soslau et al., 2018). The findings in this study support that perspective.

These conclusions – the clinical influences on one’s readiness to teach and focused learning outcomes - hold implications for teacher education programs, as well as faculty considering a shift to the co-teaching model of student teaching. Despite the focus of this study on the co-teaching model of student teaching, I do not offer implications for that specific framework because the case in this study did not reflect, with fidelity, the co-teaching model as presented by SCSU. This facet of the study is discussed later in the chapter.

Implications for Teacher Education Programs

Each participant's reflections on how their clinical experience prepared them for the classroom has implications for teacher education programs. Three are presented here: intentional student teacher/cooperating teacher pairings, consideration of school culture at placement sites, and authentic teaching opportunities.

Intentional student teacher/cooperating teacher pairings. Given the cooperating teachers' influence on the participants' feelings of preparedness for the classroom in this study, faculty in teacher preparation programs should thoughtfully consider how they pair student teachers with cooperating teachers. Research in the field notes that student teacher learning is more productive when pairings are made in which the teacher candidate feels suited to their cooperating teacher (Potthoff & Alley, 1996). Given its influence on shaping student teachers' readiness for the classroom, pairing needs to be more intentional than simply ensuring that student teachers are teamed with cooperating teachers who are considered effective instructional leaders. Being a good and/or experienced classroom teacher does not necessarily mean that one is a good mentor (Forsbach-Rothman, 2007). Rather, faculty in teacher preparation programs should consider more holistic factors when pairing members, such as a cooperating teacher's ability to clearly communicate questions and feedback or their skill in facilitating reflective conversations (Lu, 2010). In doing so, both teachers are set up for success in their relationship. Sonya, in her own reflection on her relationship with her cooperating teacher Mary, stated that Mary was perfect for her because her focus on logistics and organization balanced Sonya's more affective and free-flowing approach. As shared earlier:

I'm usually a really emotional, sensitive person that really likes, you know, those, like, relationships with students, but [Mary] taught me that you can have that, but you really

need to realize, like, what is it? She was just very matter-of-fact, and I think I really needed that. She was just so much more, like, logistics-based, you know? So, I think having that, that dichotomy, you know, working with her has really influenced who I am as a teacher now in a good way, I think. It, it definitely balanced out my more emotional side. (Traditional Case 2 – Sonya, March 29, 2018)

However, Sonya also acknowledged that Mary may not have been the best cooperating teacher for other types of student teachers. Thus, it behooves faculty in teacher preparation programs to critically consider how to best pair pre-service candidates and cooperating teachers to ensure their growth and development as the next generation of teachers.

Consideration of school culture at placement sites. Faculty in teacher preparation programs also need to consider the school culture for their clinical placement sites. This perspective is supported by research, which shows a positive relationship between school culture and teachers' sense of self-efficacy and perception of collaboration (e.g., Collie, Shapka, & Perry, 2012). Considerations should be made regarding the school-wide learning communities in which student teachers are placed so they have opportunities to collaborate and can find support beyond their individual classroom walls. Sidney noted how the relationships she developed and the staff support she felt at her clinical experience placement served as a resource and offered support, which in turn helped her develop confidence in her subsequent role as a classroom teacher. As shared earlier:

I was able to form a pretty good relationship with [Donna, a special education teacher at Victor] and ask for help with...how to, like, have lesson plans that were best catered to those students' needs, and so I think that really helped me not be so intimidated to ask for help from other staff members [at her new school] if I needed it...I think just, like, the act

of going up and asking them and taking the initiative and being proactive was really something that I learned at Victor. (Traditional Case 1 – Sidney, April 4, 2018)

To that end, teacher preparation program faculty should take into account the school-wide learning community, not simply the classroom environment, to further nurture pre-service candidates' growth and development as teachers.

Authentic teaching opportunities. Given the participants' stated value of their lead teaching opportunities during their clinical experiences, it seems necessary for teacher preparation programs to consider ways to maximize student teachers' time and engagement in authentic teaching practices throughout the program. This perspective is reflected in the growth of alternative placement options, such as PDS (e.g., Darling-Hammond, 2006; NCATE, 2010; Zeichner, 2002) and context-specific residencies (e.g., Fraser & Watson, 2014; Futrell, 2010; Matsko & Hammerness, 2014). There is also a growing library of education research on the value of longer field placements (e.g., Banks, 2015; Capraro et al., 2010; Ronfeldt & Reininger, 2012).

Through authentic teaching opportunities in schools and classrooms, teacher candidates are able to understand and experience the myriad of roles and responsibilities an educator embraces, which prepares them for their future work. Sonya highlighted this in her reflections on Farnham's teacher preparation program, stating that while the university coursework was useful, it was her time in classrooms working with students that ultimately shaped her teaching philosophy and skills. As shared earlier:

I feel like teaching is, kind of, something you just, I mean, like, like anything. It's something that you just have to do. You can't just keep talking about it and reading about it and reading case study after case study about different types of learners that are

going to be in your classroom. Yeah, more time in the classroom, less time at Farnham.
(Traditional Case 2 – Sonya, June 27, 2018)

Hence, faculty in teacher preparation programs should consider how they can increase the opportunities for student teachers to engage in authentic teaching experiences to facilitate their preparation for their future work in classrooms.

Implications for Faculty Who Develop Co-Teaching Models of Clinical Practice

Based on the conclusions drawn from this study and the eclectic implication history of Farnham's co-teaching for student teaching pilot program detailed in the Introduction, I offer implications for any other program choosing to adopt a co-teaching program of clinical experience. In this study, Farnham introduced and implemented a significant organizational change in their teacher education program when they piloted the co-teaching model of student teaching. Moving to a co-teaching framework for student teaching is a large paradigmatic shift. As such, steps need to be taken during implementation to ensure the fidelity and success of the new program design. In this study, initial steps taken by the Farnham research team included partnering with GPS (though no formal policy was developed for the partnership), learning about the co-teaching for student teaching model through the SCSU workshop, starting small through implementation at one GPS school, and hosting the two-day orientation for the first group of cooperating teachers and student teachers. These steps align with the initial phases of organizational change implementation recommended by Loucks-Horsley, Love, Stiles, Mundry, and Hewson (2003).

However, in this study, soon after the orientation, key components of the initiative started fading. Each sluffing hindered the implementation process and ultimately produced a model of student teaching that lacked fidelity to the original co-teaching model. For example, GPS

administrators stopped attending professional development sessions, and the Farnham research team experienced three different leaders in the first year and a half of the implementation timeline. Loucks-Horsley et al. (2003) outlined the importance of consistent leadership in any organizational change, as program leaders provide the necessary drive to maintain momentum throughout the change process. Programs considering the co-teaching model must ensure that a dedicated leadership team is in place to see the program implementation through. Additionally, clear expectations and responsibilities must be outlined and agreed upon through formal policy when organizational partnerships are created with schools and/or districts.

Similarly, subsequent orientation sessions for cooperating teachers and new Farnham student teachers were shortened to two hours and then one hour (instead of two days) due to time constraints identified by the GPS pilot school. The necessary ongoing and consistent support of professional development opportunities for the teaching teams in a programmatic shift of this magnitude was not present (Loucks-Horsley et al., 2003). Due to the absence of this support, it is possible cooperating teachers felt the need or latitude to make their own decisions as to how the co-teaching model was implemented in their classrooms, such as Esther employing a more hybrid version of the framework in her work with Kathy. This resulted in a partial representation of the co-teaching model in practice. With this in mind, teacher educators considering a shift to the co-teaching framework must ensure that the necessary human, financial, and time resources are in place to support the full implementation of the model.

In sum, faculty who develop the co-teaching model at their institution should carefully consider the principles of organizational change in order to better ensure the success of the co-teaching framework's implementation. Consistent leadership and ample resources must be in place throughout the process, and ongoing professional development opportunities for the

teaching teams must be present in order to support and ensure fidelity in the implementation of the program. The commitment of partnering schools and/or districts in the form of formal policy is also necessary. “The success of the co-teaching model depends on the preparation of all members of the partnership” (Heck & Bacharach, 2014, p. 27). This was true in Farnham’s implementation of the co-teaching model, and it holds true for any program considering a similar program shift.

The implications for teacher educators suggested by this study present opportunities for future research in the field, particularly as it pertains to the clinical experience and the co-teaching model of student teaching. These opportunities are presented next.

Implications for Future Research

In this study, there was little difference between participants’ perceptions of readiness for the classroom based on their clinical experience model. Across the cases, initial educators identified their cooperating teacher, their school community, and authentic teaching opportunities during their clinical experience as highly influential on their preparedness for the classroom. Additionally, all three participants identified classroom management strategies as a key learning outcome from their clinical experience. One resulting difference between the two models was Kathy’s identification of strategies for individualizing instruction as a key learning outcome, one Sidney and Sonya did not mention. Based on this study’s conclusions, I offer the following considerations for future research addressing the clinical experience and co-teaching model of student teaching.

A more accurate representation of the co-teaching for student teaching model. The iteration of a co-teaching model of student teaching detailed in this study was not a clear representation of the framework as presented by SCSU. As outlined earlier, Kathy and Esther

employed a more hybrid model, combining elements of both the traditional and co-teaching models in their work together. Further research that considers more faithful representations of the co-teaching for student teaching model would be beneficial in determining how the framework affects participants' perceived readiness for the classroom after they have completed their clinical experience. Additionally, a larger sample size for both co-teaching and traditional model participants would help to provide a wider and more robust range of perspectives in terms of the effectiveness of the frameworks.

Cooperating teachers' sense-making of new models of student teaching. Related to the previous implication, Esther chose to participate in the co-teaching model for student teaching pilot program and attended multiple orientation sessions, but she ultimately made the decision to change elements of the framework in her work with Kathy. She did not fully embrace the model as presented to her because she felt aspects of the traditional model were more effective in preparing student teachers for the classroom. Future research might consider how cooperating teachers navigate and make sense of new models of student teaching. This would be beneficial in determining how cooperating teachers could best be supported in their efforts to implement clinical experience frameworks.

Qualities and Practices of Effective Cooperating Teachers. The participants in this study, regardless of the framework, described positive relationships with their cooperating teachers and the strong influence those relationships had on their preparation for the classroom. This finding supports existing research on the importance of the cooperating teacher in shaping pre-service candidates during the clinical experience (Lee et al., 2012; Ronfeldt & Reininger, 2012). Future research building on these findings might consider the qualities, traits, and/or practices effective cooperating teachers possess and employ in their work with student teachers

to establish and nurture a positive relationship conducive to teacher candidates' growth and development.

Initial educators in full-time classroom teaching positions. The initial educators in this study completed their program and graduated in the winter of 2018. For these participants, the only teaching positions available in the middle of an academic year meant that their first professional roles encompassed small group instruction and/or substitute teaching duties. As such, the participants didn't truly embrace the role of a full-time classroom teacher at the start of a school year, establishing connections and sharing expectations with students to develop their own classroom environments. This may have affected the lens through which participants viewed their preparedness for the classroom. Future research might consider the effects of student teaching models on initial educators whose first professional experience is that of a full-time classroom teacher at the beginning of a school year.

Linking models of student teaching to student learning. The findings in this study were predicated on the reflections and perspectives of the participants, who shared their perceptions of their readiness for the classroom based on their clinical experience frameworks. These viewpoints, and my analysis of them, were subjective in nature. As the goal of teacher education programs is to prepare teachers to support students in the classroom, additional information linking the impact of different models of student teaching on student learning could inform which are more fruitful. Some of these relationships are considered in existing research on the co-teaching for student teaching model (Bacharach et al., 2010). However, future research might attend to student learning in initial educators' classrooms, determining how the participants' experiences in a specific student teaching model manifest themselves in their subsequent work with students.

The clinical experience is a critical component of any comprehensive teacher preparation program; it provides teacher candidates with opportunities to apply instructional theory from coursework while learning their professional role in an authentic community of practice. The co-teaching model of student teaching increases the amount of time teacher candidates are engaged in the practice of teaching, relying on a collaborative relationship between the student teacher and cooperating teacher to effectively plan, implement, and evaluate instruction to better meet the needs of every student. This study examined the efficacy of the co-teaching model as a means to understand student teachers' perceptions of their readiness to teach. As dissertation research, it lays a foundation for more in-depth examinations of the co-teaching model. Although the findings from this study suggest that there was little difference in participants' perceptions of readiness for the classroom based on their clinical experience model, they do point to the importance of the student teacher/cooperating teacher relationship, school culture, and having authentic opportunities to teach. As such, the findings contribute to the teacher education knowledge base and offer opportunities for future research.

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APPENDIX A: IRB Approval Letter



Melissa Spadanuda
IRB Manager
Institutional Review Board
Engelmann 270
P. O. Box 413
Milwaukee, WI 53201-041
(414) 229-3173 phone
(414) 229-6729 fax

<http://www.irb.uwm.edu>
spadanud@uwm.edu

Modification/Amendment Notice of IRB Exempt Status

Date: November 20, 2017

To: Hope Longwell-Grice, PhD
Dept: School of Education

Cc: Nathan Joynt

IRB#: 16.020

Title: Teaching and Learning in the Co-Teaching Model: Analyzing the Cooperating Teacher/Student Teacher Dialogues and Disposition Exchanges

After review of your proposed changes to the research protocol by the University of Wisconsin – Milwaukee Institutional Review Board, your protocol still meets the criteria for Exempt Status under **Category 1** as governed by 45 CFR 46.101 subpart b, and your protocol has received modification/amendment approval for:

- Addition of new interview and survey procedures

This protocol has been approved as exempt for three years and IRB approval will expire on **July 22, 2018**. If you plan to continue any research related activities (e.g., enrollment of subjects, study interventions, data analysis, etc.) past the date of IRB expiration, please respond to the IRB's status request that will be sent by email approximately two weeks before the expiration date. If the study is closed or completed before the IRB expiration date, you may notify the IRB by sending an email to irbinfo@uwm.edu with the study number and the status, so we can keep our study records accurate.

Any proposed changes to the protocol must be reviewed by the IRB before implementation, unless the change is specifically necessary to eliminate apparent immediate hazards to the subjects. The principal investigator is responsible for adhering to the policies and guidelines set forth by the UWM IRB, maintaining proper documentation of study records and promptly reporting to the IRB any adverse events which require reporting. The principal investigator is also responsible for ensuring that all study staff receive appropriate training in the ethical guidelines of conducting human subjects research.

As Principal Investigator, it is also your responsibility to adhere to UWM and UW System Policies, and any applicable state and federal laws governing activities which are independent of IRB review/approval (e.g., [FERPA](#), [Radiation Safety](#), [UWM Data Security](#), [UW System policy on Prizes, Awards and Gifts](#), state gambling laws, etc.). When conducting research at institutions outside of UWM, be sure to obtain permission and/or approval as required by their policies.

Contact the IRB office if you have any further questions. Thank you for your cooperation and best wishes for a successful project.

Respectfully,

Melissa C. Spadanuda
IRB Manager

APPENDIX B: InTASC Readiness Survey (Capraro et al., 2010)

Readiness Survey
(completed online)

Q1 What is your name?

Q2 In what school/grade level was your clinical experience?

Q3 I understand key concepts of my discipline. (k-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q4 I can create learning experiences that make subject matter more meaningful for students. (k-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q5 I have developed enthusiasm for my discipline and see connections to everyday life. (d-3)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q6 I am committed to continuous learning. (d-4)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q7 I can use different viewpoints or theories in my teaching of subject matter. (p-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q8 I develop and use curricula that encourage students to see, question and interpret ideas from diverse perspectives. (p-5)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q9 I can create interdisciplinary learning experiences that allow students to integrate knowledge, skills and methods from several subject areas. (p-6)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q10 I understand how students construct knowledge and acquire skills, as well as how to use instructional strategies that promote student learning. (k-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q11 I understand that students' physical, emotional, moral and cognitive development influence learning and know how to address these factors when making instructional decisions. (k-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q12 I know about developmental progressions and ranges of individual variation within each domain. (k-3)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q13 I use students' strengths as a basis for growth and their errors as an opportunity for learning. (d-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q14 I assess individual students' and groups of students' performance in order to design instruction that meets learners' current domain needs. (p-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q15 I stimulate students' reflection on prior knowledge. (p-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q16 I link new ideas to already familiar ideas, making connections to students' experiences. (p-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q17 I assess students' thinking and experiences as a basis for instructional activities. (p-3)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q18 I understand and can identify differences in approaches to learning and performance, including different learning styles and multiple intelligences. (k-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q19 I know about areas of exceptionality, including learning disabilities, visual and perceptual difficulties and special physical or mental challenges. (k-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q20 I know about the process of second language acquisition and about strategies to support the learning of students whose first language is not English. (k-3)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q21 I appreciate and value human diversity. (d-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q22 I am sensitive to community and cultural norms and make students feel valued for their potential as people, helping them to value each other. (d-4,5)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q23 I provide appropriate amounts of time and work for individual students who have particular needs. (p-3)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q24 I understand cognitive processes (critical and creative thinking, problem-solving) and how these can be stimulated during learning experiences. (k-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q25 I value the development of students' critical thinking and independent problem-solving capabilities. (d-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q26 I choose alternative teaching strategies and materials to achieve different instructional purposes. (p-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q27 I promote critical thinking and use multiple teaching and learning strategies. (p-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q28 I constantly monitor and adjust strategies in response to learner feedback. (p-3)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q29 I can use knowledge about human motivation and behavior to develop strategies for organizing and supporting individual and group work. (k-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q30 I know how to help people work productively and cooperatively with each other. (k-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q31 I take responsibility for establishing a positive climate in the classroom and maintaining such a climate in the school as a whole. (d-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q32 I engage students in individual and cooperative learning activities to help them develop the motivation to achieve. (p-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q33 I organize and manage the resources of time, space, activity and attention to provide active and equitable engagement of students in productive tasks. (p-3)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q34 I analyze the classroom environment and make decisions and adjustments to enhance social relationships, student motivation and productive work. (p-6)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q35 I understand communication theory, language development and the role of language in learning. (k-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q36 I understand how cultural and gender differences can affect communication in the classroom. (k-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q37 I recognize the power of language for fostering self-expression, identity development and learning. (d-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q38 I model effective communication strategies in conveying ideas and information. (p-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q39 I know how to ask questions and stimulate discussion in different ways. (p-3)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q40 I communicate in ways that demonstrate a sensitivity to cultural and gender differences. (p-4)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q41 I understand learning theory, subject matter and curriculum development, and know how to use this knowledge in planning instruction to meet curriculum goals. (k-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q42 I value both long- and short-term planning. (d-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q43 I value planning as a collegial activity. (d-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q44 I create short-range and long-term plans that are linked to student needs and adjusted as situations/needs require. (p-4,5)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q45 I understand the advantages and limitations of different types of assessments (e.g., criterion-referenced, norm-referenced, standardized and performance-based tests, observations systems and assessments of student work). (k-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q46 I know how to select, construct and use assessment strategies and instruments. (k-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q47 I understand measurement theory and assessment-related issues, such as validity, reliability, bias and scoring concerns. (k-3)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q48 I am committed to using assessment to identify student strengths and promote student growth rather than to deny students access to learning opportunities. (d-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q49 I use a variety of formal and informal assessment techniques (e.g., observation, tests, performance tasks, etc.) to enhance knowledge about the learners and to modify teaching and learning strategies. (p-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q50 I continually collect information through observation of classroom interactions, questioning and analysis of student work to evaluate the effect of activities on students. (p-4)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q51 I understand methods of inquiry that provide me with a variety of self-assessment strategies for reflection on my practice. (k-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q52 I am aware of major areas of research on teaching and of resources available for professional learning. (k-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q53 I am committed to reflection, assessment and learning as an ongoing process. (d-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q54 I recognize my professional responsibility for engaging in and supporting professional practices for myself and colleagues. (d-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q55 I use classroom observations, information about students and research as sources for evaluating outcomes of teaching and a basis for reflecting on and revising practice. (p-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q56 I seek out professional literature, colleagues and other sources to support my development as a teacher. (p-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q57 I understand schools as organizations within the larger community context. (k-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q58 I understand how the factors in the students' environment (outside school) may influence students' lives and learning. (k-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q59 I am concerned about all aspects of a child's well-being. (d-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q60 I am willing to consult with other adults regarding the education and well-being of my students. (d-3)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q61 I respect the privacy of students and confidentiality of information. (d-4)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q62 I participate in collegial activities designed to make the entire school a productive learning environment. (p-1)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q63 I make links with the learners' other environments on behalf of students by consulting with parents, counselors and teachers of other classes and other community agencies. (p-2)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q64 I establish respectful and productive relationships with parents and guardians. (p-4)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q65 I act as an advocate for students. (p-6)

	Not Yet Prepared (1)	Poorly Prepared (2)	Marginally Prepared (3)	Adequately Prepared (4)	Well Prepared (5)
Select One (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

APPENDIX C: Interview Protocols for Initial Educator Interviews

Interview Protocol (Initial Educator – Round 1)

Study Title: Teaching and Learning in the Co-Teaching Model

Persons Responsible for Research: Nathan Joynt - Graduate Assistant.
Advisor: Dr. Barbara Bales.

Interview Description: A semi-structured interview method will be employed for the interviews with the beginning teachers. The questions below serve as a general outline/sample of the types of questions participants will be asked. The questions will be based in part on participants' responses on the teacher preparedness survey. If the scope of the research changes or is expanded, a Change of Protocol will be submitted prior to implementation of those changes in order for the IRB to assess whether the changes impact the risk level to the project.

Questions:

- 1) Describe your clinical experience.
- 2) What factors or aspects of your clinical experience do you think influenced your preparation for leading your own classroom?
- 3) Do you feel your clinical experience prepared you to lead a classroom? Describe both positive and negative aspects of the experience as necessary.
- 4) What specific pedagogical knowledge do you feel most confident about in your own practice? What do you feel least confident about? Why (what part of your clinical experience supported this)?
- 5) What specific instructional skills do you feel most confident about in your own practice? What do you feel least confident about? Why (what part of your clinical experience supported this)?
- 6) Describe your ideal clinical experience and how it would prepare you for your own classroom.
- 7) Follow up questions will be dependent on participants' responses in an effort for the researcher to follow participants' lines of thinking in greater depth.

Interview Protocol
(Initial Educator – Round 2)

Study Title: Teaching and Learning in the Co-Teaching Model

Persons Responsible for Research: Nathan Joynt - Graduate Assistant.
Advisor: Dr. Barbara Bales.

Interview Description: A semi-structured interview method will be employed for the interviews with the beginning teachers. The questions below serve as a general outline/sample of the types of questions participants will be asked. The questions will be based in part on participants' responses on the teacher preparedness survey. If the scope of the research changes or is expanded, a Change of Protocol will be submitted prior to implementation of those changes in order for the IRB to assess whether the changes impact the risk level to the project.

Questions:

- 1) Describe your current teaching position.
- 2) What are some of your thoughts regarding how prepared you feel for this position based on your clinical experience?
- 3) What factors or aspects of your clinical experience do you think influenced your preparation for leading your own classroom? (this is a repeat from the first round of interviews, but we'll focus on anything that may have changed based on your first couple months of teaching) – AIM FOR SPECIFICS/STORIES
- 4) Do you feel your clinical experience prepared you to lead a classroom? Describe both positive and negative aspects of the experience as necessary.
- 5) How, if at all, do you see your clinical experience reflected in your classroom?
- 6) How, if at all, do you see your clinical experience reflected in your work with students?
- 7) *How, if at all, do you see the co-teaching model reflected in your current work?
- 8) Knowing what you know now, describe your ideal clinical experience and how it would prepare you for your own classroom.

Interview Protocol
(Initial Educator – Round 3)

Study Title: Teaching and Learning in the Co-Teaching Model

Persons Responsible for Research: Nathan Joynt - Graduate Assistant.
Advisor: Dr. Barbara Bales.

Interview Description: A semi-structured interview method will be employed for the interviews with the beginning teachers. The questions below serve as a general outline/sample of the types of questions participants will be asked. The questions will be based in part on participants' responses on the teacher preparedness survey. If the scope of the research changes or is expanded, a Change of Protocol will be submitted prior to implementation of those changes in order for the IRB to assess whether the changes impact the risk level to the project.

Questions:

- 1) Describe your current teaching position.
- 2) Survey – did you notice any differences in filling it out at the end of the semester than when you initially filled it out at the end of your clinical experience? Describe.
- 3) What are some of your thoughts regarding how prepared you felt for your first teaching position based on your clinical experience?
- 4) What factors or aspects of your clinical experience do you think influenced your preparation for leading your own classroom? (this is a repeat from the first round of interviews, but we'll focus on anything that may have changed based on your first couple months of teaching) – AIM FOR SPECIFICS/STORIES
- 5) Do you feel your clinical experience prepared you to lead a classroom? Describe both positive and negative aspects of the experience as necessary.
- 6) How, if at all, do you see your clinical experience reflected in your classroom?
- 7) How, if at all, do you see your clinical experience reflected in your work with students?
- 8) *How, if at all, do you see the co-teaching model reflected in your current work?
- 9) Knowing what you know now, describe your ideal clinical experience and how it would prepare you for your own classroom.

Interview Protocol
(Initial Educator – Round 4)

Study Title: Teaching and Learning in the Co-Teaching Model

Persons Responsible for Research: Nathan Joynt - Graduate Assistant.
Advisor: Dr. Barbara Bales.

Interview Description: A semi-structured interview method will be employed for the interviews with the beginning teachers. The questions below serve as a general outline/sample of the types of questions participants will be asked. The questions will be based in part on participants' responses on the teacher preparedness survey. If the scope of the research changes or is expanded, a Change of Protocol will be submitted prior to implementation of those changes in order for the IRB to assess whether the changes impact the risk level to the project.

Questions:

- 1) Describe your current teaching position.
- 2) What are some of your thoughts regarding how prepared you felt for your first full-time teaching position based on your clinical experience?
- 3) What factors or aspects of your clinical experience do you think influenced your preparation for leading your own classroom? (this is a repeat from the first round of interviews, but we'll focus on anything that may have changed based on your first couple months of teaching) – AIM FOR SPECIFICS/STORIES
- 4) Do you feel your clinical experience prepared you to lead a classroom? Describe both positive and negative aspects of the experience as necessary.
- 5) How, if at all, do you see your clinical experience reflected in your classroom?
- 6) How, if at all, do you see your clinical experience reflected in your work with students?
- 7) *How, if at all, do you see the co-teaching model reflected in your current work?
- 8) Knowing what you know now, describe your ideal clinical experience and how it would prepare you for your own classroom.

APPENDIX D: Interview Protocol for Cooperating Teacher Interviews

Interview Protocol (Cooperating Teacher)

Study Title: Teaching and Learning in the Co-Teaching Model

Persons Responsible for Research: Nathan Joynt - Graduate Assistant.
Advisor: Dr. Barbara Bales.

Interview Description: A semi-structured interview method will be employed for the interviews with the cooperating teachers. The questions below serve as a general outline/sample of the types of questions participants will be asked. If the scope of the research changes or is expanded, a Change of Protocol will be submitted prior to implementation of those changes in order for the IRB to assess whether the changes impact the risk level to the project.

Questions:

- 1) Please give me a brief history about your work as a cooperating teacher.
- 2) *What differences, if any, do you notice between the traditional model for student teaching and the co-teaching model for student teaching?
- 3) *How do you think these differences play out in your work with student teachers, particularly in preparing them for leading their own classroom?
- 4) What is most important for student teachers to learn in order for them to be prepared to lead their own classrooms?
- 5) What opportunities did you provide during the clinical experience last semester for your student teacher to learn these skills?
- 6) Describe the ideal clinical experience and how it would prepare your student teacher for their own classroom.
- 7) What do you think the clinical experience would benefit from that it does not offer students teachers at this time?
- 8) Follow up questions will be dependent on participants' responses in an effort for the researcher to follow participants' lines of thinking in greater depth.

APPENDIX E: Coding Manual

Situated Learning Theory Coding – Reflections on Teaching in Action

Category (Label)	Category Definition	Exemplar Quote
Tenet 1 – Legitimate Peripheral Participation (LPP)	Examples of instances during clinical experience in which teacher candidate participated authentically in the role of a teacher (e.g., planning, lead teaching, etc.)	[Jaime] would always find ways to be out of the classroom during the time that I was teaching, which I didn't think would make a difference, but I think I almost taught better without her there. And I think, again, it was just, like, the confidence level. I think that all of that practice gave me a chance to really find my, I think, philosophy and kind of practice that before I was actually in charge of students. (Sidney, personal communication, Spring, 2018)
Tenet 2 – Communities of Practice (CoP)	Examples of opportunities teacher candidate was provided during clinical experience to collaborate and/or interact with staff members (e.g., cooperating teacher, special education teacher, school administrator, etc.)	I was so comfortable with my principal and asking for support [from] other staff members, such as teachers, you know, to get advice on a specific student, or I was really open and honest if I was struggling with an area of the curriculum when I covered, you know, the first grade class for the end of the school year. I was, I knew I just had so much support in the school. So with that, I felt like I was really capable of doing anything, and that was a good feeling as a new teacher, knowing that I had that support. (Sonya, personal communication, Early Summer, 2018)

Category (Label)	Category Definition	Exemplar Quote
Tenet 3 – Power Dynamic Inherent in the Cooperating Teacher/Student Teacher Relationship (dynamic)	Examples of interactions between the teacher candidate and cooperating teacher in which the balance of their relationship was revealed (e.g., duality of learner/teacher roles, opportunities for input in planning, etc.)	[Jaime] was always asking me for my opinions and what I thought we should do. And I remember once [a student] said they couldn't see, and I told [Jaime] that maybe she should be moved to the front, like her desk should be moved, and Jaime said, "Well, you should just move it. Like, don't feel like you have to tiptoe around me." And so, I think since then, I felt more comfortable looking into that classroom as my classroom as well. (Sidney, personal communication, Late Winter, 2018)

Open/Axial Coding – Reflections on the Clinical Experience and Readiness to Teach

Category (Label)	Category Definition	Exemplar Quote
Readiness to Teach – Key Influences on Preparation (influence)	Aspects of the clinical experience that participants felt had the greatest influence on their perceived readiness for the classroom	The co-teaching was really helpful at first, but then when my cooperating teacher had to step back and I was in charge, that really, it was a big change. But after that, I was like, "Okay, if I can do this for two weeks, like, I think, I think I'll be okay." (Kathy, personal communication, Late Winter, 2018)

Category (Label)	Category Definition	Exemplar Quote
Readiness to Teach – Focused Learning Outcomes (learning)	Components of the teacher candidate’s teaching practices that participants felt were developed through the clinical experience	I think classroom management, honestly, is the first thing that comes to mind. I was really lucky enough...to have a cooperating teacher who was really firm and clear about her expectations and rules within her classroom [but] was really open to creating dynamic and firm, at the same time, expectations and rules with students, so making that classroom environment run off of what students want and...how they want their classroom to work. So I feel like that was one area in which I really tried to bring forward, even as a substitute. (Sonya, personal communication, Early Summer, 2018)
Readiness to Teach – Reflections on the Perfect Clinical Experience (dream CE)	Aspects of learning to teach that participants felt should be present in all clinical experience models	I feel like teaching is, kind of, something you just, I mean, like, like anything. It’s something that you just have to do. You can’t just keep talking about it and reading about it and reading case study after case study about different types of learners that are going to be in your classroom. Yeah, more time in the classroom, less time at Farnham. (Sonya, personal communication, Early Summer, 2018)

CURRICULUM VITAE

NATHAN JOYNT

EDUCATION

Doctor of Philosophy Degree in Urban Education

Emphasis: Curriculum and Instruction

May, 2019

University of Wisconsin – Milwaukee

Dissertation Title: *Ready to Teach: A Mixed Methods Comparison of Co-Teaching and Traditional Models of Student Teaching*

Master of Science Degree in Administrative Leadership and Supervision in Education

Licensure: Principal and Director of Instruction

December, 2009

University of Wisconsin – Milwaukee

Bachelor of Science Degree in Education: Middle Childhood – Early Adolescence

Minor: Spanish

May, 2004

University of Wisconsin – Madison

PROFESSIONAL EXPERIENCE

Associate Lecturer

Field Experience Supervisor

Department of Teaching and Learning

University of Wisconsin – Milwaukee

2019 – present

Principal

Woodview Elementary School

Grafton School District, Wisconsin

2012 – 2015

Associate Principal

Greendale High School

Greendale Schools, Wisconsin

2011 – 2012

Teacher (Grade 5)

Cumberland School

Whitefish Bay School District, Wisconsin

2005 - 2011

Reading/Language Arts and Science Teacher (Grade 6)

Steffen Middle School

Mequon-Thiensville School District, Wisconsin

2004 - 2005

**PRESENTATIONS
AT PROFESSIONAL
CONFERENCES**

Co-Presenter

Vitrano, J., & Joynt, N. (2017, October). *Put Me in Coach, I'm Ready to Co!* Presentation at the Second Annual National Conference on Co-Teaching, Minneapolis, MN.

Round Table Participant

Joynt, N. (2017, April). *edTPA: Implications for Urban Education Curriculum*. Paper presented at the American Educational Research Association Annual Meeting, San Antonio, TX.

Co-Presenter

Vitrano, J., & Joynt, N. (2016, October). *Oh, the Places We Will "Co": Urban Co-Teaching in Milwaukee*. Presentation at the First Annual National Conference on Co-Teaching, Minneapolis, MN.

Co-Presenter

Vitrano, J., Joynt, N., & Donder, D. (2016, August). *Oh, the Places We Could "Co": Learning About Co-Teaching to Improve Student Achievement*. Presentation at the Institute of Urban Education Annual Summer Conference, Milwaukee, WI.

**PROFESSIONAL
DEVELOPMENT
PRESENTATIONS**

Co-Facilitator

Vitrano, J., & Joynt, N. (2017, Spring). *The University of Wisconsin – Milwaukee Irreplaceable Cooperating Teachers*. Cooperating Teacher Focus Group, Milwaukee, WI.

Co-Presenter

Vitrano, J., & Joynt, N. (2016, January). *Strategies for Co-Teaching*. University of Wisconsin – Milwaukee Student Teaching Orientation, Milwaukee, WI.

**PROFESSIONAL
MEMBERSHIPS**

American Educational Research Association

Cohort Graduate Student Member

2017 – present