DIFFERING APPROACHES TO TEACHER PREPARATION: USING A MIXED METHODS DESIGN TO UNDERSTAND PERCEPTIONS OF EFFICACY AND CONFIDENCE IN RELATION TO PREPAREDNESS TO STUDENT TEACH BASED ON CLINICAL AND TRADITIONAL TEACHING PATHWAYS

A Dissertation
presented to
the Faculty of the Graduate School
at the University of Missouri-Columbia

In Partial Fulfillment
of the Requirements for the Degree
Doctor of Educational Leadership and Policy Analysis

by
NATALIE TYE
The undersigned, appointed by the dean of the Graduate School, have examined the dissertation entitled

DIFFERING APPROACHES TO TEACHER PREPARATION: USING A MIXED METHODS DESIGN TO UNDERSTAND PERCEPTIONS OF EFFICACY AND CONFIDENCE IN RELATION TO PREPAREDNESS TO STUDENT TEACH BASED ON CLINICAL AND TRADITIONAL TEACHING PATHWAYS

presented by Natalie B. Tye, a candidate for the degree of doctor of Educational Leadership and Policy Analysis, and hereby certify that, in their opinion, it is worthy of acceptance.

_______________________________________
Dr. Sandy Hutchinson

_______________________________________
Dr. Barbara Martin

_______________________________________
Dr. Nicole Nickens

_______________________________________
Dr. Doug Thomas

_______________________________________
Dr. Kitty Brant
Dedications

I first want to thank God for placing me in this great path I get to call “life.” Without God’s greatness, I would not have had this amazing opportunity.

I want to dedicate this work to my family who has supported me through the research process. Completing this doctoral program has been a whole family effort and has affected each member of my family. My focus on this research has caused sweat, tears, joy, and excitement and my husband has been my rock, my encouragement, and my constant motivation throughout. Thank you, Jimmy, for staying by my side and sacrificing for my goal. Without the love and support of my husband, four boys, my parents, and my in-laws, the process would have taken longer and the tears would have been greater. Words cannot express my gratitude to each of you.
Acknowledgements

I would like to thank Dr. Sandy Hutchinson for recognizing my leadership ability and supporting me through the doctoral process. Without her encouragement and guidance, I would not have been able to feel as successful in this journey. Further, I would like to thank Dr. Nicole Nickens for believing in me. She has encouraged me to always want more. I am greatly appreciative for her wisdom and guidance. Moreover, I want to thank my dissertation committee for the advice, experience, and mentoring required to move the research process forward. Dr. Kitty Brant, Dr. Barbara Martin, and Dr. Doug Thomas, your time, patience, and excitement related to this research study enhanced my motivation to complete this work.

This dissertation process has been both exciting and enlightening due to the research focus and purpose. I want to thank the Elementary and Early Childhood Department for supporting me in this research endeavor. I am honored to work with each member of this amazing department and am grateful for the support. A special word of thanks goes to Ms. Julie Batusic and Ms. Aprille Barlow for their constant assistance with this dissertation process.
# TABLE OF CONTENTS

Acknowledgements ........................................................................................................... ii  
Table of Contents ............................................................................................................. iii  
List of Tables .................................................................................................................. vi  
List of Abbreviations ....................................................................................................... viii  
Abstract ............................................................................................................................ ix  

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
</tr>
<tr>
<td>Introduction to the Dissertation-in-Practice</td>
<td>1</td>
</tr>
<tr>
<td>Background</td>
<td>2</td>
</tr>
<tr>
<td>Statement of the Problem</td>
<td>5</td>
</tr>
<tr>
<td>Problem of practice</td>
<td></td>
</tr>
<tr>
<td>Existing gap in the literature</td>
<td></td>
</tr>
<tr>
<td>Purpose of the Study</td>
<td>6</td>
</tr>
<tr>
<td>Research Questions</td>
<td>7</td>
</tr>
<tr>
<td>Conceptual/Theoretical Framework</td>
<td>8</td>
</tr>
<tr>
<td>Design of the Study</td>
<td>11</td>
</tr>
<tr>
<td>Setting</td>
<td>13</td>
</tr>
<tr>
<td>Participants</td>
<td>15</td>
</tr>
<tr>
<td>Data Collection Tools</td>
<td>18</td>
</tr>
<tr>
<td>Data Analysis</td>
<td>21</td>
</tr>
<tr>
<td>Limitations, Assumptions, and Design Controls</td>
<td>22</td>
</tr>
<tr>
<td>Definitions of Key Terms</td>
<td>23</td>
</tr>
<tr>
<td>Significance of the Study</td>
<td>25</td>
</tr>
<tr>
<td>Scholarship</td>
<td></td>
</tr>
</tbody>
</table>

iii
<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practice</td>
<td>26</td>
</tr>
<tr>
<td>Summary</td>
<td>26</td>
</tr>
<tr>
<td>2. Practitioner Setting for the Study</td>
<td>28</td>
</tr>
<tr>
<td>Introduction</td>
<td>29</td>
</tr>
<tr>
<td>History of the Organization</td>
<td>29</td>
</tr>
<tr>
<td>Organizational Analysis</td>
<td>31</td>
</tr>
<tr>
<td>Leadership Analysis</td>
<td>32</td>
</tr>
<tr>
<td>Implications for Research in the Practitioner Setting</td>
<td>34</td>
</tr>
<tr>
<td>Summary</td>
<td>41</td>
</tr>
<tr>
<td>3. Scholarly Review for the Study</td>
<td>43</td>
</tr>
<tr>
<td>Introduction</td>
<td>44</td>
</tr>
<tr>
<td>Review of the Extant Scholarship</td>
<td>44</td>
</tr>
<tr>
<td>Summary</td>
<td>71</td>
</tr>
<tr>
<td>4. Contribution to Practice – Results</td>
<td>73</td>
</tr>
<tr>
<td>Quantitative Findings</td>
<td>74</td>
</tr>
<tr>
<td>Summary of the Quantitative Results</td>
<td>100</td>
</tr>
<tr>
<td>Qualitative Findings</td>
<td>102</td>
</tr>
<tr>
<td>Traditional Lesson Planning</td>
<td>106</td>
</tr>
<tr>
<td>Traditional Implementation</td>
<td>119</td>
</tr>
<tr>
<td>Clinical Lesson Planning</td>
<td>130</td>
</tr>
<tr>
<td>Clinical Implementation</td>
<td>139</td>
</tr>
<tr>
<td>Traditional Reflection</td>
<td>146</td>
</tr>
<tr>
<td>Clinical Reflection</td>
<td>155</td>
</tr>
<tr>
<td>Traditional Collaboration</td>
<td>165</td>
</tr>
<tr>
<td>Clinical Collaboration</td>
<td>172</td>
</tr>
</tbody>
</table>
Traditional Preparedness ................................................................. 179
Clinical Preparedness ................................................................. 191
Summary of the Qualitative Results .............................................. 210
Themes ....................................................................................... 211
Summary of the Qualitative Themes .............................................. 229
Answering of the Research Questions ......................................... 229
Reflection of Conceptual/Theoretical Framework ......................... 245
Discussion ................................................................................. 250
Recommendations ...................................................................... 269
Direction for Future Research ...................................................... 278
Summary ..................................................................................... 280
5. Contribution to Scholarship ..................................................... 282
Submission-Ready Journal Article ............................................... 285
6. Scholarly Practitioner Reflection .............................................. 307
   How has the dissertation influenced my practice as an educational leader?
   How has the dissertation process influenced me as a scholar?
Appendix ...................................................................................... 310
   1. Confidence Survey
   2. Efficacy Survey
   3. Disposition Form
   4. Focus Group Questions
   5. PDS Report
References .................................................................................... 345
Vita .............................................................................................. 355
List of Tables

Quantitative Findings

Table 1: Non-significant Teacher Confidence Scale quantitative analysis findings
Table 2: Locate resources for preparing mathematics lessons
Table 3: Establish a feeling of community in my classes
Table 4: Develop an assessment rubric
Table 5: Create integrated lessons and units
Table 6: Teach Algebra
Table 7: Give students concrete experiences in mathematics
Table 8: Non-significant Teacher Efficacy Scale quantitative analysis findings
Table 9: How much can you do to get children to follow classroom rules
Table 10: Commits to high expectations and values the ability/capacity to learn
Table 11: Applies concepts learned to performance activities
Table 12: Commits to the development of critical thinking skills
Table 13: Commits to seeking out, developing, and continually refining teaching practices that generate more learning for students
Table 14: Commits to development of lessons that are interesting and engaging through a variety of instructional strategies to accommodate all learners, including those from diverse backgrounds, experiences, and cultures
Table 15: Commits to making appropriate adaptations and accommodations for students with diverse needs
Table 16: Appreciates and promotes acceptance of self-discipline, responsibility, and self-esteem
Table 17: Commits to a positive and enthusiastic attitude for teaching and learning to inspire self and others

Table 18: Believes students and colleagues should be treated and should treat others with kindness, fairness, patience, dignity, and respect

Table 19: Commits to relationships with school colleagues and instructor to support learning and well being

Table 20: Assesses the effects of choices and actions on others and actively seeks out opportunities to grow professionally in order to promote learner outcomes

Table 21: Fulfills professional responsibilities consistent with course expectations and policies concerning appearance, punctuality, attendance, and timely and accurate paperwork completion

Table 22: Qualitative pseudonyms
List of Abbreviations

CAEP: Council for the Accreditation of Educator Preparation
ECEL: Elementary and Early Childhood Department
UCM: University of Central Missouri
NCATE: National Council for Accreditation of Teacher Education
PDS: Professional Development School
MoPTA: Missouri Pre-Service Teacher Assessment
Abstract

This mixed methods study was designed to evaluate the traditional and clinical pathways to teacher education at one university setting according to efficacy, confidence, dispositional assessments, and qualitative focus groups gathering multiple perspectives. The conceptual framework for this study includes the five categories of national standards for teacher education, where Bandura’s Social Development Theory and Vygotsky’s Social Learning Theory, outline the significance of social interaction, pedagogy and self-efficacy, and guide reflective practice, all of which provide the theoretical framework for this study (Daniels, 2001; Grusec, 1992; McKenna, 2009). The Constructivist worldview guides research related to the problem, allowing participants to interpret their own understanding and interpretation of their experience through active learning (Bredekamp, 2014; Creswell, 2012; Khalid & Azeem, 2012).

Data collected generated a comparison of two groups utilizing an ANOVA method of quantitative analysis. Additionally, individual perspectives supported and enhanced the research design through thick, rich, descriptions of experiences related to the two pathways to teacher education. Data analysis revealed clear understanding of the differences and similarities between the two pathways, allowing for descriptive analysis to determine the future of the teacher education program.
SECTION ONE

INTRODUCTION TO DISSERTATION
Introduction to the Background of the Study

The practice of educating teacher candidates has become stagnant until recent years, relying on theory and lecture as effective strategies for preparing candidates for the realm of education (Darling-Hammond, 2007; Green, 2010). With the development of new accrediting criteria and a wave of newly hired teachers laying claim to an overall feeling of unpreparedness for teaching upon graduation, educators have adapted the medical clinical model of instruction into teacher education programs (Alba & Pennypacker, 1972; CAEP 2013 Standards, 2013; Goodwin, Smith, Souto-Manning, Cheruvu, Tan, Reed & Taveras, 2014; Green, 2010; Lord, 1997; NCATE, 2010). The University of Central Missouri (UCM) graduated the first fully immersed cohort of teacher candidates of the newly developed clinical pathway in May of 2014. University faculty and cooperating teachers evaluated these teacher candidates through each semester of course work, determined overall efficacy and disposition, and confidently recommended each to student teach and graduate with a teaching degree from UCM. Parallel to this pathway, UCM has continued to support and provide instruction to those teacher candidates enrolled in the traditional pathway. Although both pathways are concurrently available to teacher candidates, research is not available to support equivalent opportunities for growth and learning from both pathways.

Traditional Teacher Education Model

The traditional teacher education model is associated with theoretical framework heavily embedded in individual courses, with flexibility in course offerings and options (Darling-Hammond, 2007). Traditional programming provides two separate facets to course offerings: foundations and methods courses (Green, 2010). These two separate
facets of course offerings are taken at the choosing of the individual teacher candidate, providing a variety of learning experiences, which at times are disconnected and out-of-sync with the progression of learning (NCATE, 2010). This traditional method of course work has been in effect since the 1800s (Garland, 1982). Traditional teaching can be viewed as simply planning instruction based on core competencies through the guidance of state objectives, transmitting information from the instructor to an audience of learners (Darling-Hammond & Baratz-Snowden, 2007; Khalid & Azeem, 2012).

Early in the 1980s through late 1990s, teacher education was questioned in response to what teachers should know and be able to do (Cochran-Smith, 2006). The time in history provided an opportunity to move from the microteaching model of the early 1960s toward a shift in thinking (Garland, 1982). This shift encouraged generating new knowledge, and processing learning, providing a basis for an additional component to teacher education (Cochran-Smith, 2006). The era propelled teacher education into the realm of experiential learning where teacher candidates are able to develop knowledge and skills from meaningful experiences outside the traditional classroom environment (Catafhalmo, 2010; Cochran-Smith, 2006; Garland, 1982). The timeframe provided an opportunity to create field components attached to course requirements, identified as Professional Development Schools (PDS), introducing teacher candidates to a vast array of teaching models and experiences in real world settings with opportunities to engage in conversations with successful educators (Cochran-Smith, 2006; Dolly & Oda, 1997; Garland, 1982).
A Need for Change

Research has reflected a need for change; data have revealed educators’ feelings of being unprepared to teach upon graduation (Alba, E. & Pennypacker, 1972; Goodwin, Smith, Souto-Manning, Cheruvu, Tan, Reed, & Taveras, 2014; Green, 2010; Lord, 1997; NCATE, 2010). Lord (1997) made reference to the idea that students can learn required knowledge “without acquiring an appreciation and understanding of the subject” (p. 197). In 2010, the NCATE (2010) report included, “teacher education has too often been segmented with subject-matter preparation, theory, and pedagogy taught in isolated intervals and too far removed from clinical practice” (p. 2). As Darling-Hammond (2006) eludes to a disconnect between gaining formal knowledge in the university classroom and applying that knowledge later in field work, many studies have supported this belief by finding teacher candidates better prepared to apply theoretical knowledge and implement meaningful learning experiences with students when course work is delivered along with an interwoven field component (Baumgartner, Koerner, & Rust, 2002; Denton, 1982; Denton, Morris, & Tooke, 1982; Henry, 1983).

Introduction to the Clinical Model

Teachers in the 21st century are charged with teaching by differentiating to whole classrooms of learners, removing the focus from what content to teach and placing new focus on how to teach the content (Darling-Hammond, 2006; Rigelman & Ruben, 2012). The medical clinical education model has been defined as the transfer of knowledge, abilities, skills, thoughts, and beliefs from clinical faculties or instructor to the medical clinical student through direct interaction with patients (Miller, 1970).
The educational clinical model has been referenced as intertwining classroom instruction with guided practice and school-based learning experiences, while under direct instructor supervision, encouraging reflective practices (Allen, 2003; Anderson & Scamporlino, 2013; Clifford et al, 2005). The purpose for creating the clinical model is to bridge the gap between teaching theory in the university classroom and providing practice in public school districts (Baum et al., 2011). Further, clinical course work sequences instruction, integrates course content areas, and blends teaching methods across content areas (Darling-Hammond, 2006). Clinical work encourages teacher candidates to be able to “think, talk, and act as a teacher” (Clifford et al, 2005, p. 175).

Statement of the Problem

In recent years, the third year clinical block was introduced to teacher candidates enrolled in the clinical pathway. As an instructor for both the traditional and clinical pathways, the researcher immediately began to notice differences in student perceptions. Teacher candidates in the clinical pathway presented signs of high levels of self-confidence in the classroom whereas students enrolled in the traditional pathway displayed hesitance in the field. Due to the two different pathways to reach one desired outcome, a problem has developed during implementation. Teacher candidates in separate pathways have gained different teaching and learning experiences, which may have led to differing outcomes, directly impacting teacher efficacy. The concern is how teacher candidates in the clinical pathway portray a perceived overconfidence where those enrolled in the traditional pathway are perceived to not share feelings of mastery or exude as high levels of confidence as those in the clinical path. In support of this observation, Rigelman and Ruben (2012) have determined through global evaluation of
clinical programming that teacher candidates engaged in field experiences were better prepared to teach. Further, collaborative learning experiences and professional dialog with university instructors and cooperating teachers while engaged in field experiences and on campus better prepared teacher candidates to teach and possess more self-efficacy than those involved in a more traditional teacher preparation program (Darling-Hammond, 2006; Rigelman & Ruben, 2012).

The problem related to this study is how students enrolled in two different pathways to the same degree program seem to graduate with vastly different levels of confidence in relation to teaching ability. Regardless of pathway, traditional or clinical, teacher candidates exit the realm of higher education either with a sense of accomplishment or timid reluctance in relation to classroom preparation. According to Darling-Hammond and Baratz-Snowden (2007), there are teacher candidates who leave their program of study reporting “significantly higher feelings of preparedness than their peers” (p. 119). These same teacher candidates are also “more highly rated by employers who say they seek out these candidates because they are more effective in the classroom from their very first days of teaching” (Darling-Hammond & Baratz-Snowden, 2007, p.120).

**Purpose of the Study**

The purpose of this study was to determine if teacher candidates enrolled in different pathways at UCM are developing into confident teachers, or if teacher candidates in the different pathways enter into student teaching with differing levels of confidence. Further, this mixed methods study evaluated the traditional and clinical pathways at the University of Central Missouri according to efficacy, confidence, and
dispositional assessments, and adds to the greater body of knowledge nationally and locally. The researcher has chosen to collect quantitative results through analysis of archived data from the traditional and clinical pathways at UCM, as well as the collection of qualitative interviews (Creswell, 2012). The data gathered as a direct result of this work contributes to national accreditation data collection at UCM. The Council for the Accreditation of Educator Preparation (CAEP) has defined specific teacher education standards to raise the bar in higher education nationally (CAEP 2013 Standards, 2013).

The researcher has focused attention on teacher preparation in an effort to assist with the university accreditation process by aligning the research with national CAEP standards. A research study has been conducted comparing the two different approaches to one degree program in relation to teacher candidate efficacy. This study is needed for data collection with the intent of providing all teacher candidates enrolled in the UCM Elementary and Early Childhood (ECEL) education program similar learning experiences. Ultimately, this research will serve to provide the framework for course and program revisions within the ECEL department at UCM.

**Research Questions**

The research questions guiding this study are:

1. To what extent do teacher candidates who choose different paths for the same degree program feel prepared to teach prior to student teaching?
   
   o To what extent do teacher candidates who choose different paths for the same degree program feel prepared to teach prior to student teaching as measured by the Teacher Confidence Survey?
To what extent do teacher candidates who choose different paths for the same degree program feel prepared to teach prior to student teaching as measured by the Teacher Efficacy Survey?

To what extent do teacher candidates who choose different paths for the same degree program feel prepared to teach prior to entering into the student teaching semester as measured by self-assessment through the use of the teacher candidate disposition form?

What is the perception of readiness to student teach among teacher candidates at the completion of each pathway?

2. To what extent are university educators, principals, and cooperating teachers able to identify dispositional and academic differences between teacher candidates within the traditional and clinical pathways prior to the student teaching semester of course work?

To what extent do University faculty and cooperating teachers perceive teacher candidates are prepared to teach developmentally appropriate lessons?

To what extent do University faculty, principals, and cooperating teachers perceive teacher candidates are able to collaborate with assigned cooperating teachers and University faculty as a team?

What is the perception of readiness to student teach among university faculty, principals, and cooperating teachers assigned to teacher candidates from either pathway?

**Conceptual/Theoretical Framework**

The UCM Elementary and Early Childhood (ECEL) program was accredited by the National Council for Accreditation of Teacher Education (NCATE) and will be
weaving the following five categories of standards into both educational pathways for future CAEP accreditation. The accreditation process and defined standards serve as defining framework for the purpose of this study. The categories, as mentioned by Sawchuk (2013), are equipping teacher candidates with appropriate content knowledge and strategies, collaborating with districts to develop strong teacher candidates, recruiting a diverse and academically strong group of teacher candidates to the education field, demonstrating that graduates are successfully boosting student academic achievement, and maintaining a quality-assurance system (CAEP 2013 Standards, 2013). CAEP has planned to assess higher education programs related to candidate performance, use of data in program self-improvement, and educator preparation providers (EPP) capacity along with commitment to quality (CAEP 2013 Standards, 2013), leaving room for research related to teacher candidate efficacy as compared between the traditional and clinical pathways.

Vygotsky’s Social Development Theory is the catalyst for this study by facilitating learning through collaborative efforts related to teacher candidates, cooperating teachers, and university faculty (Atkinson & Pugsley, 2005; Daniels, 2001; McCallister et al., 1997; Rigelman & Ruben, 2012). Social Development Theory provides the concept of social interaction proceeding development in learning (Daniels, 2001). Ongoing dialogue during university course work, prior to student teaching, among university instructors, cooperating teachers, and teacher candidates encourages open-ended discussion and provides a culture for learning within the context and for the purpose of research (Bruffee, 1999; Rigelman & Ruben, 2012). By embracing collaborative learning, the presence of trust between the researcher, University faculty,
cooperating teachers, and teacher candidates will be present (Dee, 2012; Rigelman & Ruben, 2012).

Social Learning Theory, as discussed by Grusec (1992), outlines the significance of pedagogy and self-efficacy, and guides reflective practice, all of which provide the framework for this study (McKenna, 2009). According to Bandura (1986), social learning attributes affect planning for future and the acting out of such plans. The knowledge gained from teacher candidate learning experiences and social construct shape understanding of the world surrounding those experiences and contribute to pedagogical knowledge (Bandura, 1986; McKenna, 2009).

Social Learning Theory includes the acquisition and development of “competencies, self-beliefs of efficacy to exercise control, and self-regulatory capabilities for influencing one's own motivation and actions” (Bandura, 1986, pp.7-8). These attributes related to Social Learning Theory are the motivation for individual success for career goals and educational outcomes and are measured during disposition assessment as presented in this study (Bandura, 1986; Darling-Hammond, 2006). These aspects of theory support the researcher’s individual learning through collaborative contributions, encouraging and supporting direction, reflection, and future opportunities (Bandura, 1986).

The constructivist worldview will guide research related to the problem, allowing participants to interpret their own understanding and interpretation of their experience through active learning (Bredekamp, 2014; Creswell, 2012; Khalid & Azeem, 2012). Further, Vygotsky’s Social Development Theory will provide the framework outlining the importance of social interaction. Social Development Theory is the catalyst for social
learning and the development of a clinical education program. Learning occurs through collaborative efforts between teacher candidates, cooperating teachers, and university faculty (Atkinson & Pugsley, 2005; McCallister et al., 1997; Rigelman & Ruben, 2012). According to Bandura (1986), social learning attributes affect planning for the future and the acting out of such plans. The knowledge gained from teacher candidate learning experiences and social construct shape understanding of the world surrounding those experiences and contribute to pedagogical knowledge (Bandura, 1986; McKenna, 2009).

**Design of the Study**

Upon preparing research questions for the purpose of the study, the researcher determined the process of research will be both quantitative and qualitative in nature, allowing for individual experiences to weigh heavy on the results of data collection through survey and focus group techniques, relying on a mixed methods research design as the most fitting choice for this study (Creswell, 2012). A concurrent triangulation mixed-method design was utilized for the purpose of enhancing the strength and validity to the study through the generation of credible data with the purpose of answering a larger quantity of research questions as outlined for this research, as well as allowing for a shortened data collection time frame (Creswell, 2012). The research included deductive and inductive methods associated with quantitative and qualitative research design (Creswell, 2012). Quantitative data collection strengthened the study through collective numerical analysis, revealing relationships and differences, where qualitative data collection shed light on participant perspectives through thick, rich, descriptions relevant to the prospective pathway to teacher education. This design accounts for the strengths and weaknesses associated with both qualitative and quantitative research with the intent
of equalizing the gathered data, and consequently strengthening the overall study, enhancing validity (Creswell, 2012). Various data collection strategies were incorporated into the study to capture results through surveys (Appendix A & B), dispositions (Appendix C), and focus groups (Appendix D), allowing the researcher to triangulate data and enhance internal validity of the study, accounting for high levels of self-assessment from teacher candidates through instrumentation (Merriam, 2009). As a result of the researcher’s personal connection to the department of Elementary and Early Childhood Education, personal bias has been acknowledged. Additionally, to control for bias and increase reliability in data collection and analysis, the researcher triangulated data through incorporating multiple perspectives. Data were derived from University faculty, principals, cooperating teachers, and teacher candidates, improving the quality of the data and the accuracy of interpretations, providing personal insight and perspectives in relation to each educational pathway (Merriam, 2009). Although the concurrent triangulation mixed-method approach allows for separate quantitative and qualitative methods in the collection of data, the researcher had the available archived data prior to qualitative data collection. Therefore, the actual collection of quantitative and qualitative data for the study occurred systematically, allowing for the integration of quantitative data into the development of qualitative focus group interview questions and providing the gateway for data integration in the analysis of data and findings sections of this research (Creswell, 2012).
Setting

Warrensburg

Warrensburg is a town of approximately 19,000 residents and is located in central Missouri (UCM Facts, 2015). The town is home to UCM and serves as the university’s main campus location. According to the university certification office, the Warrensburg school district is classified as a suburban community based on building diversity (Nickens, personal communication, 2015). The public school district encompasses seven school buildings and a public preschool program (Warrensburg School District, 2015).

University of Central Missouri

The setting for the proposed research project is the University of Central Missouri (UCM), a 1,561-acre campus (UCM facts, 2015). The campus serves approximately 14,000 students from 42 states and 61 different countries (UCM facts, 2015). Fifty-three percent of the student population is female, 47% are represented by males (UCM facts, 2015). Of the student population enrolled at UCM, 88% are Missouri residents (UCM facts, 2015).

UCM is a fully accredited university offering 150 different programs of study, including a wide array of degrees through undergraduate, graduate, and doctoral programs, and offering 27 teacher certification areas (UCM facts, 2015). With an 80% admittance rate university-wide, the college of education awarded 557 degrees in 2014 (UCM Fact Book, 2015).

The university has 486 full-time faculty members currently on staff between UCM main campus, UCM Lee’s Summit, and through online programming (UCM facts, 2015). Of the current staff, 70 percent hold a doctoral degree related to specific fields of
study (UCM facts, 2015). The student-to-faculty ratio at UCM is 16 to 1 (UCM facts, 2015).

**College of Education**

The College of Education at UCM provides prospective students with a choice of more than 39 undergraduate and 16 graduate degree programs (UCM CED, 2015). The college is home to many departments and programs including Elementary and Early Childhood (ECEL), Educational Foundations and Literacy, Educational Leadership and Human Development, Teacher Certification, Career and Technology Education, and Clinical Services and Certification, to name a few (UCM CED, 2015). One dean and one associate dean, both serving from offices within the Lovinger Education building, lead the College of Education.

Prospective students seeking a career in teaching are provided several certification options within the College of Education. Upon admittance to the teacher education program, candidates are provided opportunities for certification ranging from birth through 12th grade in varied settings and across a variety of subject areas including early childhood, elementary, middle school, high school, special education, mathematics, art, music, and physical education (UCM CED, 2015). Admission to the teacher education program is a requirement prior to enrollment in content specific course work (UCM CED, 2015). Additional requirements prior to admittance to teacher education include a background check, letters of recommendation, a 2.5 grade point average, and having completed and passed all sections of the Missouri Content Exam as specified by the Department of Elementary and Secondary Education (UCM CED, 2015). According to
the College of Education, 82% of UCM College of Education alum teach in Missouri school districts (UCM CED, 2015).

**ECEL Department**

The teacher education program at Central is ranked second on a list of most popular programs at the university, second only to Criminal Justice, with 704 declared majors in Elementary and Early Childhood Education in 2014, graduating 152 teacher candidates in Elementary and Early Childhood in 2014 (State University, 2012; UCM Fact Book, 2015). Department faculty includes full-time faculty, full, associate, and assistant professors, non-tenure track full-time instructors, part-time instructors, and adjuncts.

**Participants**

**Teacher Candidates**

There are 52 teacher candidates enrolled in the Elementary and Early Childhood Education (ECEL) traditional pathway and 121 teacher candidates enrolled in the ECEL Clinical pathway at UCM currently. The semester prior to student teaching, ECEL traditional teacher candidates enroll in Professional Development School (PDS) while ECEL clinical teacher candidates enroll in Senior One course work. Using the ECEL department database, there are currently 36 teacher candidates enrolled in PDS course work and 31 teacher candidates registered for Senior One clinical course work. Teacher candidates currently enrolled in Senior One or PDS course work at UCM were invited to join separate focus groups in relation to their respective pathway, where a discussion was facilitated based on focus group criteria (Appendix D). Teacher candidates adhering to the above criteria, and at least 18 years of age, received an e-mail invitation to join focus
groups facilitated by the researcher. Participants included 35 traditional teacher candidates completing the PDS semester and 24 clinical teacher candidates completing the Senior one semester.

**University faculty**

Using the Elementary and Early Childhood Education (ECEL) department database, University faculty who have personally taught courses embedded in either the traditional or clinical pathways, or currently teach in both pathways and have experienced teacher candidates from either the traditional or clinical pathways, were invited to join separate focus groups. University faculty hired to teach courses for ECEL and who currently teach within the traditional pathway were invited to participate in a focus group discussion. University faculty hired to teach courses for ECEL and who are currently teaching within the clinical pathway were invited for a separate focus group. University faculty who currently teach in both pathways were invited to participate in a third focus group. Focus group questions were specific to the background of invited participants (Appendix D). Participants included six traditional faculty members, four clinical faculty members, and three faculty members who have experience teaching in both pathways.

**School District Principals**

Using the Elementary and Early Childhood Education (ECEL) department database, school district principals who have personally experienced teacher candidates from both the traditional and clinical pathways were invited to participate in the study. The three partnering districts included in the study are Grain Valley, Odessa, and Warrensburg, as these partner districts are the only schools associated with the UCM ECEL program having housed teacher candidates enrolled in both the traditional and
clinical pathways over the past three years. The elementary school building principals included in the study are Matthews, Prairie Branch, Sni-A-Bar, and Stony Point Elementary in Grain Valley; McQuerry Elementary in Odessa; and Maple Grove and Ridgeview Elementary in Warrensburg. Only these principals were invited to join a focus group discussion with questions related to each participant group experience (Appendix D). From those principals invited, ten participated in focus group discussions.

**Cooperating Teachers**

Using the Elementary and Early Childhood Education (ECEL) department database, school districts with cooperating teachers who have personally experienced teacher candidates from both the traditional and clinical pathways were invited to participate in the study. The three partnering districts included are Grain Valley, Odessa, and Warrensburg, as these partner districts are the only schools associated with the UCM ECEL program having housed teacher candidates enrolled in both the traditional and clinical pathways over the past three years. The elementary school buildings included in the study are Matthews, Prairie Branch, Sni-A-Bar, and Stony Point Elementary in Grain Valley; McQuerry Elementary in Odessa; and Maple Grove and Ridgeview Elementary in Warrensburg. From these buildings, the ECEL database has identified specific cooperating teachers who have experienced teacher candidates in traditional and clinical pathways. Only these cooperating teachers were invited to join a focus group discussion with questions related to each participant group experience (Appendix D). From those cooperating teachers invited, 19 participants attended focus group discussions.
Data Collection Tools

Available Quantitative Data

Disposition form. Teacher candidates self-rate and receive disposition evaluations by University faculty each semester. Disposition scores are archived within the ECEL department. The researcher requested archived rated disposition forms (Appendix C) completed the semester prior to student teaching for the purpose of comparing generated scores between the traditional and clinical pathways. The disposition form includes 12 questions designed to assess teacher candidates on efficacy, confidence, and overall preparedness to student teach. Responses to questions are on a continuous scale including not met, progressing, and exceeds (Creswell, 2012; Teacher Candidate Dispositions Assessment Form, 2013). Results generated form a comparison of two groups in terms of outcomes, relying on an ANOVA (Creswell, 2012).

Surveys. Two teacher surveys have been adapted from Woolfolk and Hoy (1990) by assigned ECEL faculty to assist educators in gaining a better understanding of self-rated efficacy and levels of confidence related to teaching ability through the UCM teacher education program. Teacher candidates have been asked to provide opinions related to statements over the past three semesters, with all answers being confidential and archived with the ECEL department. The researcher requested these archived survey data for the purpose of comparing teacher candidate opinions of efficacy and confidence between traditional and clinical pathways. The already created and distributed Teacher Efficacy Survey (Appendix A) included 24 questions, assessed according to the following nine-point Likert scale with 1 representing no influence (Nothing) with the question and 9 representing a large amount of influence (A Great Deal) in relation to the question. The
survey questions resulting in archived data are located in Appendix A. The Teacher
Confidence Survey (Appendix B) was also developed by ECEL faculty and includes 28
statements for teacher candidates to answer according to the following five-point Likert
scale with 1 representing *strong disagreement* with the question and 5 representing
*strong agreement* with the question. Statements provided to teacher candidates were
designed according to personal ability or confidence. Questions included in the archived
survey are located in Appendix B.

**Available Qualitative Data**

**Focus Groups.** Teacher candidates, cooperating teachers, district principals, and
university faculty perspectives were evaluated collectively through focus group data
(Appendix D) (Krueger & Casey, 2009). The purpose of focus group data collection was
to compare themes to check for internal consistency in programs (Krueger & Casey,
2009; Merriam, 2009). Questions were designed to facilitate conversations with teacher
candidates, cooperating teachers, district principals, and University faculty prior to the
student teaching semester in clinical and traditional pathways (Appendix D) (Merriam,
2009). The intent was to gather multiple realities of teacher efficacy in relation to teacher
candidate, cooperating teacher, and university faculty perspectives by facilitating a
conversation with those who have experienced, or have had contact with, teacher
candidates who have participated in either pathway at UCM (Creswell, 2012; Krueger &
Casey, Merriam, 2009). Emerging themes revolve around teacher confidence, teacher
preparation, lesson planning experience, and classroom management (Merriam, 2009).

Four focus groups, with a total of 35 participants, were facilitated for teacher
candidates enrolled in the traditional pathway, and three focus groups, with a total of 24
participants, were facilitated for teacher candidates enrolled in the clinical pathway. All teacher candidates invited to join a focus group discussion were to be seniors participating in student teaching during the subsequent semester. Focus groups were held at the end of the first semester of the senior year of course work. Conversations were digitally recorded for later transcription and analysis.

Separate focus groups were facilitated by the researcher at each of the partnering school district elementary buildings as specified within the previous participant section. The researcher facilitated a discussion with a total of 10 district principals, and then with a total of 19 cooperating teachers in separate focus groups. Dialogue was recorded using the iPad recorder application and flip camera.

Three focus groups of University faculty were facilitated by the researcher on the university campus. One focus group was facilitated for six University faculty teaching in the traditional pathway, while a second focus group was facilitated for four University faculty members teaching in the clinical pathway, and a third focus group was to be facilitated for three University faculty currently teaching in both pathways. The researcher facilitated the discussion and recorded the dialogue digitally.

Interview questions focused on perceptions of efficacy, confidence, and overall preparedness to student teach. Such questions included asking University faculty members how teacher candidates in each pathway are taught the lesson planning process, what opportunities are available for teacher candidates to implement lesson plans, and what supports are in place for teacher candidates to receive feedback and experience collaboration. Questions specific to principals and cooperating teachers reflected differences in how teacher candidates in the two separate pathways plan and implement
lessons, reflect and collaborate, and appear prepared to student teach. Teacher candidates in the two pathways were asked questions in relation to personal experiences in each pathway and perceived confidence and preparedness to student teach based on learning experiences.

**IRB and Ethics.** All participants were protected through the use of a dated informed consent form, acknowledging their rights during data collection (Creswell, 2012). Formal consent forms met with the approval of the IRB Committee of the University of Missouri – Columbia and UCM. Qualitative research data were not collected without dated letters of informed consent from all participants (Merriam, 2009). Focus group invitations were voluntary, with the option to withdraw from the research at any time during the process without repercussions (Krueger & Casey, 2009). Each focus group lasted approximately 60 minutes, was audio recorded and later transcribed. The groups were asked ten verbal questions; the answers were transcribed, and names were changed in the analysis of data (Krueger & Casey, 2009). To maintain privacy, all collected information was confidential (Creswell, 2012; Merriam, 2009). The researcher did not record names, student numbers, or any information that could be used to identify teacher candidates (Merriam, 2009). The risks associated with participating in this study were similar to the risks of everyday life (Merriam, 2009).

**Data Analysis**

**Quantitative Analysis**

Quantitative data were analyzed to answer Research Question One, sub-questions one and two. Quantitative data from archived surveys, newly collected surveys and teacher candidate dispositions (Appendix C) were collected and entered into the
Statistical Package for the Social Sciences (SPSS). The researcher incorporated comparison statistics generated from data collection for the purpose of contributing to the answering of Research Question One. The researcher relied on comparative statistics and an analysis of variance (ANOVA) to identify a statistical difference between teacher candidates enrolled in the traditional and clinical pathways of teacher education at UCM in regards to efficacy rating and confidence in teaching ability. Due to only comparing two groups, the Welch and Brown-Forsythe tests were used for the post hoc tests where a significant ANOVA F-value was found with p = .05 (Field, 2013).

**Qualitative Analysis**

Qualitative data were derived from focus groups with teacher candidates enrolled in course work in each pathway, principals from local school districts, cooperating teachers from the surrounding community, and University faculty charged with mentoring teacher candidates enrolled in each pathway (Krueger & Casey, 2009; Merriam, 2012). Transcripts were coded and reviewed for the purpose of developing themes (Krueger & Casey, 2009; Merriam, 2012). Themes emerged from data collection in the form of consistent patterns in dialogue and specific wording within transcription (Krueger & Casey, 2009; Merriam, 2012). The researcher viewed and reviewed transcription, being careful to incorporate understanding from all focus group contributors to ensure internal consistency in results (Krueger & Casey, 2009; Merriam, 2012).

**Limitations, Assumptions, and Design Controls**

Limitations of this research specifically relate to the survey instruments, setting, design of the study, and personal connection between the researcher and the institution.
The Teacher Efficacy Scale (Appendix A) and Teacher Confidence Scale (Appendix B) surveys were amended from the Woolfolk and Hoy (1990) scales, in 2014 by department faculty for the purpose of tracking teacher candidate perception of confidence and efficacy while progressing through course work. The instruments have not been empirically tested prior to this research and cannot be verified as reliable and valid. The analysis and findings of this research study are unable to be duplicated with transfer of knowledge across other institutions, limiting transferability, as this study specifically investigates the Elementary and Early Childhood (ECEL) Department at UCM (Creswell, 2012). Additionally, the concurrent triangulation mixed-method design results in a shortened data collection time frame and is not as rigorous as a longitudinal design (Creswell, 2012). Finally, the researcher recognizes a personal bias and connection with the participants and setting of the study through serving as an associate professor of early childhood education at UCM, with a direct association with the department and larger college. Additionally, the researcher teaches courses specifically related to each pathway to teacher education. The researcher is aware of potential biases embedded within the implementation of the study and interpretation of results.

**Definitions of Key Terms**

**Constructivism:** The ability of individuals to develop their own understanding and interpretation of their experiences through active and engaged learning.

**Cooperating teacher:** A teacher in the public school setting who invites teacher candidates into the classroom and proceeds to mentor the candidate for a duration of time.
Educational clinical model: A block of classes taken concurrently with a cohort of students, sharing the same faculty throughout course work and including an internship component.

MoPTA: The Missouri Pre-Service Teacher Assessment is required for certification by the state of Missouri for candidates seeking teaching certification and is aligned with Missouri’s Teacher Standards and Quality Indicators.

Pedagogy: The ability to understand how to teach content to a group of learners. The process of formulating an understanding of how to teach, incorporating a theoretical framework.

Professional Development School (PDS): A field-embedded experience designed to introduce teacher candidates to real world teaching models and experiences with opportunities to engage in reflective opportunities with cooperating teachers, and practice teaching techniques with students. For the purpose of this study, PDS is experience during the semester prior to student teaching for traditional teacher candidates.

Senior One: A field-embedded experience designed to provide extended learning opportunities to teacher candidates through full-day experiences in real world settings with opportunities to engage in collaborative opportunities with cooperating teachers, students, and principals. For the purpose of this study, this is the semester prior to student teaching for clinical teacher candidates.

Stand-alone course: A class separate from other courses with or without an internship component.

Teacher Candidate: A student accepted into the teacher preparation program and working toward a teaching degree.
Teacher Confidence: A teacher candidate’s belief in his/her ability to design and implement appropriate lesson plans while differentiating instruction and applying classroom management strategies.

Teacher Dispositions: Professional attitudes, values, and beliefs demonstrated through both verbal and non-verbal behaviors as teacher candidates interact with peers and professionals on campus and in field placements.

Teacher Efficacy: A teacher candidate’s belief in his/her ability to succeed in specific teaching situations.

Traditional teaching model: The selection of stand-alone courses creating a schedule tailored to teacher candidate needs and wants. Course work is prepared and taught by varying instructors, through a variety of formats including face-to-face, hybrid, and online. Courses may or may not include an internship component and teacher candidates do not develop into cohorts.

University faculty: An instructor hired by the university to supervise, teach, and mentor teacher candidates.

**Significance of the Study**

Although the new clinical model for education seems to be the answer to turning around traditional teacher education programs having been in practice for over 100 years, research cannot support a complete emersion into the newly developed model. Clinical teaching within the realm of education has not been adequately evaluated to determine self-efficacy or future student learning outcomes. Additionally, traditional teacher education programs have not recently been evaluated in terms of self-efficacy (Darling-Hammond, 2006). Even more significant is a lack of research comparing traditional
programming to the newly developed clinical pathway. The process for evaluating program changes and determining whether significant changes to degree completion requirements result in “highly qualified, competent teachers who will be markedly better than the graduates before them” (Kirby et al., 2006, p. xxi) is not well defined. A need for further research is required at both the university level and within the public school realm.

This research will provide a comparison of students enrolled in traditional and clinical pathways derived from one university setting by focusing on efficacy and confidence prior to student teaching. The collection of data will provide sufficient information to support the integrity of both programs, justifying equality in planning and instruction (McDavid, 2013). Further, the combination of survey results, disposition assessments, and focus groups will provide a clearer understanding of teacher candidate efficacy and confidence (Krueger & Casey, 2009). The additional data will be valuable to the researcher, as well as the ECEL department, as decisions are made concerning the traditional and clinical pathways and their relevance in teacher education.

Summary

In response to a recent NCATE report revealing teachers experiencing an overall feeling of being unprepared to teach upon graduation, teacher education programs have begun to evolve (CAEP 2013 Standards, 2013; NCATE2010). Many have moved from a stagnant traditional course design to a more involved clinical program layout and interpretation derived from the medical community (Alba & Pennypacker, 1972; Darling-Hammond, 2007, Goodwin et al., 2014; Green, 2010; Lord, 1997). The University of Central Missouri (UCM) has joined the movement by designing a clinical teaching model
parallel to the already present traditional teaching model in the Elementary and Early Childhood Education (ECEL) program (CAEP 2013 Standards, 2013; NCATE, 2010).

Upon implementation of the clinical teaching model at UCM, noticeable differences between teacher candidates enrolled in the two pathways have surfaced. In reaction to differing teacher candidate outcomes, this research study has evolved. Teacher candidates in the two separate pathways have gained different teaching and learning experiences, impacting teacher efficacy and confidence. Therefore, the purpose of this mixed methods study was to determine if teacher candidates in different pathways enter into student teaching with differing levels of confidence.

By using Social Development Theory as a catalyst for the study, the researcher will set out to answer a series of questions focused on teacher candidates, University faculty, and cooperating teachers’ perceptions of preparedness to student teach based on experiences gained in both pathways. Specific questions will be addressed through data collection consisting of surveys, disposition forms, and focus groups.

Research study results will provide an understanding of the culmination of the teacher education clinical model derived from the medical clinical model and serving as an alternate pathway to teacher education. The study will allow equivalent universities to review teacher education programs and course offerings to better serve the student body. Further, the research in this study will guide UCM faculty to refine course offerings and mentoring in each pathway, looking to the future of teacher candidates.
SECTION TWO

PRACTITIONER SETTING FOR THE STUDY
Introduction

Leadership, by many, is viewed as authority with a top-down organizational structure where innovation and policy are passed from executive to lower level managers who are expected to implement the actions and policies as specified by those organizational leaders (Bolman & Deal, 2008). For the purpose of this research, leadership has become the process of “coping with change” (Kotter, 2011, p. 38). Transformational learning has altered the Elementary and Early Childhood (ECEL) Departments’ recognition and teaching of theory and guided practice, assessment of learning, and modification of assumptions that influence thinking (Merriam & Bierema, 2014; Northouse, 2013). Social cognitive theory has become the catalyst for this leadership model, through immersion in a social environment and encouraging learning through social strategies (Merriam & Bierema, 2014).

History of the Organization

The University of Central Missouri (UCM) originated in 1871 as State Normal School Number 2 and quickly gained the reputation of becoming a respectable college for teacher education (University of Central Missouri, 2015). School origins can be traced back to the Missouri General Assembly grant, providing $50,000 toward the construction of the first teaching school in Warrentsburg (UCM College High, 2015).

The University of Central Missouri (UCM) is currently a four-year university. Over the course of existence the university has undergone several name changes. UCM was founded as State Normal School Number 2 in 1871, was renamed Central Missouri State Teachers College in 1919, became Central Missouri State College in 1945, and then transitioned to Central Missouri State University in 1972. The university underwent the
most current name change in 2006, moving from Central Missouri State University to University of Central Missouri (Stateuniversity, 2012). UCM is a fully accredited university, offering a wide array of degrees through undergraduate, graduate, and doctoral programs. With an eighty percent admittance rate university-wide, the college of education awarded 557 degrees in 2014 (UCM Fact Book, 2015).

The Central Missouri State Teacher’s College integrated a laboratory school setting in the program design (UCM College High, 2015). This building was the first training building of its kind, providing kindergarten through high school education and, in later years, adding a preschool program (UCM College High, 2015). The training school offered educational experiences to faculty members’ children and extended the invitation to the local community encompassing the Centerview area (UCM College High, 2015).

Throughout the lab school’s existence, three name changes were documented: Training School, College High, and University High (UCM College High, 2015). The high school was permanently closed in 1976, with the elementary following in 1980 (UCM College High, 2015). The associated preschool program was closed in 2014.

During the lab school’s operation, courses were held in the Lovinger education building. To date, the gymnasium is still in tact as an original piece of College High history (UCM College High, 2015). The adjacent Art Center was originally designed as the College High cafeteria and later housed the preschool program (UCM College High, 2015). Just northwest of the Lovinger building and Art Center, the Humphreys building was originally constructed as College High classroom space and is currently used by UCM to house offices, student success programs, and provide classroom space (UCM
College High, 2015). College High has historically been known as one of Central Missouri’s most prestigious teacher training programs (UCM College High, 2015).

Organizational Analysis

The structural framework of the University of Central Missouri is similar to other universities. The basis is a simple hierarchy with the president at the top of the design, allowing the provost to report between the president and each of the colleges within the university (Bolman & Deal, 2008; Mintzberg, 2005). What is unique to this structure is how the university system has a middleman in place at each level of management. This structure allows for interaction between the President, Provost, and Vice-Provosts. Vice-Provosts guide discussion and discuss topics with college deans and department chairs. College deans and department chairs in turn share knowledge and facilitate conversations with faculty and staff within programs.

Leadership at the university level can be viewed differently from one leader to another, and from one situation to the next. However, for the purpose of this research, leadership is identified as the process where a person influences others to achieve a shared goal (Northouse, 2013). Leadership can look diverse in different situations and from various people; however, all leaders have influence and imperfections (Ancona et. al., 2011; Northouse, 2013).

Having a structural frame in place is imperative to efficiency within an organization (Bolman & Deal, 2008). The ECEL department within the College of Education at UCM is not exempt from structural framing and careful analysis of such structural design (Catalfamo, 2010). How the department is framed explains how the organization functions and how faculty either do or do not work together toward a
common goal (Bolman & Deal, 2008). The structural frame can improve efficiency, coordination, communication, problem solving, and production (Bolman & Deal, 2008, Catalfamo, 2010). Further, the structure of the ECEL organization can maximize each faculty member’s drive for successful job-related performance (Bolman & Deal, 2008). Although the structural frame has the potential to raise motivation and team work, analysis and restructuring is often required for the purpose of removing work related deficiencies such as weak communication and lack of coordination or not having people in “the right roles and responsibilities” (Bolman & Deal, 2008, p. 47).

By creating two distinct pathways to teacher education within the ECEL department, unspoken restructuring has occurred. Typically, small groups and restructuring techniques improve performance (Bolman & Deal, 2008; Levi, 2014). A team’s culture includes norms, roles, and values, all of which are influenced by organizational culture. The shared values, beliefs, and norms of an organization make up its culture, and how this culture is developed and supported can either foster growth or limit teamwork (Levi, 2014). By changing the nature of teacher education through offering two distinct pathways to learning, the culture of collaboration and curriculum planning have changed within the department (Bolman & Deal, 2008; Gill, 2010). As the process for planning and discussing curriculum evolves to meet the needs of the new pathways, interactions among university instructors have also adapted and changed.

**Leadership Analysis**

According to Northouse (2013), the leadership style within the department and larger college has reflected a “high degree of participation and teamwork in the organization” (p. 81), satisfying the need to be involved and committed to work through a
distributed leadership model (Ancona et. al., 2011; Levi, 2014). The department chair seeks opportunities for relationship development and team building through innovative thinking and learning, adapting, and improving allowing faculty to become leaders within initiative work (Ancona et. al., 2011; Bennett & Jessani, 2011; Gill, 2010; Nonaka, 2000; Senge, 2006). Risk-taking is encouraged through a shared department vision, confirming ownership and vested interest, sparking confidence in productive failure, allowing faculty leadership to emerge, fostering interaction, and building teamwork (Bennett & Jessani, 2011; Gill, 2010; Levi, 2014; Selznick, 2005). The culture of learning and sharing moves faculty to higher accountability with additional power in the daily operation of the program, moving from perceived to actual control (French & Raven, 2005; Gill, 2010; Levi, 2014; Merriam & Bierema, 2014; Pfeffer, 2005).

Supporting Perrow (1972), the college and department model invests in faculty through active listening. By showing support, assisting with justifying weaknesses, and practicing open communication, college leaders model dedication to the field of education (Bolman & Deal, 2008; Gill, 2010; Preskill & Brookfield, 2009). Through these examples, the department chair and faculty continue to value open communication in leadership opportunities. The researcher in this study chooses to empathize for the purpose of understanding another’s situation and point of view, with pride on ethical and respectful decision-making (Gill, 2010; Perrow, 1972). Theorists suggest that individual commitment and internal motivation are essential to success (Bolman & Deal, 2008; Levi, 2014; Maslow, 2005; Merriam & Bierema, 2014). The ECEL leadership qualities result in a “motivated, loyal, and free-spirited workforce” (Bolman & Deal, 2008, p. 141) reflecting components of the human resource frame. As referenced from Bolman and
Deal (2008), the job of the leader is to “support … and empower,” (p. 186) others “to do the right thing” (Mihelic, Lipicnik, & Tekavcic, 2010, p. 32).

According to Northouse (2013), the leadership style within the department and larger college has reflected a “high degree of participation and teamwork in the organization and satisfies a basic need in employees to be involved and committed to their work” (p. 81). The department chair seeks opportunities for relationship development and team building through advanced networks with school districts, pairing faculty with schools based on relationships, school satisfaction, and needs. Further, risk-taking is encouraged, providing a safe-fail model of opportunity seeking within the department and larger college.

The ECEL department’s recently developed and defined parallel pathways are equally viable and clearly meet NCATE and DESE standards. The traditional pathway enrolls approximately 25 students each semester, whereas the clinical pathway enrolls approximately 30 students each semester. Instructors assigned to each pathway are relatively consistent each semester, with few faculty teaching in both pathways concurrently.

**Implications for Research in the Practitioner Setting**

Traditional courses at the University of Central Missouri (UCM) are offered Monday through Thursday, in class, online, and hybrid, depending on the course description and faculty preferences (UCM catalog, 2015). University faculty and assigned advisors guide teacher candidates through enrollment options each semester. Assigned faculty and advisors assist teacher candidates by following an overarching plan toward
graduation. Courses within this pathway may or may not include a field component for the purpose of practicing course content strategies (UCM catalog, 2015).

The traditional block semester prior to student teaching is titled the Professional Development School (PDS) semester and is parallel to the clinical Senior One semester of course work in the Elementary and Early Childhood (ECEL) program (UCM catalog, 2015). The PDS model was developed in 1996 as the result of a federally funded Goals 2000 grant (Appendix E) through the Department of Elementary and Secondary Education (DESE) and made available by the Central Regional Professional Development Center (Bell & Morrow, 1998). The purpose of the grant was to enhance school partnerships to develop effective teacher candidates, increase student achievement, create collaborative relationships with school districts, and to integrate communication arts across the curriculum (Bell & Morrow, 1998). Further, the purpose of implementing a PDS model was to provide an ideal education program for elementary students, a clinical setting for teacher preparation, continuous professional development experiences for university faculty and district staff, and research opportunities related to exemplary practice (Bell & Morrow, 1998).

The model was designed for teacher candidates to be assigned to elementary classrooms, assisting the classroom teacher for one to two hours each week (Bell & Morrow, 1998). Four PDS sites were created, developing collaborative relationships with Sterling Elementary and Warrensburg Middle School in the Warrensburg School District, and Clinton Elementary and Clinton High School in the Clinton School District. The first year included 108 teacher candidates and 60 teachers participating in the model. Of the 108 teacher candidate participants, nine were student teachers (Bell & Morrow, 1998).
Upon implementation of the newly designed PDS model during the 1997-1998 school year, assessments yielded data for the purpose of evaluating grant outcomes (Bell & Morrow, 1998). Bell and Morrow (1998) focused data collection based upon the four grant goals and purposes for a PDS model. Data were collected from classroom performance data, standardized testing, Missouri Show Me Standards Assessment, Anecdotal notes, personal interviews, and Student PDS Questionnaires (Appendix F) (Bell & Morrow, 1998).

Results derived from collection methods concluded the PDS partnership was perceived as increasing learning experiences for students and teacher candidates (Bell & Morrow, 1998). Classroom teachers reported that by having additional adults in the classroom allowed for more classroom assistance related to instructional needs. Further, three of the four schools participating in the initial PDS year believed students greatly benefited from experiencing PDS. Also appropriate to report was how the PDS model provided more realistic teaching experiences to teacher candidates than traditional course work without laboratory components (Bell & Morrow, 1998).

Although many benefits were clearly identified by implementing the PDS model at UCM, areas for improvement were also highlighted from the first year of the experience. Suggestions for improving the model included better communication between the school district and university, as well as increased communication between UCM faculty and teacher candidates (Bell & Morrow, 1998). Also discussed was a lack of true subject and teaching integration among university faculty. University faculty separated class time by subject and instructor focus, teaching in isolation rather than collaboratively. Last, advocates of the model found it would be more appropriate to allow
PDS teacher candidates to remain in the same school for student teaching experiences (Bell & Morrow, 1998).

Consequently, this first evaluation of the PDS model in 1998 has become the validation for the invention of the clinical pathway at UCM. To date, the PDS model continues to find success in public schools and university programs near Warrensburg, Missouri (N. Nickens, personal communication, August 24, 2015). However, the PDS model remains as an alternating schedule between one class period on campus and one day in the field placement with lower levels of interaction between faculty, staff, and teacher candidates (UCM catalog, 2015). Course work remains focused on integrating communication arts, rather than incorporating other core subject areas into the model (UCM catalog, 2015).

The clinical pathway was first piloted in 2012 at UCM in the ECE L program (N. Nickens, personal communication, August 24, 2015). The initial intent and vision for the clinical pathway was based on evidence that PDS was a successful model, providing enriching experiences to our students, but there is a greater need to integrate core subject area content into instruction and implementation (N. Nickens, personal communication, August 24, 2015). The clinical pathway was not meant to replace PDS, but to provide a different perspective related to meaningful teaching experiences (N. Nickens, personal communication, August 24, 2015).

The clinical pathway was not developed quickly by any means. As with any project or opportunity, the clinical pathway began with a vision. The vision for the Elementary and Early Childhood (ECEL) program stemmed from the traditional PDS and success with field experiences. Faculty could easily see the benefits to PDS, including
relevant learning experiences in actual classrooms with real teachers (N. Nickens, personal communication, August 24, 2015). The vision for the clinical pathway to expand on the PDS concept with more experiences in the field balanced with meaningful university classroom content. The process from vision to implementation was overseen by Dr. Nicole Nickens, and spanned over two years prior to first piloting the pathway (N. Nickens, personal communication, August 24, 2015).

The project was successful in meeting the ultimate goal of seeing the clinical model into fruition. Success of the project weighed on the success of teams through a clear direction and shared goals (Levi, 2014). It was imperative that faculty shared a common vision for teacher candidate learning experiences and in the case of developing a clinical pathway; few were in disagreement (Levi, 2014). Further, through the process, each task was complex, requiring additional resources, reframing of ideas, and challenging team members. Most important to the success of the project was a supportive organizational environment where resources were provided as teams worked on complex concepts (Levi, 2014).

Dr. Nickens provided resources and supports throughout the process by structuring collaboration opportunities for ECEL faculty. After sharing available research with the ECEL department, Dr. Nickens arranged for a series of conversations to occur, allowing all faculty to discuss and experience vision planning with colleagues within department, across department, and spanning across universities (N. Nickens, personal communication, August 24, 2015). Opportunities for collaboration occurred within the ECEL department, between the ECEL department and related departments within the college, with professionals in the field, among UCM alum, and discussion with other
universities who had attempted similar visions (N. Nickens, personal communication, August 24, 2015).

Internal planning took place through the visioning and outlining of the larger concept. Teams were created based first on areas of expertise, and then related to grade level experiences. Through the process, teams grew to encompass multiple smaller teams and then shrank to small groups of faculty (N. Nickens, personal communication, August 24, 2015). The interchanging teams were necessary to work through the larger vision and smaller details (Levi, 2014).

Collaboration with external departments was necessary to logistically plan for implementation of the clinical pathway. These collaborations took place with both the math and literacy departments at UCM to discuss the vision and faculty expectations, including higher numbers of field visits, teaching content in the classroom and in the field placements (N. Nickens, personal communication, August 24, 2015). By sharing the plan with these external campus programs, the clinical pathway was provided a larger opportunity for integration of core subject content and success rate (N. Nickens, personal communication, August 24, 2015).

Further discussion and collaboration was required during the planning process of the clinical pathway. ECEL faculty found great benefit from discussion from regional colleagues who had already attempted a clinical design (N. Nickens, personal communication, August 24, 2015). Such conversations occurred with colleagues, educators in the area, the professional community, student ambassadors, and UCM alum (N. Nickens, personal communication, August 24, 2015). Informal conversations
occurred with these key groups through advisory committee meeting round table discussions (N. Nickens, personal communication, August 24, 2015).

External university collaboration occurred through a visiting faculty member from Missouri State University, a visit to University of Missouri-Columbia, and a conference call with graduate students located at North Texas University (N. Nickens, personal communication, August 24, 2015). These discussions guided ECEL faculty to refine details and focus on other program’s obstacles during implementation (N. Nickens, personal communication, August 24, 2015). Through sharing of the process to create a clinical pathway at UCM, faculty remained open to key sources and their knowledge based on clinical programming experience.

The clinical pathway was first piloted at UCM during the fall semester of 2012, launching three blocks of courses: Young, Intermediate, and Senior One. Teacher candidates were selected from a three-part selection (N. Nickens, personal communication, April 16, 2015). First, faculty selected candidates who had earned at least a 3.0 grade point average while enrolled at UCM. Next, only candidates who had not yet taken methods courses in the education program were considered. Third, those candidates who met the first two criteria were e-mailed an invitation to participate in the clinical pathway pilot program (N. Nickens, personal communication, April 16, 2015). The combined total of teacher candidates enrolled in the first semester of clinical pathway equaled 51 students (J. Batusic, personal communication, April 16, 2015). After a successful pilot to the clinical pathway for teacher education, enrollment choice for the clinical or traditional program was offered to all teacher candidates enrolling in courses
(N. Nickens, personal communication, April 16, 2015). To date, there is not a formal process to become admitted to either pathway.

With the open enrollment option available to teacher candidates, prospective students are able to enroll in a pathway based upon personal choice. Teacher candidates continue with completing degree requirements within the chosen pathway through the degree program until graduation (UCM catalog, 2015). Once enrolled in one pathway, teacher candidates remain within that pathway unless conflicts occur requiring a pathway change. Due to the rare instance of path change, teacher candidates do not experience learning from both pathways, but rather learn through traditional methods or clinically based experiences (UCM catalog, 2015).

Differing from the traditional path, clinical course work is predetermined with course offerings in developed blocks progressing through the program from junior year through student teaching (UCM catalog, 2015). Clinical blocks allow for seamless instruction, allowing pre-service teachers to remain in the same classroom with an assigned instructional team. The instructional team is comprised of two or three university faculty who instruct in the classroom and mentor teacher candidates in the field (N. Nickens, personal communication, April 16, 2015).

Summary

The University of Central Missouri (UCM) has undergone significant change since it’s foundation in 1871 as a Normal school. Over the past 144 years, UCM has experienced adjustment of curriculum and courses based on national demands and regional needs. The university has survived historical changes, moving from a Normal school to a teacher’s college and in recent years adopting the name of University of
Central Missouri. It is the transformation of learning and the models incorporating best practices that have guided UCM to higher accountability and greater learning experiences for teacher educators. By understanding that change is necessary for growth and learning, the department faculty members employed early in the university timeline were able to research the needs of teachers to provide meaningful experiences to the student population.

It is only through leadership and transformational learning experiences that UCM has not only survived but persevered through history to become a leading university in teacher education programming. It is through this same concept that the education program at UCM has come to implement two pathways to teacher education. The two pathways began with leadership. One person was able to recognize a need for change and a group became intrigued with a vision.

The leaders placed within the Elementary and Early Childhood (ECEL) department at UCM have provided the foundation for growth and improvement of curriculum and course delivery options. By not settling for what has worked in the past and what has become known as traditional education, the ECEL department has chosen to research current best practices to improve instruction. The culture of learning in the ECEL department provided the framework for future excellence. What began as traditional teaching methods has emerged as two pathways to teacher education, allowing teacher candidates to select learning preferences. What holds the future of teacher education in the ECEL department is undetermined without research on the current best practices. Through the learning culture of the department, a need for research is necessary for growth and further understanding of preparedness to teach upon graduation.
SECTION THREE

SCHOLARLY REVIEW FOR THE STUDY
Introduction

Traditionally, teaching at the university level has been viewed as lecture-based, with the incorporation of theory in practice with a field-based location tied to course work (Green, 2010; Forzani, 2014). This system has been satisfactory for educators and students alike for over 100 years. Although there are many benefits to traditional teaching practices, the medical and business communities have stumbled upon a different teaching approach, incorporating social learning in the classroom and a field-based component, creating a renewed sense of self-efficacy in teacher candidates (NCATE, 2010).

Recent research supports the need for new, innovative teaching approaches with the possibility of turning out better-prepared teacher candidates (Connor & Killmer, 2001; Darling-Hammond, 2006; Darling-Hammond, 2014; Kirby et al., 2006; NCATE, 2010). Although a need has been identified, many institutions have struggled to find a best-fit approach to teaching future teachers in such a way that elementary students will benefit from instruction. With high stakes on standardized testing and a future where teacher quality is measured on the outcome of such test scores, universities seek to find a quality method of instruction to meet the needs of teacher candidates and their future students. Therefore, the University of Central Missouri has turned to the clinical model, adapted from the medical and business community. Although the clinical method is one way to reach future teachers and boost self-efficacy, the traditional method of teaching cannot easily be dismissed (Darling-Hammond, 2006).

Teaching Timeline

Traditional teaching methods have been in practice since the 1900s and are commonly referenced as theory in practice (Baum, Powers-Costello, VanScoy, Miller,
James, 2011; Forzani, 2014; Green, 2010). As early as the nineteenth century, educators were reflecting on best practices in education through the development of Normal schools (Forzani, 2014, Green, 2010). Normal schools were developed by passionate teacher educators drawing on their own teaching experiences, observations, and student engagement to provide learning opportunities to students (Forzani, 2014). According to Ogren (2005), Normal schools were not perceived as a collegiate experience, as those attending sought low-paying positions and the intent of the school was not for degree-seeking individuals, but rather for practical experiences equivalent to high school education (Garland, 1982; Ogren, 2005). Although Normal schools were not correlated with colleges or universities, a rapid expansion of public high schools occurred during the early 1920s, resulting in the transformation of the Normal school model and name, by incorporating these schools into the university setting (Darling-Hammond, 2006; Garland, 1982). These schools altered to become teacher’s colleges, with high school completion requirements at admittance (Ogren, 2005). Additionally, in response to the name change, those attending were able to seek teaching degrees at program completion (Ogren, 2005).

At the time of change for teacher’s colleges in the early 1920s, Woodring (1975) described early progressive educators as having “held a view of individual freedom” (p. 23), whereas society and schools were highly questioned and “conventionally educated teachers were prone to force children into conventional molds” (p. 23). The division between schools and educators promoted the development of “free schools, with teachers selected on the basis of their personal traits and social attributes rather than their professional or academic education” (p. 23). These differing views extended into the late
1950s, where Garland (1982) describes “pressures for change in teacher education came also from the increasing demand that teachers be held accountable for” (p. 21) student achievement. Cochran-Smith (2006) chose to describe this timeframe through the question, “What are the attributes and qualities of good teachers, prospective teachers, and/or teacher education programs?” (p. 11). This question, directed toward the 1950s and 1960s, provides understanding of the first critique of teacher educators in relation to student performance.

As an extension of the period, changes occurred in teacher education creating another distinct evolution in teaching (Cochran-Smith, 2006; Garland, 1982). From the late 1960s through the mid 1980s, a variety of models and programs were developed in order to answer the question, “What are the teaching strategies and processes used by effective teachers, and what teacher education processes ensure that prospective teachers learn these strategies?” (Cochran-Smith, 2006, p.12). The timeframe, “influenced by new studies of the scientific basis of teaching” (p. 95), brought forth assessments, relevant teaching methods, faculty responsibilities, and field placements (Cochran-Smith, 2006). The United States office of Education became involved by charging leaders in education with the arduous task of developing newer teaching models aligning “program goals, …measurable teacher behaviors, professional learning experiences, and content…, evaluation and feedback techniques, and a multipurpose management and evaluation system” (Garland, 1982, p. 22). The push for involvement created several teaching models still in practice today, contributing to effective teacher education programming.

Teaching models generated in an attempt to reform education between the late 1960s and mid-1980s include the concept of microteaching, competency-based
instruction, and an early model of clinical practice, also known as field-based instruction (Garland, 1982). The evolution of teaching practices during the timeframe illustrates the movement from theory, to content, and into a future teaching model guided by theory and practice (Darling-Hammond, 2006).

Microteaching was first introduced in 1963 as a teacher candidate learning experience designed to provide hands-on learning through reflective practice (Garland, 1982). As defined by Cooper and Allen (1971), microteaching is “a teaching situation that is scaled down in terms of time and numbers of students” (p. 1). Teacher candidates were first introduced a skill set and then provided an opportunity to practice that skill with a small group of children while being videotaped (Garland, 1982). The teacher candidate then reviewed the videotape while reflecting on the experience (Garland, 1982). After amending the original lesson plan, the teacher candidate was able to implement with a different small group of children (Garland, 1982). The concept was designed to encourage the mastering of specific skill sets through repetitive practice, while under the supervision of a university faculty member (Cooper & Allen, 1971; Garland, 1982). This technique acclimates teacher candidates with the art of teaching by gradually introducing skills and the practice of those skills with small groups of children (Cooper & Allen, 1971; Garland, 1982). Upon mastery of sub-sets of skills, teacher candidates will be prepared for more extensive teaching experiences with larger groups of children (Cooper & Allen, 1971).

The argument against this technique lies within the question Cochran-Smith (2006) provides to describe this teaching era: “What are the teaching strategies and processes used by effective teachers, and what teacher education processes ensure that
prospective teachers learn these strategies?” (p. 12). Further, Cochran-Smith (2006) has discussed how the scientific timeframe is a focus on learning the strategies needed to replicate effective behavior (Gage, 1972). According to Cochran-Smith (2006) the model was developed based on research focused on the “identification or the invention of transportable teacher-training procedures that produced the desired behaviors in prospective teachers” (p. 135). Gage (1963) originally found microteaching and its origin to be focused on the identification of specific desired student learning related to teacher skills. Microteaching has been viewed as a training program rather than teaching model, finding the overall purpose to be engaging “in specific classroom behaviors or competencies that had been correlated with gain scores in pupil achievement” (Cochran-Smith, 2006, p. 95). Tensions over time have contributed to the two separate thought processes related to preparing teacher candidates, relating further in history to Dewey (1904) and the distinct difference between that of a laboratory versus apprenticeship implementation of teacher preparation. Microteaching, as initially intended, has been viewed as training for the purpose of practical skills rather than a true immersion in the teaching experience and allowing the teacher candidate to learn theory, content, and classroom management techniques rather than replicate through apprenticeship (Dewey, 1904). The concept of microteaching, whether popular among educators and theorists, contributed to teacher education by providing new techniques for teaching teacher candidates through the 1960s, with elements still prominent in 21st century learning.

With the implementation and following of microteaching throughout the 1960s, the movement toward competency-based instruction in 1970 seems only natural. The competency-based movement began from the same force as microteaching, as a push
from the Department of Education, derived from researchers seeking accountability from teachers (Garland, 1982). Difficult to define, with unclear expectations and implementation guidelines, many researchers have found three distinct characteristics of this model (Garland, 1982; Houston & Howsam, 1973). The first being clearly stated objectives, known and understood by both the teacher and students (Garland, 1982). The second distinct characteristic of this teaching model is accountability. The expectation of this characteristic is the student will identify what competencies are necessary to demonstrate in order to be successful in course work. Additionally, the student will be responsible for this outcome in the learning process (Garland, 1982). The third characteristic of the competency-based teacher education model is individualization of course outcomes. The student engaged in competency-based instruction has some academic freedom related to course objectives and learning experiences (Garland, 1982; Houston, & Howsam, 1973).

Although many aspects of competency-based teacher education have contributed to current teaching practices, many concerns followed the movement into implementation (Garland, 1982). Those most concerned with this model of instruction focus on the inability to provide a complete competency-based program for students to complete (Garland, 1982). Researchers have found a theme generating among programs for the use of competency-based teacher education components within the typical programming process. While competency-based instruction has not become the pivotal point in education, the model has impacted the education timeline (Garland, 1982; Houston & Howsam, 1973).
Early in the 1980s through late 1990s, teacher education was again questioned in response to what teachers should know and be able to do (Cochran-Smith, 2006). The period provided an opportunity to move from what teachers do, as referenced in the microteaching timeframe, toward what teachers know and how teachers generate new knowledge (Cochran-Smith, 2006; Garland, 1982). This shift in thinking, generating new knowledge, and processing learning rather than mimicking others, provided a basis for an additional component to teacher education (Cochran-Smith, 2006). This knowledge force has propelled teacher education into the realm of experiential learning where teacher candidates are able to develop knowledge and skills from meaningful experiences outside the traditional classroom environment (Catafalso, 2010).

The era of questioning what teachers should know and be able to do provided an opportunity to create field components attached to course requirements (Cochran-Smith, 2006; Garland, 1982). Such experiences became known as laboratory classrooms, field experience, school-university partnerships, or Professional Development Schools (PDS), depending on the program and chosen courses. The purpose of field-embedded work relevant to teacher education has been to introduce teacher candidates to a vast array of teaching models and experiences in real world settings with opportunities to engage in conversations with successful educators (Dolly & Oda, 1997). An additional benefit from utilizing the field component has become the collaborative relationship between the university setting and the public school setting (Cochran-Smith, 2006).

The integration of field-based programming in higher education course work has led researchers and the educational timeline into the 21st century (Cochran-Smith, 2006). Recent contributions to educational programming have offered new insight related to the
traditional PDS model of field integration in traditional course work. At a point near the end of the 1990s, educational leaders developed goals to support the PDS model as a catalyst for other higher education institutions in the development of best practice for teacher candidates. Further, the PDS model was meant to become the promoter for restructuring and rejuvenating the field of teacher education (Darling-Hammond, 1994). Unfortunately, this model is no longer the only best practice for teacher candidates in higher educational settings. As mentioned from Dolly and Oda (1997), “in the economic arena, we expect change. But in the public school systems of the country, we have clung to the ideas and techniques of earlier decades and even prior centuries” (p. 179).

Research and experience have pushed the boundaries of theoretical framework and content delivery, requiring new and innovative techniques for teaching and learning. According to Cochran-Smith (2006), educators must now ask “how will we know when (and if) teachers know and can do what they ought to know and be able to do?” (p. 13). This question turns the focus of researchers and educators from the input perspective to an outcomes focus (Cochran-Smith, 2006).

According to Cochran-Smith (2006), “One of the most persistent themes in the history of teacher education has been sharp public criticism coupled with ardent demands for improvement and change” (p. 34). The push for continual reflection and change in the realm of education has once again allowed for creative solutions to delivering knowledge and learning (Darling-Hammond, 2006). The focus cannot be solely on course content, delivery of instruction, competency-based instruction, or field components alone (Cochran-Smith, 2006; Darling-Hammond, 2006). As noted by Darling-Hammond (2006), “The old transmission teaching model is not adequate for a knowledge-based
society that increases the cognitive requirements of most employment and of life in general” (p. 9). The scope must be broadened to encompass change from multiple perspectives. Darling-Hammond (2006) suggested, “It is important to have well-chosen courses that include core knowledge for teaching, it is equally important to organize prospective teachers’ experiences so that they can integrate and use their knowledge in skillful ways in the classroom” (p. 6). The minds of educational leaders must be open and accepting of radical change. As Cochran-Smith (2006) has suggested, the realm of education is “desperately seeking solutions” (p.34) for positive change in teaching models.

**Traditional Teacher Education Model**

The traditional teacher education model is associated with theoretical framework heavily embedded in individual courses, with flexibility in course offerings and options (Darling-Hammond, 2007). Further, traditional programming provides two separate facets to course offerings: foundations courses and methods courses (Green, 2010). Foundations courses are designed with the purpose of providing a foundation to the historical perspective of education, coupled with a theoretical framework related to teaching and learning in the educational setting (Green, 2010). Methods courses provide teacher candidates opportunities to gain insight specifically related to the process of teaching particular subject matter in the classroom (Green, 2010). These two separate facets of course offerings are taken at the choosing of the individual teacher candidate, providing a variety of learning experiences, which at times are disconnected and out-of sync with the progression of learning (NCATE, 2010). The traditional teacher education program completes state and national requirements through a semester of fieldwork,
sometimes referred to as Professional Development School (PDS) and a semester of student teaching. Specified course offerings throughout the program plan include laboratory components focused on field experiences in local school districts, designed for application of learned content coupled with university instructor support and modeling (Baum et al., 2011).

The traditional method of teacher candidate course work has been in effect since the 1800s (Garland, 1982). Traditional teaching can be viewed as simply planning instruction based on core competencies through the guidance of state objectives, transmitting information from the instructor to an audience of learners, most generally defined as a lecture method of teaching (Darling-Hammond & Baratz-Snowden, 2007; Khalid & Azeem, 2012). This method of instruction is common in university level instruction and involves the ability to cover course content through rote memorization (Khalid & Azeem, 2012). Traditional courses are stand-alone, in isolation from other courses and course content, with a disconnect from other subject areas or field components (NCATE, 2010).

Benefits to traditional classroom instruction include coverage of course context and objectives through various techniques including rote memorization, large and small group activities, and direct instruction (Khalid & Azeem, 2012; Lecturing: Advantage and disadvantages, 2013; Lord, 1997). Additionally, traditional courses are able to control the overall pace of instruction with an ability to compliment and clarify material (Khalid & Azeem, 2012; Lecturing: Advantages and disadvantages, 2013; Lord, 1997). An additional benefit to stand-alone traditional course work is the ability to connect specific field-based internship learning with course content and learning (Baum et al.,
Field placements within the traditional teaching model are commonly encountered toward the end of course work. As according to Kirby et al. (2006), the Professional Development School (PDS) concept couples university courses with public school districts in order to provide a collaborative teaching and learning experience for teacher candidates under the direction of university faculty and cooperating teachers. The PDS experience is associated with field placement requirements embedded in the traditional university teaching method (Kirby et al., 2006). Such experiences are based on the concept of “theory into practice” (Baum et al., 2011, p. 39), where teacher candidates attain theoretical framework in university course work and apply learning in the field-based component (Baum et al., 2011). A strong collaborative element is necessary for the success of a traditional education model with field placements (Baum et al., 2011).

Studies focused on teacher candidate PDS experiences versus those without a field placement have found benefits to the PDS model (Kirby et al, 2006). Such benefits include higher levels of confidence; program satisfaction; longevity of teaching career; and self-perceived skills, including content knowledge, theory, and student engagement (Blocker & Mantle-Bromley, 1997; Connor & Killmer, 2001; Kirby et al, 2006; Reynolds et al., 2002; Sandholtz & Wasserman, 2001). These studies have not taken into consideration alternate forms of highly integrated field experiences, but rather provided a focus on teacher candidate experiences related to PDS field experience as opposed to those teacher candidates with less continuity in field placements. Additional studies over the effectiveness in the PDS model of field experience reveal teacher candidate attitudes of career readiness and preparedness to teach upon completion of PDS, viewing teacher
education as a career with realistic understanding of role expectations (Tabachnik & Zeichner, 1984; Walling & Lewis, 2000).

Research has reflected a need for change; data have revealed educators’ feelings of being unprepared to teach upon graduation (Alba & Pennypacker, 1972; Goodwin et al., 2014; Green, 2010; Lord, 1997; NCATE, 2010). Lord (1997) made reference to the idea that students can learn required knowledge “without acquiring an appreciation and understanding of the subject” (p. 197). The traditional model of teaching provides many stand-alone courses without an integrated field component, with the expectation that teacher candidates will gain course content understanding, related theory, and teaching strategies for later use in a future teaching environment (Darling-Hammond, 2006, Darling-Hammond & Baratz-Snowden, 2007). The concern lies within future teaching effectiveness upon completion of course work. As Darling-Hammond (2006) eludes to a disconnect between gaining formal knowledge in the university classroom and applying that knowledge later in field work, many studies have supported this belief by finding teacher candidates better prepared to apply theoretical knowledge and implement meaningful learning experiences with students when course work is delivered along with an interwoven field component (Baumgartner, Koerner, & Rust, 2002; Denton, 1982; Denton, Morris, & Tooke, 1982; Henry, 1983).

A NCATE (2010) report conveyed, “teacher education has too often been segmented with subject-matter preparation, theory, and pedagogy taught in isolated intervals and too far removed from clinical practice” (p. 2). In support of this concept, Darling-Hammond (2006) discusses traditional course work reflects fragmentation among courses, and between courses and prospective related field experiences. Teacher
candidates complete methods courses designed to enhance pedagogical content knowledge with the inability to practice those techniques simultaneously, under the direction of University faculty (Anhalt et al., 2006). At the completion of traditional course work, a field experience is typically available where the teacher candidate completes course work alone, with scheduled visits from the university faculty (Rigelman & Ruben, 2012). In some situations, the teacher candidate is left to tend to a class of learners alone for long periods of time, while the classroom teacher steps away from the classroom (Rigelman & Ruben, 2012).

A shift has been required of universities; teacher education will need to refocus attention from standardized course work to school embedded learning experiences in conjunction with constructivist classroom content (Goodwin et al., 2014; Khalid & Azeem, 2012; Lord, 1997; NCATE, 2010; United Federation of Teachers, 2012). The concern is not whether teacher candidates need the content from methods courses or field-embedded learning experiences in teacher candidate education programming, but rather that educators need to focus on the quality of course instruction, incorporating reflective dialogue and encouraging practical application of theory into practice while engaged in the field component (Rigelman & Ruben, 2012). In fact, Australian educators have determined that teacher candidates engaged in collaborative learning experiences and professional dialogue with university instructors and cooperating teachers while engaged in field experiences and on campus were better prepared to teach and possessed more self-efficacy than those involved in a more traditional teacher preparation program (Darling-Hammond, 2006; Rigelman & Ruben, 2012).
Medical Clinical Education Model

Medical education programming dates back to the 1800s where knowledge was passed from practitioner to practitioner, with or without formal schooling (Gwyer et al., 2003). At the start of World War I, in the face of medical emergency, clinical practice was first attempted in an effort to train medical practitioners (Gwyer et al., 2003). Interestingly, the first clinical program was an intense three-month program including 163 clock hours dedicated to the clinical field component. This first clinical experience was described as a practical educational experience for the purpose of patient care and treatment (Gwyer et al., 2003). By the early 1900s, the medical clinical model of education had undergone extensive changes, transforming into a nine-month program (Gwyer et al., 2003). The newly revised program expanded from the initial 163 hours in the field to a 1,200-hour program, dividing clock hours between theory and practice hours (Gwyer et al., 2003).

The medical clinical education model has also been defined as the transfer of knowledge, abilities, skills, thoughts, and beliefs from clinical faculty or instructor to the medical clinical student through direct interaction with patients (Miller, 1970). Some clinical researchers have chosen to adopt the concept of Ethnographic research to relate clinical practice with the acquisition of knowledge in the field (Atkinson & Pugsley, 2005). The basic reasoning for this association is founded on the idea that social life is a meaningful contribution to the application of theory (Atkinson & Pugsley, 2005; Creswell, 2012; Emerson et al., 2011; Merriam, 2009). Medical researchers have identified “social actors, as those individuals in the particular cultural framework being studied” (Atkinson, & Pugsley, 2005, pp. 229-230). Further, medical clinical students are
viewed as becoming immersed in the culture of the setting over an extensive amount of
time for the duration of the program of study (Atkinson, & Pugsley, 2005). During the
experience, medical clinical students interpret their learning through cultural knowledge
and awareness, engagement with peers, clinical faculty, medical staff, and with the
world they have chosen to associate (Atkinson & Pugsley, 2005; Creswell, 2012;
Emerson et al., 2011; Merriam, 2009; Miller, 1970). As defined through research and
theory, the aspect of ethnographic study most appealing to medical researchers is the
ability to learn about a specific social world complete immersion (Atkinson & Pugsley,
2005; Creswell, 2012; Emerson et al., 2011; Merriam, 2009). There is some disparity in
ability to immerse medical clinical students in different programs; however, the overall
concept, regardless of specific programming guidelines, is the actual participation in

In addition to theoretical reasoning for the development of clinical experiences,
medical students also gain adult learning content and training for certainty (Atkinson,
1984; McCallister et al., 1997). Students need motivation for the continuation of learning
and the ability to connect theory with practice in order to become confident in the
knowledge gained from the classroom as well as the ability to apply learning in a social
experience (Atkinson, 1984; McCallister et al., 1997; Miller, 1970). Earlier contact with
the medical community, and more specifically with patients, motivates medical students
to desire to learn for the purpose of applying content knowledge with the world of
medicine (McCallister et al., 1997). Atkinson (1984) has determined further importance
of the medical clinical model as providing safe experimentation for students. Medical
students require learning for the purpose of gaining confidence within the medical
setting, in order to become certain of course content (Atkinson, 1984). Additionally, on-going contact with patients has been associated with medical student motivation (McCallister et al., 1997). Medical students immersed in clinical programming are more eager to develop knowledge and understanding about health care (McCallister et al., 1997). Also, students with embedded clinical experiences are able to experience different aspects of health care in order to determine areas of interest and for the purpose of developing personal goals related to graduation and professional practice (McCallister et al., 1997).

Researchers consistently discuss the need for a quality clinical education component within professional training programs, as this piece is a determining factor of medical student success (Miller, 1970). The medical clinical component includes a variety of learning components, fluctuating between programs. Consistencies between programs include consistent interaction in the field and in the class setting with clinical instructors and a positive learning environment conducive to socialization with peers and in the medical field (Atkinson & Pugsley, 2005; Creswell, 2012; Emerson et al., 2011; Merriam, 2009; Miller, 1970). Further, medical clinical programs hold to the expectation for students to apply theory in practice, with the belief of a natural learning progression, while striving to become a reflective practitioner (Miller, 1970).

Bruffee (1999) has argued that what distinguishes collaborative learning from traditional classroom practice is the social context of learning. Professional social interaction, as a benefit to the medical clinical model, is the ability to interact with professionals in the field to mimic and relate to the professional setting in an acceptable way (Atkinson & Pugsley, 2005; McCallister et al., 1997; Miller, 1970). Through
interaction with clinical faculty, clients, peers, and through personal growth, medical students develop professional socialization (Atkinson & Pugsley, 2005; McCallister et al., 1997). It is only through this growth process that medical students are able to become reflective in relation to actions, behaviors, and growth (Catalfamo, 2010; McCallister et al., 1997). Medical clinical education models encourage reflection-in-action and reflection-on-action for students immersed in fieldwork (McCallister et al., 1997; Schon, 1987). Students must be able to reflect while engaged in the hospital setting, applying theory to practice (Catalfamo, 2010; McCallister et al., 1997; Merriam & Bierema, 2014; Schon, 1987). Once students gain confidence and understanding on the reflection process, these students are then able to reflect on their personal code of ethics, incorporate modeling from professionals in the field and from clinical facultys to gradually become more professional in their socialization (Atkinson & Pugsley, 2005; Darling-Hammond, 2006; McCallister et al., 1997; Miller, 1970). McCallister et al. (1997) further state “students’ learning is extended when they are offered the opportunity to improve their communication and and interaction skills through increased awareness, knowledge and practice with both clinical educators and clients” (pp. 84-85).

An instrumental piece to becoming a reflective practitioner is the understanding and inner working of feedback (McCallister et al., 1997). A consistent theme within the medical field is educating students of the many benefits and critical understanding of feedback within the context of adult learning. This should occur prior to clinical work (McCallister et al., 1997). Students are taught to understand the difference between providing anonymous feedback to an instructor during end-of-course evaluations or providing peers feedback on learning experiences or course work, versus providing and
receiving both positive and negative feedback in relation to clinical faculty role and relationship. Those unable to receive constructive feedback for the purpose of improvement tend to struggle with clinical placement and becoming receptive to improvement in the field, resulting in repression of those experiences rather than learning from the experience (McCallister et al., 1997).

**Clinical Teacher Education Model**

Many institutions have begun to mimic the medical clinical model (Kirby et al., 2006; NCATE, 2010; United Federation of Teachers, 2014), creating a more constructivist view for teacher education (Khalid & Azeem, 2012; Lord, 1997). Teacher candidates must be able to understand how to apply classroom learning in their future career as an educator with a classroom of young learners (Darling-Hammond, 2006). In order to apply learned knowledge in the field setting, teacher candidates need guidance and scaffolding of content through a variety of strategies, including modeling, critical thinking, planning and collaboration, as well as other valuable techniques (Darling-Hammond, 2006). Teachers in today’s learning environment perceive pressure to diagnose, organize information and gathered data, and coach students to attain varied learning goals (Darling-Hammond, 2006). According to the United Federation of Teachers (2005), universities should shift the focus of learning to clinical work while teacher candidates are still mentored by University faculty and cooperating teachers, where these teacher candidates are able to practice and learn under the guidance of seasoned instructors and practitioners.

Teachers in the 21st century are charged with teaching by differentiating to whole classrooms of learners, removing the focus from what content to teach and placing new
focus on how to teach the content (Darling-Hammond, 2006; Rigelman & Ruben, 2012). According to Khalid and Azeem (2012), the clinical model has been adapted with the intent of providing mentor teachers the ability to assist students through “problem-solving and inquiry-based learning activities with which students formulate and test their ideas, draw conclusions and inferences, and pool and convey their knowledge in a collaborative learning environment” (p. 171).

The educational clinical model has been referenced as intertwining classroom instruction with guided practice and school-based learning experiences while under direct instructor supervision, encouraging reflective practices (Allen, 2003; Anderson & Scamporlino, 2013; Clifford et al., 2005). Also, the clinical model has been reported as providing a more positive educational experience and confident first-year teacher experience (Allen, 2003; Kirby et al., 2006). The purpose for creating the clinical model to field-placement is to bridge the gap between teaching theory in the university classroom and providing practice in the preschool through 12th grade classrooms in public school districts (Baum et al., 2011). Further, clinical course work is designed for sequencing instruction, integrating course content areas, collaboration between University faculty and cooperating teachers, and blending of teaching methods across content areas, for a more “complete and well-understood landscape of learning” (Darling-Hammond, 2006, p 97) and, as a result, to be able to “think, talk, and act as a teacher” (Clifford et al, 2005, p. 175).

Baum et al. (2011) suggested three goals focused on the creation of an educational clinical model. The first goal requires community building among University faculty and cooperating teachers, as well as with key players in the school system. The second goal
suggests sharing the vision related to teacher experiences and learning opportunities with faculty and cooperating teachers. The third and final goal according to Baum et al. (2011) included “enhancing skills, competence, and dispositions related to supervision” (p. 39). Further, Darling-Hammond (2006) provided criteria for a well-developed clinical experience, including the integration of theory with practice within clinical and formal teaching experiences, building practice-in-practice knowledge through observation, case studies, and reflective analysis, and continuing evaluation (Clifford et al., 2005). With the implementation of a well-developed clinical experience, teacher candidates have changed their vision of the role of the teacher, adequately understanding all dimensions of a master teacher (Rigelman & Ruben, 2012).

**Social Learning Theory**

Social Learning Theory is the catalyst for social learning and the development of a clinical education program. Learning occurs through collaborative efforts between teacher candidates, cooperating teachers, and university faculty (Atkinson & Pugsley, 2005; McCallister et al., 1997; Rigelman & Ruben, 2012). Ongoing dialogue during university course work between university instructors and teacher candidates encourages open-ended discussion, provides a culture for learning, and encourages opportunities for risk-taking in a non-judgmental environment (Bruffee, 1999; Rigelman & Ruben, 2012). The university classroom providing open dialogue supports interaction and a sense of community among peer learners (Rigelman & Ruben, 2012). Further, as mentioned by Rigelman and Ruben (2012), research focused on learning has found an “increased confidence due to the support of their cohort colleague” (p. 987) and an overall willingness to take risks in the classroom those teacher candidates would otherwise be
fearful of attempting. Other benefits of collaborative learning have included the presence of trust between teacher candidates in the university classroom, the ability to express ideas and opinions freely without judgment and, most importantly, the understanding that there is more than one correct way to teach a classroom of learners (Dee, 2012; Rigelman & Ruben, 2012).

Social learning theory, as discussed by Grusec (1992), outlines the significance of pedagogy, self-efficacy, and guides reflective practice (McKenna, 2009). According to Bandura (1986), social learning attributes affect planning for the future and the acting out of such plans. The knowledge gained from teacher candidate learning experiences and social construct shapes understanding of the world surrounding those experiences and contributes to pedagogical knowledge (Bandura, 1986; McKenna, 2009). Although the clinical education model encourages socialization and collaboration, the first step in engaging for a successful learning experience relies on the teacher candidate as an individual. The teacher candidate must be aware of personal abilities and strengths, and in order to succeed must have high levels of self-efficacy (Bandura, 1986; Darling-Hammond, 2006). Bandura (1986) further mentions motivation in terms of personal learning with the goal of action. The university faculty must cultivate a spirit of learning by placing responsibility on the teacher candidates and their personal self-directedness (Bandura, 1986; McKenna, 2009).

Social Learning Theory includes the acquisition and development of “competencies, self-beliefs of efficacy to exercise control, and self-regulatory capabilities for influencing one's own motivation and actions” (Bandura, 1986, pp.7-8). These attributes related to Social Learning Theory are the motivation for individual success for
career goals and educational outcomes (Bandura, 1986; Darling-Hammond, 2006). These aspects of theory support individual learning through collaborative contributions and attainment of personal and professional goals (Bandura, 1986). This skill set encourages and supports direction, reflection, and future opportunities (Bandura, 1986).

Although there is an aspect of individual accountability within the realm of Bandura’s theory, a large amount of support is required from mentors and leaders, especially when referencing teacher candidates (Bandura, 1986). Teacher candidates need support throughout the learning process by incorporating incentives and motivation, as well as theory-in-practice for understanding and meaning of content through modeling of pedagogy and extensive discussion reflecting on field-based observations (Bandura, 1986; Grusec, 1992; McCallister et al., 1997; McKenna, 2009).

**Pedagogy and Efficacy**

Pedagogical thought in relation to teacher education is still a newly formed concept and appears to be strongly related to teacher preparation programs (Darling-Hammond & Baratz-Snowden, 2007; Holtzman et al., 2005). Researchers have determined it necessary to place emphasis on pedagogy in education to understand how teachers deliver instruction effectively (Darling-Hammond & Baratz-Snowden, 2007). Pedagogy, as described by Darling-Hammond and Baratz-Snowden (2007), is “particular practices that help teachers develop the kinds of teaching expertise necessary to ensure that all children learn” (p. 123). Pedagogy is the ability to understand how to teach content to a group of learners and is the process of formulating an understanding of how to teach, incorporating a theoretical framework (Daniels, 2001; Darling-Hammond & Baratz-Snowden, 2007; Johnson & Johnson, 2009).
Pedagogy includes many components of teacher education, including open dialogue and discussion, reflection, self-assessment and student teaching performance (Darling-Hammond, 2006; Darling-Hammond & Baratz-Snowden, 2007). Each component has been designed with the intent of supporting the teacher candidate’s ability to learn through theory-in-practice (Darling-Hammond & Baratz-Snowden, 2007). Further, pedagogy becomes the culture of teaching and learning in the classroom (Darling-Hammond, 2006).

Regardless of pathway, traditional or clinical, teacher candidates exit the realm of higher education either with a sense of accomplishment or timid reluctance in relation to classroom preparation. According to Darling-Hammond and Baratz-Snowden (2007) there are teacher candidates who leave their program of study reporting “significantly higher feelings of preparedness than their peers” (p. 119). These same teacher candidates are also “more highly rated by employers who say they seek out these candidates because they are more effective in the classroom from their very first days of teaching” (Darling-Hammond & Baratz-Snowden, 2007, p.120). These teachers possibly have higher rates of self-efficacy, “the judgment of his or her capabilities to bring about desired outcomes of student engagement and learning” (Tschannen-Moran, Hoy, & Hoy, 1998, p. 783).

The importance of teacher self-efficacy in teacher candidate preparation programming is due in part to one’s own sense of efficacy, but furthermore relates to future behavior in the school setting (Darling-Hammond, 2006; Johnson & Johnson, 2009; Tschannen-Moran & Hoy, 2001). As described by Tschannen-Moran and Hoy (2001), “efficacy affects the effort they (teachers) invest in teaching, the goals they set, and their level of aspiration” (p. 783). Further, self-efficacy has a direct relationship with
self-regulation over behaviors and situations (Bandura, 1977; Grusec, 1992; Johnson & Johnson, 2009). Teacher candidates have been found more likely to be open to new ideas, perspectives of others, and guide instructional practices while maintaining control over the environment and exhibiting confidence during instruction (Bandura, 1977; Grusec, 1992; Tschannen-Moran & Hoy, 2001). Further, teacher candidates with higher levels of self-efficacy have been reported as having a greater commitment to the teaching profession (Coladarci, 1992; Darling-Hammond, 2006; Tschannen-Moran & Hoy, 2001).

Researchers have agreed that self-efficacy is a large contributor to student success, but what researchers cannot agree upon is how to effectively measure efficacy in teacher candidates (Darling-Hammond, 2006; Rand Corporation, 2015). Created instruments have ranged from short, simple questionnaires to lengthy measurement tools (Tschannen-Moran & Hoy, 2001). Such measurement tools include the creation of the RAND measure, a two question instrument; Gusky’s responsibility for student achievement, a 30-item instrument; the Teacher Locus of Control, a 28-item instrument; The Webb Scale, a seven-item instrument; the Ashton Vignettes, a 50-item instrument; Gibson and Dembo’s Teacher Efficacy Scale (TES), a 30-item instrument; and Bandura’s Teacher Self-Efficacy Scale, a 30-item instrument (Tschannen-Moran & Hoy, 2001). Although different in layout, item length, and questioning style, overall study results yielded commonalities related to self-efficacy (Tschannen-Moran & Hoy, 2001). The above-mentioned instruments have contributed to the understanding of efficacy, revealing two distinct factors (Coladarci, 1992; Tschannen-Moran & Hoy, 2001).

Bandura (1977), along with other researchers in the field, has argued how efficacy includes two aspects of change: outcome expectation and efficacy expectation (Coladarci,
Outcome expectation is “a person’s estimate that a given behavior will lead to certain outcomes” (Bandura, 1977, p. 193). Efficacy expectation is the “conviction that one can successfully execute the behavior to produce the outcome” (Bandura, 1977, p. 193). Efficacy, for the purpose of this review, is reflective of the teacher candidate. The first of the two aspects is referenced as general efficacy, meaning the equivalent as outcome expectation. General efficacy focuses on the teacher candidate’s assessment of his/her own ability to change student performance (Tschannen-Moran & Hoy, 2001). Personal efficacy, the equivalent to efficacy expectation, is the teacher candidate’s personal opinion of teacher confidence (Coladarci, 2010; Tschannen-Moran & Hoy, 2001). These two distinctions are relevant to the study because, as Bandura (1977) has illustrated, a teacher “can believe that a particular course of action will produce certain outcomes, but if they entertain serious doubts about whether they can perform the necessary activities such information does not influence their behavior” (p. 193). Therefore, a teacher candidate can believe University faculty and cooperating teachers model effective teaching strategies, but can be unable to practice such skills effectively due to lack in self-confidence (Coladarci, 2010).

Several studies have focused on the impact of teacher education programming related to the growth of teacher candidates’ self-efficacy (Coladarci, 2010; Darling-Hammond, 2006). Although each study presented different results, each study had one common theme: a sense of self-efficacy consistently increased during the first three years of undergraduate course work (Henson, 2001; Hoy & Woolfolk, 1990). During the fourth year, however, general efficacy was reported to decline. Additionally, overall scores of
efficacy seemed “to be higher among elementary-level teachers than among high school teachers” (Coladarci, 2010, p. 325).

Self-efficacy, confidence, and pedagogy can be evaluated through disposition assessment (Darling-Hammond, 2006). Dispositions provide a framework for learning to teach, and outline specific teacher qualities for teacher candidates current in university course work (Darling-Hammond & Baratz-Snowden, 2007). New teachers have been found more likely to learn and grow in a community fostering the development of a vision for practice and learning through support and encouragement, and reflective reasoning (Darling-Hammond & Baratz-Snowden, 2007). Dispositions guide teacher candidates to understand how to use new knowledge related to teaching, learning, and the students they will be responsible for teaching (Darling-Hammond & Baratz-Snowden, 2007). Further, new teachers with satisfactory dispositions have been found to be more successful at motivating their students to succeed in learning (Rike & Sharp, 2009). Due to the many benefits of dispositional assessment, and the ability to provide scaffolding to teacher candidates, dispositions should be assessed early in education course work, with rigorous reflection throughout course content and progression through a program (Darling-Hammond, 2006; McKenna, 2009).

Dispositions are difficult to define due to the ability to encompass a wide range of criteria and even more challenging to observe and evaluate (Erickson et al., 2005; Gallavan et al., 2009; McKenna, 2009). NCATE (2001) defined the term disposition as a collection of criteria yielding an overall image of the teacher including core values, a commitment to the teaching profession, and professional ethics. Further, teacher candidate dispositions provide insight related to learning, motivation, and development
and personal professional growth (McKenna, 2009; NCATE, 2001). Most importantly, dispositions are guided and evaluated through beliefs and attitudes related to core values (Mckenna, 2009). Dispositions cover four separate goals for learning, including curriculum planning, the environment, instruction and assessment, and reflection (Gallavan et al., 2009). Teacher candidate values related to dispositions include caring for others, fairness to all, honesty and integrity, and social justice (NCATE, 2001). Evans (2002) has added to NCATE criteria by suggesting the addition of confidence, exhibiting a positive demeanor, and being receptive to constructive feedback, with the ability to become reflective. Other researchers have since conducted research on disposition criteria and have discovered additional items to include in the NCATE definition, including trustworthy, tolerance, empathy, responsibility, cooperative, and having high expectations for learners (Evans & Nicholson, 2003; Knoblock, 2002; Nowak-Fabrykowski & Caldwell, 2002; Ryan & Alcock, 2002).

Dispositions, as an assessment, are designed to provide a complete and final assessment of a teacher candidate’s ability to acquire knowledge related to content, pedagogy, and professional ability, but do not necessarily require reflection with the teacher candidate prior to score submission (Gallavan, 2009; McKenna, 2009). Disposition assessment should include the teacher candidate’s reflective process, and include university instructor scaffolding and modeling for teacher candidate growth, rather than being limited to observable characteristics (Cochran-Smith, 2006; McKenna, 2009; Rike & Sharp, 2009). Further, teacher candidates cannot be assessed according to identical dispositional criteria (McKenna, 2009). Dispositional assessment practice, for the purpose of NCATE accreditation and equity for teacher candidates, should portray all
aspects of the future teacher, incorporating other criteria, observations, and experiences (McKenna, 2009). Teacher candidates cannot be expected to learn disposition criteria from lecture or university course work alone, but should be guided through modeling from university instructors and cooperating teachers in the field-embedded placements, as well as be provided opportunities for practice and reflection (Katz, 1993; McKenna, 2009; Rike & Sharp, 2009). When teacher candidate reflection is taken into account and scaffolding is built into the teaching model during educational course work, teacher candidates find satisfaction in dispositional growth and learning outcomes, finding greater amounts of success in future teaching positions (Abernathy, 2002; Darling-Hammond, 2006; Erickson et al., 2005; Gallavan et al., 2009; Rike & Sharp, 2009).

**Summary**

The history of education has provided a foundation for classroom instruction. Although the traditional education model has many concerning aspects, certain positive features could be woven into the new clinical model and vice versa. Without the classroom instruction component, the medical clinical model would not benefit teacher education, nor provide significant research findings to support movement toward the model in practice. Therefore, the new educational clinical model of instruction has become the bridge between two worlds, along with social learning theory, intertwining two different approaches, appearing to be a successful alternative to traditional teacher education programs and becoming the catalyst for self-efficacy in teacher candidates (Bandura, 1977; Bandura, 1989; Darling-Hammond, 2006).

Although the new clinical model for education seems to be the answer to turning around traditional teacher education programs having been in practice for over 100 years,
research cannot support a complete emersion into the newly developed model. Clinical teaching within the realm of education has not been adequately evaluated to determine self-efficacy or future student learning outcomes. Additionally, traditional teacher education programs have not recently been evaluated in terms of self-efficacy. Even more concerning is that traditional programming has not been evaluated in comparison with the newly developed clinical pathway. Without knowing how these teacher candidates will perform when alone in the classroom, researchers can only predict teacher and student outcomes. The process for evaluating program changes and determining whether significant changes to degree completion requirements results in “highly qualified, competent teachers who will be markedly better than the graduates before them is not well defined” (Kirby et al., 2006, p. xxi). Prediction can only suffice as evidence for so long. A need for further research is required at both the university level and within the public school realm.

Once research can sufficiently support success at the university level, then research can be tailored to evaluate student performance in classrooms where the lead teacher successfully completed a university level experience in a clinical classroom environment or traditional teaching classroom environment. This gap in the literature has become a catalyst for a closer look into both the traditional and clinical pathways at the University of Central Missouri. Are students receiving equivalent instructional experiences, leading to a greater degree of self-efficacy? Further, do students in the traditional and clinical pathways feel adequately prepared to teach alone upon graduation? This research study is designed to answer these over-arching questions in an attempt to bridge the gap and look to the future of these teacher candidates.
SECTION FOUR

CONTRIBUTION TO PRACTICE
RESULTS
Quantitative Findings

The researcher relied on comparative statistics and an analysis of variance (ANOVA) to identify a statistical difference between teacher candidates enrolled in the traditional and clinical pathways of teacher education at UCM in regards to confidence and self-efficacy rating in teaching ability. The ANOVA was selected as the chosen statistical instrument due to the extensive amount of items embedded within each of the three chosen data sets for the two pathways of teacher candidates. Archived data from the clinical pathway fall 2015 semester were requested and new data were derived from the fall 2015 semester for the traditional pathway. The Teacher Efficacy Survey was adapted from Woolfolk and Hoy (1990) as part of a more in-depth tool to identify efficacy related to teacher candidates and their experiences. The Teacher Confidence Survey used was also adapted from Woolfolk and Hoy (1990) as an assessment tool to determine confidence in teacher candidates. Due to only comparing two groups, the Welch and Brown-Forsythe tests were used when comparing the median from the two pathway results for the post hoc tests where a significant ANOVA F-value was found and the Levine’s test revealed significant mean values where p = .05 (Field, 2013). Significant to note is how a small p and standard deviation between the groups is different, not due to variances in the mean sample size but due to differences in self-perceived levels of confidence (Field, 2013).

The Teacher Confidence Survey data were collected from candidates in both pathways during the last semester of coursework prior to student teaching at UCM. Teacher candidates provide responses to questions based on personal belief of ability and
growth. Survey data ratings were strictly self-selected by teacher candidates without actual measurement of skill and ability, or review by university faculty. Ninety-eight clinical teacher candidates completed the surveys and 51 traditional teacher candidates completed the surveys. The survey data revealed mainly insignificant differences between candidates in the two pathways.

Confidence Ratings

A one-way analysis of variance (ANOVA) was calculated on participants’ rating of the Teacher Confidence Survey comparing the two groups of participants. The Teacher Confidence Survey asked teacher candidates enrolled in the semester prior to student teaching 28 items related to self-perceived confidence in one’s own ability to complete desired tasks. The Teacher Confidence Survey prompted teacher candidates to indicate an opinion about each survey statement by selecting the appropriate response for how confident he/she feels to teach. Responses included a rating scale from one to five, with one being related to strongly disagreeing and five being related to strongly agreeing.

Rather insignificant results were revealed through data analysis. Statistically significant differences were derived through ANOVA analysis pertaining to six of the Teacher Confidence Survey items. Results are provided within this section, beginning with non-significant results based on ANOVA. Please refer to Table 1 for all results, beginning with non-significant results revealed through ANOVA and leading into significant results. Data analysis revealed statistically significant results related to six of the survey items. Those data are provided within the following table with the non-significant results. Following Table 1, reporting all results, are charts specific to statistically significant results revealed through data analysis.
Table 1

Teacher Confidence Survey:

Comparison of two pathways

<table>
<thead>
<tr>
<th>Prompt: How confident do you feel to…</th>
<th>Traditional mean</th>
<th>Clinical mean</th>
<th>$F$</th>
<th>$p$</th>
<th>$r$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teach science as a co-inquirer with students</td>
<td>4.00</td>
<td>4.11</td>
<td>.54</td>
<td>.466</td>
<td>.06</td>
</tr>
<tr>
<td>Use journals in teaching</td>
<td>4.20</td>
<td>4.18</td>
<td>.01</td>
<td>.909</td>
<td>.01</td>
</tr>
<tr>
<td>Construct a web</td>
<td>4.24</td>
<td>4.19</td>
<td>.09</td>
<td>.761</td>
<td>.03</td>
</tr>
<tr>
<td>Integrate language arts teaching</td>
<td>4.58</td>
<td>4.61</td>
<td>.10</td>
<td>.755</td>
<td>.03</td>
</tr>
<tr>
<td>Determine the academic needs of my students</td>
<td>4.40</td>
<td>4.31</td>
<td>.57</td>
<td>.452</td>
<td>.06</td>
</tr>
<tr>
<td>Select appropriate literature for thematic teaching</td>
<td>4.38</td>
<td>4.21</td>
<td>1.61</td>
<td>.206</td>
<td>.10</td>
</tr>
<tr>
<td>Evaluates student work</td>
<td>4.62</td>
<td>4.44</td>
<td>2.56</td>
<td>.111</td>
<td>.13</td>
</tr>
<tr>
<td>Teach effectively in an urban school</td>
<td>3.86</td>
<td>3.82</td>
<td>.07</td>
<td>.794</td>
<td>.02</td>
</tr>
<tr>
<td>Facilitate class discussions</td>
<td>4.40</td>
<td>4.34</td>
<td>.26</td>
<td>.610</td>
<td>.04</td>
</tr>
<tr>
<td>Incorporate different activities and curricula into science teaching</td>
<td>4.31</td>
<td>4.26</td>
<td>.20</td>
<td>.657</td>
<td>.04</td>
</tr>
<tr>
<td>Construct student-centered activities</td>
<td>4.56</td>
<td>4.42</td>
<td>1.34</td>
<td>.248</td>
<td>.10</td>
</tr>
<tr>
<td>Teach basic concepts of fractions</td>
<td>3.65</td>
<td>3.87</td>
<td>1.51</td>
<td>.222</td>
<td>.10</td>
</tr>
<tr>
<td>Manage classrooms</td>
<td>5.33</td>
<td>4.20</td>
<td>2.63</td>
<td>.107</td>
<td>.13</td>
</tr>
<tr>
<td>Use cooperative learning approaches</td>
<td>4.35</td>
<td>4.39</td>
<td>.07</td>
<td>.786</td>
<td>.02</td>
</tr>
<tr>
<td>Facilitate students communication about mathematics</td>
<td>3.59</td>
<td>4.09</td>
<td>8.90</td>
<td>.003</td>
<td>.24</td>
</tr>
<tr>
<td>Item Description</td>
<td>Traditional Mean</td>
<td>Clinical Mean</td>
<td>F</td>
<td>p</td>
<td>r</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------------</td>
<td>------------------</td>
<td>---------------</td>
<td>-------</td>
<td>-------</td>
<td>-------</td>
</tr>
<tr>
<td>Explain the meaning of standardized test scores to students and parents</td>
<td>3.57</td>
<td>3.70</td>
<td>.60</td>
<td>.440</td>
<td>.06</td>
</tr>
<tr>
<td>Implement a variety of science teaching strategies that incorporate inquiry-based learning</td>
<td>4.20</td>
<td>4.01</td>
<td>1.79</td>
<td>.183</td>
<td>.11</td>
</tr>
<tr>
<td>Develop number sense in children</td>
<td>3.92</td>
<td>4.09</td>
<td>1.26</td>
<td>.264</td>
<td>.09</td>
</tr>
<tr>
<td>Build learning in science teaching in an objective and ethical manner</td>
<td>4.12</td>
<td>4.01</td>
<td>.60</td>
<td>.438</td>
<td>.06</td>
</tr>
<tr>
<td>Use media to support teaching and learning</td>
<td>4.49</td>
<td>4.32</td>
<td>2.07</td>
<td>.152</td>
<td>.12</td>
</tr>
<tr>
<td>Understand the impact of cultural diversity on classroom content</td>
<td>4.53</td>
<td>4.38</td>
<td>1.84</td>
<td>.177</td>
<td>.11</td>
</tr>
<tr>
<td>Define the social in social studies</td>
<td>4.12</td>
<td>4.04</td>
<td>.27</td>
<td>.606</td>
<td>.04</td>
</tr>
<tr>
<td>Statistically Significant Results</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prompt: How confident do you feel to...</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Item name</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Locate resources for preparing mathematics lessons</td>
<td>3.67</td>
<td>4.45</td>
<td>24.42</td>
<td>.000</td>
<td>.38</td>
</tr>
<tr>
<td>Establish a feeling of community in my classes</td>
<td>4.80</td>
<td>4.52</td>
<td>8.89</td>
<td>.003</td>
<td>.24</td>
</tr>
<tr>
<td>Develop an assessment rubric</td>
<td>4.33</td>
<td>4.04</td>
<td>3.94</td>
<td>.049</td>
<td>.16</td>
</tr>
<tr>
<td>Create integrated lessons and units</td>
<td>4.69</td>
<td>4.37</td>
<td>7.40</td>
<td>.007</td>
<td>.22</td>
</tr>
<tr>
<td>Teaching algebra</td>
<td>3.16</td>
<td>3.61</td>
<td>7.40</td>
<td>.024</td>
<td>.19</td>
</tr>
<tr>
<td>Give students concrete experiences in learning mathematics</td>
<td>3.78</td>
<td>4.14</td>
<td>4.85</td>
<td>.029</td>
<td>.19</td>
</tr>
</tbody>
</table>

Note: Traditional N = 51, Clinical N = 98, significance determined at p = .05
A one-way analysis of variance (ANOVA) was calculated on participants’ rating of the Teacher Confidence Survey item titled, “locate resources for preparing mathematics lessons.” The analysis was significant, $F(1, 147) = 24.42, p = .000$ ($r = .38$).

Participants enrolled in the clinical pathway rated higher on rating one’s own ability to locate resources for preparing mathematics lessons ($M = 4.45, SD = .690$) than participants enrolled in the traditional pathway ($M = 3.67, SD = 1.24$). Please refer to Table 2 for a visual representation of the significance.

Table 2

<table>
<thead>
<tr>
<th></th>
<th>Clinical pathway</th>
<th>Traditional pathway</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean</td>
<td>4.45</td>
<td>3.67</td>
</tr>
<tr>
<td>Std. Deviation</td>
<td>1.24</td>
<td>1.24</td>
</tr>
<tr>
<td>Std. Error</td>
<td>0.97</td>
<td>0.74</td>
</tr>
<tr>
<td>Lower Bound</td>
<td>3.32</td>
<td>2.58</td>
</tr>
<tr>
<td>Upper Bound</td>
<td>4.59</td>
<td>4.02</td>
</tr>
<tr>
<td>95% Confidence Interval for Mean</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A one-way analysis of variance (ANOVA) was calculated on participants’ rating of the Teacher Confidence Survey item titled, “Establish a feeling of community in my classes.” The analysis was significant, $F(1, 147) = 8.89, p = .003$ ($r = .24$). Participants enrolled in the traditional pathway rated higher on establish a feeling of community in my classes ($M = 4.80, SD = .495$) than participants enrolled in the clinical pathway ($M = 4.52, SD = .560$). Please refer to Table 3 for a visual display of the data analysis and results to this confidence item.
A one-way analysis of variance (ANOVA) was calculated on participants’ rating of the Teacher Confidence Survey item titled, “Develop an assessment rubric.” The analysis was significant, $F(1, 147) = 3.94, p = .049$ ($r = .16$). Participants enrolled in the traditional pathway rated higher ($M = 4.33$, $SD = .766$) than participants enrolled in the clinical pathway ($M = 4.04$, $SD = .896$). Illustrated in Table 4 is the analysis.

Table 3

<table>
<thead>
<tr>
<th>Establish a feeling of community in my classes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean</td>
</tr>
<tr>
<td>------</td>
</tr>
<tr>
<td>4.52</td>
</tr>
<tr>
<td>4.8</td>
</tr>
</tbody>
</table>

A one-way analysis of variance (ANOVA) was calculated on participants’ rating of the Teacher Confidence Survey item titled, “Create integrated lessons and units.” The
analysis was significant, $F(1, 147) = 7.40, p = .007 \ (r = .22)$. Participants enrolled in the traditional pathway rated higher (M = 4.69, SD = .583) than participants enrolled in the clinical pathway (M = 4.37, SD = .724). Provided in Table 5 is a visual representation of the data analysis revealed through the ANOVA.

Table 5

```
<table>
<thead>
<tr>
<th></th>
<th>Traditional pathway</th>
<th>Clinical pathway</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean</td>
<td>4.69</td>
<td>4.37</td>
</tr>
<tr>
<td>Std. Deviation</td>
<td>0.58</td>
<td>0.72</td>
</tr>
<tr>
<td>Std. Error</td>
<td>0.08</td>
<td>0.07</td>
</tr>
<tr>
<td>Lower Bound</td>
<td>4.51</td>
<td>4.52</td>
</tr>
<tr>
<td>Upper Bound</td>
<td>4.85</td>
<td>4.88</td>
</tr>
</tbody>
</table>
```

A one-way analysis of variance (ANOVA) was calculated on participants’ rating of the Teacher Confidence Survey item titled, “Teaching algebra.” The analysis was significant, $F(1, 147) = 7.40, p = .024 \ (r = .19)$. Participants enrolled in the clinical pathway rated higher (M = 3.61, SD = 1.099) than participants enrolled in the traditional pathway (M = 3.16, SD = 1.255). Provided in Table 6 is a visual representation of the data analysis revealed through the ANOVA.
A one-way analysis of variance (ANOVA) was calculated on participants’ rating of the Teacher Confidence Survey item titled, “Give students concrete experiences in learning mathematics.” The analysis was significant, $F(1, 147) = 4.85, p = .029 (r = .19)$. Participants enrolled in the clinical pathway rated higher ($M = 4.14, SD = .825$) than participants enrolled in the traditional pathway ($M = 3.78, SD = 1.137$). Provided in Table 7 is a visual representation of the data analysis revealed through the ANOVA.

Table 6

<table>
<thead>
<tr>
<th>Teaching algebra</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error</th>
<th>Lower Bound</th>
<th>Upper Bound</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical pathway</td>
<td>3.61</td>
<td>3.16</td>
<td>1.26</td>
<td>0.11</td>
<td>3.83</td>
</tr>
<tr>
<td>Traditional pathway</td>
<td>3.39</td>
<td>1.16</td>
<td>0.66</td>
<td>0.18</td>
<td>3.51</td>
</tr>
</tbody>
</table>

Table 7

<table>
<thead>
<tr>
<th>Give students concrete experiences in learning mathematics</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error</th>
<th>Lower Bound</th>
<th>Upper Bound</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical pathway</td>
<td>4.14</td>
<td>3.78</td>
<td>1.14</td>
<td>0.66</td>
<td>4.31</td>
</tr>
<tr>
<td>Traditional pathway</td>
<td>3.98</td>
<td>1.47</td>
<td>0.16</td>
<td>0.14</td>
<td>4.1</td>
</tr>
</tbody>
</table>
Efficacy Ratings

The Teacher Efficacy Survey data were derived from Woolfolk and Hoy (1990) and adapted for the UCM ECEL Department. The questionnaire was initially designed to assist faculty in gaining a better understanding of factors that create difficulties for teacher candidates in his/her school experiences. Teacher candidates were asked to indicate opinions about each of the statements through a rating scale. The scale ranged from one to nine, with one representing “nothing” and nine representing “a great deal.”

The collection instrument was implemented for the purpose of measuring teacher candidate efficacy prior to student teaching. The data were collected from candidates in both pathways during the last semester of coursework prior to student teaching at UCM. Archived data were requested from the UCM ECEL program for clinical pathway teacher candidates. New data were collected from traditional teacher candidates during the fall 2015 semester of coursework, prior to student teaching. All teacher candidate responses were derived from the fall 2015 semester. Data were derived from teacher candidate personal beliefs on preparedness to student teach without faculty evaluations. From collected surveys, 117 were from clinical teacher candidates and 54 were from traditional teacher candidates. Efficacy data revealed little statistical significance when comparing the perceptions of teacher candidates enrolled in separate pathways to teacher education. The analysis in this section provides specific results for each item on the Teacher Efficacy Survey.

Results are provided within this section, beginning with non-significant results based on ANOVA, and moving into significant findings within the same table. Please refer to Table 8 for all results revealed through ANOVA. Data analysis revealed
statistically significant results related to one of the survey items. Those data are provided following the non-significant results both in Table 8 and through a different representation in Table 9.

<table>
<thead>
<tr>
<th>Item name</th>
<th>Traditional mean</th>
<th>Clinical mean</th>
<th>F</th>
<th>p</th>
<th>r</th>
</tr>
</thead>
<tbody>
<tr>
<td>How much can you do to get through to the most difficult student?</td>
<td>7.17</td>
<td>7.09</td>
<td>.09</td>
<td>.763</td>
<td>.02</td>
</tr>
<tr>
<td>How much can you do to help your students think critically?</td>
<td>7.37</td>
<td>7.21</td>
<td>.40</td>
<td>.527</td>
<td>.05</td>
</tr>
<tr>
<td>How much can you do to control disruptive behavior in the classroom?</td>
<td>7.57</td>
<td>7.20</td>
<td>2.55</td>
<td>.113</td>
<td>.12</td>
</tr>
<tr>
<td>How much can you do to motivate students who show low interest?</td>
<td>7.52</td>
<td>7.21</td>
<td>1.73</td>
<td>.190</td>
<td>.10</td>
</tr>
<tr>
<td>To what extent can you make your expectations clear about student outcomes?</td>
<td>8.04</td>
<td>7.74</td>
<td>1.67</td>
<td>.198</td>
<td>.10</td>
</tr>
<tr>
<td>How much can you do to make students believe they can do well?</td>
<td>8.11</td>
<td>7.80</td>
<td>2.04</td>
<td>.155</td>
<td>.11</td>
</tr>
<tr>
<td>How well can you respond to difficult questions from your students?</td>
<td>7.11</td>
<td>7.07</td>
<td>.03</td>
<td>.858</td>
<td>.01</td>
</tr>
<tr>
<td>How well can you establish routines to keep</td>
<td>7.69</td>
<td>7.49</td>
<td>.70</td>
<td>.405</td>
<td>.06</td>
</tr>
<tr>
<td>Question</td>
<td>Score</td>
<td>Standard Deviation</td>
<td>Variance</td>
<td>t-value</td>
<td>p-value</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-------</td>
<td>--------------------</td>
<td>----------</td>
<td>---------</td>
<td>---------</td>
</tr>
<tr>
<td>How much can you do to help your students value learning?</td>
<td>7.74</td>
<td>1.42</td>
<td>.236</td>
<td>.09</td>
<td></td>
</tr>
<tr>
<td>How much can you gauge student comprehension?</td>
<td>7.46</td>
<td>4.84</td>
<td>.487</td>
<td>.05</td>
<td></td>
</tr>
<tr>
<td>How much can you do to foster student creativity?</td>
<td>7.50</td>
<td>.10</td>
<td>.797</td>
<td>.02</td>
<td></td>
</tr>
<tr>
<td>How much can you do to improve the understanding of a student?</td>
<td>7.43</td>
<td>2.14</td>
<td>.146</td>
<td>.11</td>
<td></td>
</tr>
<tr>
<td>How much can you do to calm a student who is disruptive?</td>
<td>7.33</td>
<td>1.50</td>
<td>.222</td>
<td>.09</td>
<td></td>
</tr>
<tr>
<td>How well can you establish a classroom management system?</td>
<td>7.69</td>
<td>3.79</td>
<td>.053</td>
<td>.15</td>
<td></td>
</tr>
<tr>
<td>How much can you do to adjust your lessons to the proper level of student need?</td>
<td>7.43</td>
<td>.24</td>
<td>.624</td>
<td>.04</td>
<td></td>
</tr>
<tr>
<td>How much can you use a variety of assessment strategies?</td>
<td>7.59</td>
<td>.72</td>
<td>.397</td>
<td>.07</td>
<td></td>
</tr>
<tr>
<td>How well can you keep a few problem students from ruining a lesson?</td>
<td>7.41</td>
<td>1.78</td>
<td>.184</td>
<td>.10</td>
<td></td>
</tr>
<tr>
<td>To what extent can you provide an alternate explanation?</td>
<td>7.41</td>
<td>.76</td>
<td>.383</td>
<td>.07</td>
<td></td>
</tr>
<tr>
<td>How well can you respond to defiant students?</td>
<td>7.11</td>
<td>.86</td>
<td>.355</td>
<td>.07</td>
<td></td>
</tr>
</tbody>
</table>
A one-way analysis of variance (ANOVA) was calculated on participants’ rating from the Teacher Efficacy Survey item of “How much can you do to get children to follow classroom rules.” The analysis was significant, $F(1, 169) = 4.20, p = .042 (r = .16)$. Participants enrolled in the traditional pathway rated higher ($M = 7.82, SD = 1.44$) than participants enrolled in the clinical pathway ($M = 7.36, SD = 1.31$). Provided in Table 9 is a visual representation of the data analysis revealed through the ANOVA.

Table 9
Disposition Ratings

The teacher candidate disposition form data were collected from candidates in both pathways during the last semester of coursework prior to student teaching at UCM. Teacher candidates were required to self-assess performance at the end of coursework, with faculty reviewing the forms with the candidates prior to recommending individual candidates for the student teaching experience. Disposition data were collected from archived self-assessed Teacher Candidate data in the ECEL department. Data were requested from Fall 2013, Spring 2014, and Fall 2014 self-assessment forms during the Senior one or PDS semester of coursework. From the Fall 2013 data collection, 15 disposition forms were from clinical teacher candidates and 60 were from traditional teacher candidates. The data revealed statistically significant differences between candidates in the two pathways. From the Spring 2014 semester, 11 were from clinical teacher candidates and 41 were from traditional teacher candidates. Spring 2014 semester’s data collection did not reveal statistically significant differences between teacher candidates in the two pathways. Archived data collected in the Fall 2014 semester included 21 clinical teacher candidates and 30 traditional teacher candidates. These data revealed statistically significant differences.

The researcher relied on comparative statistics and an analysis of variance (ANOVA) to identify a statistical difference between teacher candidates enrolled in the traditional and clinical pathways of teacher education at UCM across the three semesters of data collection. Due to only comparing two groups, the Welch and Brown-Forsythe tests were used for the post hoc tests where a significant ANOVA F-value was found and
the Levine’s test was significant. Data analysis and results were inconsistent across the three semesters of data collected.

Tables are included depicting the mean scores of clinical and traditional teacher candidates as reflected through each disposition area. Each table serves as a visual to observe the variation in scores across the three semesters of archived data. The data reveal statistical significances between the two pathways of teacher candidates.

A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition one, “Commits to high expectations and values the ability and capacity to learn.” The analysis was significant, $F(1, 73) = 27.75, p = .000$ ($r = .62$). Participants enrolled in the clinical pathway rated higher (M = 2.03, SD = .52) than participants enrolled in the traditional pathway (M = 1.32, SD = .46).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition one, “Commits to high expectations and values the ability and capacity to learn.” The analysis was not significant, $F(1, 50) = .69, p = .41$ ($r = .12$).

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition one, “Commits to high expectations and values the ability and capacity to learn.” The analysis was significant, $F(1, 49) = 21.94, p = .000$ ($r = .56$). Participants enrolled in the clinical pathway rated higher (M = 2.38, SD = .50) than participants enrolled in the traditional pathway (M = 1.63, SD = .60). Provided in Table 10 is a visual representation of the data analysis revealed through the ANOVA.
A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition two, “Applies concepts learned to performance activities.” The analysis was significant, $F(1, 74) = 25.03$, $p = .000$ ($r = .50$). Participants enrolled in the clinical pathway rated higher ($M = 1.72$, $SD = .52$) than participants enrolled in the traditional pathway ($M = 1.16$, $SD = .36$).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition two, “Applies concepts learned to performance activities.” The analysis was not significant, $F(1, 50) = 1.97$, $p = .167$ ($r = .19$).

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition two, “Applies concepts learned to performance activities.” The analysis was significant, $F(1, 49) = 5.25$, $p = .026$ ($r = .31$). Participants enrolled in the clinical pathway rated higher ($M = 1.88$, $SD = .31$) than participants enrolled in the traditional pathway ($M = 1.55$, $SD = .60$). Provided in Table 11 is a visualization to support the analysis.
A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition three, “Commits to the development of critical thinking skills.” The analysis was statistically significant, $F(1,73) = 24.21 \ p = .000 \ (r = .19)$. Participants enrolled in the clinical pathway rated higher ($M = 1.66$, $SD = .63$) than participants enrolled in the traditional pathway ($M = 1.08$, $SD = .58$).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition three, “Commits to the development of critical thinking skills.” The analysis was not significant, $F(1, 50) = .11 \ p = .745 \ (r = .05)$.

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition three, “Commits to the development of critical thinking skills.” The analysis was statistically significant, $F(1,49) = 24.07 \ p = .000 \ (r = .57)$. Participants enrolled in the clinical pathway rated higher ($M = 2.00$, $SD = .47$) than participants enrolled in the traditional pathway ($M = 1.32$, $SD = .50$). Provided in Table 12 is a visualization for the three semesters of data analysis.
A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition four, “Commits to seeking out, developing, and continually refining teaching practices that generate more learning for students.” The analysis was statistically significant, $F(1,73) = 28.77, p = .000$ ($r = .53$). Participants enrolled in the clinical pathway rated higher ($M = 2.06, SD = .60$) than participants enrolled in the traditional pathway ($M = 1.28, SD = .49$).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition four, “Commits to seeking out, developing, and continually refining teaching practices that generate more learning for students.” The analysis was not significant, $F(1, 50) = 2.17, p = .147$ ($r = .20$).

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition four, “Commits to seeking out, developing, and continually refining teaching practices that generate more learning for students.” The
analysis was not significant, $F(1, 49) = 1.75, p = .192 (r = .19)$. Provided in Table 13 is the mean scores across the three semesters.

Table 13

| Commits to seeking out, developing, and continually refining teaching practices that generate more learning for students |
|---|---|---|---|
| Mean Fall 2013 | Mean Spring 2014 | Mean Fall 2014 |
| 2.06 | 1.82 | 2.05 |
| 1.28 | 1.55 | 1.85 |

A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition five, “Commits to development of lessons that are interesting and engaging through a variety of instructional strategies to accommodate all learners, including those from diverse backgrounds, experiences, and cultures.” The analysis was statistically significant, $F(1,74) = 12.25, p = .001 (r = .38)$. Participants enrolled in the clinical pathway rated higher ($M = 1.75, SD = .63$) than participants enrolled in the traditional pathway ($M = 1.28, SD = .44$).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition five, “Commits to development of lessons that are interesting and engaging through a variety of instructional strategies to accommodate all learners, including those from diverse backgrounds, experiences, and cultures.” The analysis was not significant, $F(1, 50) = .04, p = .836 (r = .16)$.

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition five, “Commits to development of lessons that are
interesting and engaging through a variety of instructional strategies to accommodate all learners, including those from diverse backgrounds, experiences, and cultures.” The analysis was statistically significant, $F(1,48) = 7.30, p = .000 (r = .36)$. Participants enrolled in the clinical pathway rated higher ($M = 2.17, SD = .53$) than participants enrolled in the traditional pathway ($M = 1.71, SD = .63$). Provided in Table 14 is a visual representation of the data analysis revealed through the ANOVA.

Table 14

<table>
<thead>
<tr>
<th></th>
<th>Mean Fall 2013</th>
<th>Mean Spring 2014</th>
<th>Mean Fall 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical pathway</td>
<td>1.75</td>
<td>1.28</td>
<td>2.17</td>
</tr>
<tr>
<td>Traditional path</td>
<td>1.45</td>
<td>1.5</td>
<td>1.71</td>
</tr>
</tbody>
</table>

A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition six, “Commits to making appropriate adaptations and accommodations for students with diverse needs.” The analysis was statistically significant, $F(1,73) = 36.14, p = .000 (r = .58)$. Participants enrolled in the clinical pathway rated higher ($M = 1.69, SD = .54$) than participants enrolled in the traditional pathway ($M = 1.04, SD = .33$).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition six, “Commits to making appropriate adaptations and
accommodations for students with diverse needs.” The analysis was not significant, $F(1, 50) = .10, p = .752 (r = .05)$.

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition six, “Commits to making appropriate adaptations and accommodations for students with diverse needs.” The analysis was statistically significant, $F(1,49) = 22.60, p = .000 (r = .56)$. Participants enrolled in the clinical pathway rated higher ($M = 2.05, SD = .50$) than participants enrolled in the traditional pathway ($M = 1.37, SD = .51$). Provided in Table 15 is the mean scores across all three semesters.

Table 15

<table>
<thead>
<tr>
<th></th>
<th>Clinical pathway</th>
<th>Traditional pathway</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean Fall 2013</td>
<td>1.69</td>
<td>1.04</td>
</tr>
<tr>
<td>Mean Spring 2014</td>
<td>1.23</td>
<td>1.28</td>
</tr>
<tr>
<td>Mean Fall 2014</td>
<td>2.05</td>
<td>1.37</td>
</tr>
</tbody>
</table>

A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition seven, “Appreciates and promotes acceptance of self-discipline, responsibility, and self-esteem.” The analysis was statistically significant, $F(1,74) = 20.55, p = .000 (r = .47)$. Participants enrolled in the clinical pathway rated higher ($M = 2.34, SD = .47$) than participants enrolled in the traditional pathway ($M = 1.62, SD = .59$).
A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition seven, “Appreciates and promotes acceptance of self-discipline, responsibility, and self-esteem.” The analysis was not significant, $F(1, 50) = .56, p = .460 (r = .10)$.

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition seven, “Appreciates and promotes acceptance of self-discipline, responsibility, and self-esteem.” The analysis was statistically significant, $F(1,49) = 5.74, p = .020 (r = .32)$. Participants enrolled in the clinical pathway rated higher ($M = 2.52, SD = .51$) than participants enrolled in the traditional pathway ($M = 2.10, SD = .69$). Provided in Table 16 is the analyzed data collection of mean scores across the three semesters.

Table 16

| Appreciates and promotes acceptance of self-discipline, responsibility, and self-esteem |
|---------------------------------|-----------------|-----------------|-----------------|
| Mean Fall 2013                  | Mean Spring 2014| Mean Fall 2014  |
| 2.34                           | 1.62            | 2.52            |
| 1.91                           | 1.78            | 2.1             |

A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition eight, “Commits to a positive and enthusiastic attitude for teaching and learning to inspire self and others.” The analysis was statistically significant, $F(1,74) = 33.65, p = .000 (r = .10)$. Participants enrolled in the clinical
pathway rated higher (M = 2.16, SD = .68) than participants enrolled in the traditional pathway (M = 1.28, SD = .50).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition eight, “Commits to a positive and enthusiastic attitude for teaching and learning to inspire self and others.” The analysis was not significant, \( F(1, 50) = 1.34, p = .252 \) (\( r = .16 \)).

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition eight, “Commits to a positive and enthusiastic attitude for teaching and learning to inspire self and others.” The analysis was statistically significant, \( F(1,49) = 6.82, p = .012 \) (\( r = .35 \)). Participants enrolled in the clinical pathway rated higher (M = 2.29, SD = .64) than participants enrolled in the traditional pathway (M = 1.85, SD = .54). Provided in Table 17 iss visual representation of the three semester mean scores.

Table 17

<table>
<thead>
<tr>
<th>Disposition</th>
<th>Mean Fall 2013</th>
<th>Mean Spring 2014</th>
<th>Mean Fall 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical pathway</td>
<td>2.16</td>
<td>1.73</td>
<td>2.29</td>
</tr>
<tr>
<td>Traditional pathway</td>
<td>1.28</td>
<td>1.51</td>
<td>1.85</td>
</tr>
</tbody>
</table>

Commits to a positive and enthusiastic attitude for teaching and learning to inspire self and others
A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition nine, “Believes students and colleagues should be treated and should treat others with kindness, fairness, patience, dignity, and respect.” The analysis was statistically significant, $F(1,74) = 12.16, p = .001$ ($r = .38$). Participants enrolled in the clinical pathway rated higher ($M = 2.34, SD = .47$) than participants enrolled in the traditional pathway ($M = 1.77, SD = .61$).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition nine, “Believes students and colleagues should be treated and should treat others with kindness, fairness, patience, dignity, and respect.” The analysis was not significant, $F(1, 50) = .56, p = .458$ ($r = .11$).

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition nine, “Believes students and colleagues should be treated and should treat others with kindness, fairness, patience, dignity, and respect.” The analysis was not significant, $F(1, 48) = 4.70, p = .035$ ($r = .30$). Provided in Table 18 is the mean scores for disposition nine across the three archived semesters.

Table 18

<table>
<thead>
<tr>
<th></th>
<th>Mean Fall 2013</th>
<th>Mean Spring 2014</th>
<th>Mean Fall 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Believes students</td>
<td>2.34</td>
<td>2.09</td>
<td>2.62</td>
</tr>
<tr>
<td>and colleagues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>should be treated</td>
<td>1.77</td>
<td>1.96</td>
<td>2.29</td>
</tr>
<tr>
<td>and should treat</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>others with kindness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>fairness, patience,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>dignity, and respect</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition ten, “Commits to relationships with school colleagues and instructor to support learning and well being.” The analysis was statistically significant, $F(1,73) = 32.87, p = .000 \ (r = .56)$. Participants enrolled in the clinical pathway rated higher ($M = 2.34, SD = .54$) than participants enrolled in the traditional pathway ($M = 1.08, SD = .40$).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition ten, “Commits to relationships with school colleagues and instructor to support learning and well being.” The analysis was statistically significant, $F(1,49) = 4.53, p = .038 \ (r = .29)$. Participants enrolled in the clinical pathway rated higher ($M = 1.64, SD = .50$) than participants enrolled in the traditional pathway ($M = 1.26, SD = .52$).

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition ten, “Commits to relationships with school colleagues and instructor to support learning and well being.” The analysis was statistically significant, $F(1,48) = 14.36, p = .000 \ (r = .48)$. Participants enrolled in the clinical pathway rated higher ($M = 2.07, SD = .64$) than participants enrolled in the traditional pathway ($M = 1.44, SD = .52$). Provided in Table 19 is a depiction of the means across the three semesters for each pathway.
A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition eleven, “Assess the effects of choices and actions on others and actively seeks out opportunities to grow professionally in order to promote learner outcomes.” The analysis was statistically significant, $F(1,73) = 6.53, p = .013$ ($r = .29$). Participants enrolled in the clinical pathway rated higher (M = 1.94, SD = .68) than participants enrolled in the traditional pathway (M = 1.32, SD = .60).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition eleven, “Assess the effects of choices and actions on others and actively seeks out opportunities to grow professionally in order to promote learner outcomes.” The analysis was not significant, $F(1,49) = 1.79, p = .188$ ($r = .19$).

A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition eleven, “Assess the effects of choices and actions on others and actively seeks out opportunities to grow professionally in order to promote learner outcomes.” The analysis was statistically significant, $F(1,48) = 7.08, p = .011$ ($r = .36$). Participants enrolled in the clinical pathway rated higher (M = 2.24, SD = .54) than
participants enrolled in the traditional pathway (M = 1.88, SD = .42). The ANOVA results can be compared in Table 20.

Table 20

<table>
<thead>
<tr>
<th></th>
<th>Mean Fall 2013</th>
<th>Mean Spring 2014</th>
<th>Mean Fall 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical pathway</td>
<td>1.94</td>
<td>1.82</td>
<td>2.24</td>
</tr>
<tr>
<td>Traditional pathway</td>
<td>1.32</td>
<td>1.55</td>
<td>1.88</td>
</tr>
</tbody>
</table>

A one-way analysis of variance (ANOVA) was calculated on Fall 2013 participants’ rating of disposition twelve, “Fulfills professional responsibilities consistent with course expectations and policies concerning appearance, punctuality, attendance, and timely and accurate paperwork completion.” The analysis was statistically significant, $F(1,73) = 2.57$, $p = .013$ ($r = .29$). Participants enrolled in the clinical pathway rated higher (M = 1.97, SD = .56) than participants enrolled in the traditional pathway (M = 1.52, SD = .64).

A one-way analysis of variance (ANOVA) was calculated on Spring 2014 participants’ rating of disposition twelve, “Fulfills professional responsibilities consistent with course expectations and policies concerning appearance, punctuality, attendance, and timely and accurate paperwork completion.” The analysis was not significant, $F(1,48) = 1.06$, $p = .308$ ($r = .15$).
A one-way analysis of variance (ANOVA) was calculated on Fall 2014 participants’ rating of disposition twelve, “Fulfills professional responsibilities consistent with course expectations and policies concerning appearance, punctuality, attendance, and timely and accurate paperwork completion.” The analysis was not significant, $F(1,48) = 4.09, p = .049$ ($r = .28$). The visualization of the analysis can be observed in the provided Table 21.

Table 21

| Fulfills professional responsibilities consistent with course expectations and policies concerning appearance, punctuality, attendance, and timely and accurate paperwork completion |
|---|---|---|---|
| Mean Fall 2013 | 1.97 | 1.52 | 2.43 |
| Mean Spring 2014 | 1.91 | 1.73 | 2.07 |

**Clinical pathway** | **Traditional pathway**

**Summary of the Results of the Quantitative Analysis**

The purpose of the quantitative analysis was to gather the perception of efficacy and confidence as perceived by teacher candidates completing coursework in the traditional and clinical pathways. These perceptions were gathered through the adaptation of Woolfolk and Hoy’s (1990) Teacher Confidence and Efficacy Scales for use with the UCM ECEL Department. Additionally, teacher candidates were asked to rate their ability to progress and become prepared to student teach in relation to 12 dispositional questions. The collected disposition forms were self-assessed by teacher
candidates prior to review by university faculty. The results derived from one-way ANOVA revealed varied levels of significance.

Quantitative analysis comparing levels of confidence between traditional and clinical teacher candidates prior to the student teaching semester revealed relatively consistent comparable ratings between teacher candidates. Traditional teacher candidates viewed their ability to establish a classroom community, develop assessment rubrics, and create integrated lessons and units as higher than clinical pathway self-ratings. Clinical teacher candidates were found to show higher levels of confidence in relation to mathematical discussion specific to locating resources for preparing mathematics lessons, teaching algebra, and providing students with concrete experiences in learning mathematics.

A one-way ANOVA revealed relatively insignificant results based on efficacy ratings. Traditional teacher candidates self-rated higher than clinical teacher candidates when asked “How much can you do to get children to follow classroom rules?” All other efficacy questions revealed insignificant results.

When comparing dispositional data across pathways and semesters, teacher candidates enrolled in the clinical pathway generally rated themselves higher than traditional teacher candidates. Fall semesters 2013 and 2014 both revealed relatively significant results, showing higher disposition ratings from those teacher candidates enrolled in the clinical pathway. Spring 2014 appeared to reveal rather insignificant results when comparing the two pathways. The difference between semesters does not appear consistent.
Qualitative Findings

The results relating to qualitative findings reveal perceptions of university faculty, district principals, cooperating teachers in the field who have experienced teacher candidates from both pathways, and teacher candidates enrolled in course work for either pathway and preparing to enter the student teaching experience. Results pertaining to collected qualitative data are revealed according to specific content areas. These areas of focus include: lesson planning and implementation, teacher candidate reflection, how collaboration occurs within each pathway, overall preparedness to student teach, and opportunities for growth related to the UCM College of Education teacher education program.

Focus groups included participants with relevant experiences in relation to the traditional and clinical pathways at the University of Central Missouri (UCM). University faculty with experiences specific to the Elementary and Early Childhood (ECEL) program traditional and clinical pathways were provided an invitation to participate in focus group sessions. Participation in the study encompassed school districts with at least three years experience with teacher candidates in both the traditional and clinical pathways at UCM. Due to the criteria stated above, three local school districts were selected for the purpose of this study. All principals within each school district, who have had traditional and clinical teacher candidates in the respective schools, were invited to attend focus group sessions. Cooperating teachers were cross-referenced through mentoring of traditional and clinical teacher candidates, providing a specific group of cooperating teachers to receive invitations to participate. Finally, teacher candidates...
enrolled in Professional Development School (PDS) or Senior One coursework were invited to attend a focus group session.

From the university faculty invited to participate in the study, six faculty members with experience specific to the traditional pathway attended a focus group. A separate focus group was facilitated hosting four clinical pathway faculty members. A third focus group was held for the purpose of gathering perceptions from faculty members teaching traditional and clinical pathway coursework. Three faculty members with experience in both pathways attended the third focus group session.

From the three school districts encompassed in the data collection process, 10 principals attended focus group sessions. Cooperating teachers within the three specified school districts received invitations to attend focus groups. The total number of cooperating teachers with experiences relevant to both pathways and attending focus group sessions equaled 19.

Teacher candidates enrolled in coursework specific to the traditional and clinical pathway were invited to attend separate focus group sessions for the purpose of gathering perceptions of preparedness to student teach. From the traditional pathway, 35 teacher candidates at the end of the PDS semester of coursework attended focus group sessions. From the clinical pathway, 24 teacher candidates at the end of the Senior One semester of coursework attended focus group sessions.

Names and types of participants within each group are provided in the following table, Table 22. The qualitative findings in this section reflect focus group facilitator questions and participant responses in regards to specific teacher candidate course
requirements. Sub-headings identify the types of participants in order to connect participant type and response as part of the data analysis process.

Table 22

| Traditional University Faculty (6) | Erica  
Emily  
Elaine  
Elizabeth  
Ella  
Emma |
|-----------------------------------|--------|
| Clinical University Faculty (4)   | Sarah  
Sam  
Sadie  
Cindy |
| University Faculty with experience in both pathways (3) | Lora  
Leslie  
Lana |
| Principals (10)                   | Julie  
Jenna  
Jake  
Jill  
Eric  
Ava  
Tim  
Tami  
Tess  
Truman |
| Cooperating Teachers (19)         | June  
Joyce  
Jessica  
Melissa  
Maggie  
Michelle  
Megan  
Mindy  
Tessa  
Tracy  
Trish  
Tara  
Tia  
Trudy  
Ann  
Erin  
Alex |
<table>
<thead>
<tr>
<th></th>
<th>Ashley</th>
</tr>
</thead>
<tbody>
<tr>
<td>Traditional Teacher Candidates (30)</td>
<td>Andrea</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rebecca</td>
</tr>
<tr>
<td></td>
<td>Reagan</td>
</tr>
<tr>
<td></td>
<td>Rylee</td>
</tr>
<tr>
<td></td>
<td>Rachelle</td>
</tr>
<tr>
<td></td>
<td>Rian</td>
</tr>
<tr>
<td></td>
<td>Rachel</td>
</tr>
<tr>
<td></td>
<td>Rose</td>
</tr>
<tr>
<td></td>
<td>Roslyn</td>
</tr>
<tr>
<td></td>
<td>Ronda</td>
</tr>
<tr>
<td></td>
<td>Roxanne</td>
</tr>
<tr>
<td></td>
<td>Rae</td>
</tr>
<tr>
<td></td>
<td>Randi</td>
</tr>
<tr>
<td></td>
<td>Reese</td>
</tr>
<tr>
<td></td>
<td>Rena</td>
</tr>
<tr>
<td></td>
<td>Ruth</td>
</tr>
<tr>
<td></td>
<td>Renee</td>
</tr>
<tr>
<td></td>
<td>Robin</td>
</tr>
<tr>
<td></td>
<td>Rosanne</td>
</tr>
<tr>
<td></td>
<td>Rita</td>
</tr>
<tr>
<td></td>
<td>Ramona</td>
</tr>
<tr>
<td></td>
<td>Regina</td>
</tr>
<tr>
<td></td>
<td>Raven</td>
</tr>
<tr>
<td></td>
<td>Roberta</td>
</tr>
<tr>
<td></td>
<td>Ruby</td>
</tr>
<tr>
<td></td>
<td>Ria</td>
</tr>
<tr>
<td></td>
<td>Rori</td>
</tr>
<tr>
<td></td>
<td>Ryn</td>
</tr>
<tr>
<td></td>
<td>Rozlyn</td>
</tr>
<tr>
<td></td>
<td>Rozlynn</td>
</tr>
<tr>
<td></td>
<td>Rena</td>
</tr>
<tr>
<td></td>
<td>Reba</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical Teacher Candidates (24)</td>
<td>Kylie</td>
</tr>
<tr>
<td></td>
<td>Chloe</td>
</tr>
<tr>
<td></td>
<td>Cami</td>
</tr>
<tr>
<td></td>
<td>Katie</td>
</tr>
<tr>
<td></td>
<td>Kasey</td>
</tr>
<tr>
<td></td>
<td>Kasey</td>
</tr>
<tr>
<td></td>
<td>Carisa</td>
</tr>
<tr>
<td></td>
<td>Carin</td>
</tr>
<tr>
<td></td>
<td>Claire</td>
</tr>
<tr>
<td></td>
<td>Coryn</td>
</tr>
<tr>
<td></td>
<td>Kim</td>
</tr>
<tr>
<td></td>
<td>Kristen</td>
</tr>
<tr>
<td></td>
<td>Kelli</td>
</tr>
<tr>
<td></td>
<td>Cathy</td>
</tr>
<tr>
<td></td>
<td>Kris</td>
</tr>
</tbody>
</table>
Traditional Lesson Planning

University faculty. In regard to lesson planning and implementation, university traditional pathway faculty share the belief that due to a lack of early experiences in the field, their primary role as instructors is to learn about each teacher candidate and personal strengths and weaknesses in order to then focus on student learning in the elementary classroom. Emily started the conversation by stating, “We do a lot of community building. And, we really stress knowing who the children are, so we can meet all their different needs. We’re encouraging our teacher candidates to do the same thing when they go out in the classroom. They need to pick up learning styles and interests to really know what academic levels the kids are performing at.” Elizabeth was able to add, “We only meet two days a week, but I think that the second day that we meet, which is in the field, really helps us to get to know the students better, and their strengths and weaknesses, and when we actually see them trying to perform in the classroom.” Important to the conversation were Elaine’s thoughts, “Because we only meet two days a week, sometimes we think we have a strong teacher candidate, and then we get out into the schools with the students and we find out there may be many needs. So, there’s a differentiation from in class at UCM and out in the school sometimes.”
Due to these initial perspectives of traditional teacher candidates, faculty teaching in the traditional pathway prepare teacher candidates for lesson planning and implementation starting with familiarity of the MoPTA lesson plan and supported lesson implementation using small groups of children in the field. Course instruction and field experiences contribute to the lesson planning and implementation process. Emily, a traditional course instructor was able to share, “We look at the lesson plan and think about classroom management first. We are thinking about how we’re going to distribute materials, how we’re going to transition the children, and how we’re going to focus them again, those kinds of things. Then we look at our objectives and plan a lesson in the workshop model, so it’s kind of an ‘I do, we do, you do’ plan. They practice one lesson in the classroom with their peers, and then they have to develop one a week before they actually teach it to children.” Emma quickly added, “That’s what my teacher candidates are doing. They don’t do the practice; the first time is in front of a classroom of kids.”

After listening to the conversation, Ella interjected, “Mine do lesson plans. When I take them out, I put them in groups so that they have support with each other, but there are a number of them that are just a basket case the first time they go out there because they have to face real children.” In contrast to Ella, Lora described her experience with traditional teacher candidates as such, “My traditional class is doing much more lesson planning than my clinical pathway because there’s less application opportunity. Therefore, there’s more of an emphasis on planning. They’re writing a couple of lessons to get started, and this semester for the first time they’ve had a chance to go deliver those lessons in a rather contrived setting, but it was better than nothing. They write twelve lessons over the course of the semester.” Lana, who has taught within the same block as
Lora, was able to include “they did do the three lesson plans, two were written for whole
group and one was for small group. They also had to gather data to create intervention
lessons as well, so on top of their lesson planning, they had to do three intervention
lessons with their intervention case study student to get familiar with Response to
Intervention.” Leslie provided a slightly different perspective by mentioning, “I taught
the classroom management piece and was out supervising in the field. There were three
complete lesson plans that the teacher candidates wrote and then we observed them teach
in the field. So the traditional teacher candidates planned, taught, and had some
reflection, but not as much as we’ve built into the clinical.” The conversation revealed
some similarities in teaching style as well as differences in implementation between
course sections.

Through the conversation, several of the faculty felt comfortable with sharing a
common challenge related to teaching lesson planning. Ella first brought up the concern
by saying, “One of the biggest challenges traditional teacher candidates have is writing
objectives. They like to use the word ‘understand,’ ‘the children will understand’, or ‘the
children will learn more about’. And, I’m all the time asking, ‘How are you going to
measure that? What is that going to look like?’ That’s the biggest challenge I have with
lesson plans. They can come up with standards. They can come up with safety issues. The
science sometimes has to be fixed though.” Elaine agreed by adding “students do not
truly understand what a measurable verb is and then making the connection to the
assessment. Just when you get them to do the objective, then they have an assessment
that does not match. They don’t know how to specifically and formally measure how
many of the children got it and how many did not. That’s PDS, that’s clinical block, that
is every class. It’s very hard to begin with the end first, knowing what to assess and then get your objective. That’s really hard.” Erica included, “I teach a lower-level class and the lesson planning in our class focuses on different types of learning, so a learning experience through a center, a learning experience through a problem-based lesson plan, and a small group lesson plan. And, they create those lessons, they present them in class, they are UCM instructor reviewed, they are lead teacher classroom reviewed, and then the students are allowed to do those lesson plans with their early childhood learners in their placements. And, I too see difficulty with matching assessment, objective, and standard. And, we spend a lot of time talking about that in class.” Emma was able to finish the topic of lesson plan writing with this final quote, “I wish I had a dollar for every time I said, “And how are you going to know that they have that? How are you going to measure it? What is it going to look like?” They do not have a clue, not a clue.”

Through faculty discussion, it became apparent that the teacher candidates in the traditional pathway receive an absorbent amount of instruction related to lesson planning, and possibly write more lesson plans compared to the clinical pathway but continue to struggle through the writing process. The question then was focused on the perspectives of cooperating teachers in the field and that of teacher candidates themselves.

**Cooperating teachers.** Cooperating teachers were able to provide a discussion focused on the lesson planning process with teacher candidates in the traditional pathway. June shared, “Regarding standards and curriculum, my candidate was very knowledgeable about our practices and up-to-date on state curriculum. She was flexible and able to adapt to our online curriculum for her own planning at home as well.” Megan contributed to the conversation with, “When I had traditional students, they needed help
writing out their lesson plans. They knew the parts of the lesson plan but needed help with the individual parts of the plan. They couldn’t dig as deep as they needed to. They needed help with the structure of the plan and differentiating instruction to all the learners. They just need more help from me as a cooperating teacher.”

Some cooperating teachers provided a different perspective. Jessica shared, “They would tell what they needed to teach and I would tell them what the district expected. There was not room for other discussion.” Erin added to the conversation by saying, “They would always talk with us first about what lesson was coming up, what we wanted to have done or what activities or what topic and then they would typically go off and plan their lesson, email it to me so I could look at it, and ask for my feedback before it was due. They would then come in the classroom and teach it. It was kind of done electronically, more or less.” Andrea felt like she had to provide the scaffolding to the teacher candidates. She shared, “I felt like with the PDS students, I was tweaking more of their lessons during every little step.”

While some cooperating teachers identified as being part of the lesson planning process with the traditional teacher candidates, other cooperating teachers described different experiences. Mindy found the traditional pathway to not necessarily include her in the lesson planning process. She included, “There wasn’t any lesson planning. It was just here was her lesson plan, this is what she was teaching. She would observe, watch, and then do one lesson.” Tara shared, “I’m not always best at it, but I try to send an email giving the teacher candidate an idea of what their day’s going to look like when they come into my room. That way they know when they get there. When they come back the next week, I give them an idea of what we’re teaching so they already have that in mind.”
Other cooperating teachers described a lack of planning or responsibility for planning on the teacher candidate’s part. Melissa was able to share, “With the PDS students, it was not as deep with lesson planning because they were only in my classroom once a week. Not only once a week, but for a short time once a week. Usually I did the lesson planning, they would come in and assist. I felt like it was my job to get them in there and even give them an idea for their lesson. They would more assist than actually do the teaching. We just don’t see them after school, before school, or during plan time. We just don’t have a connection.” Tessa contributed to the conversation by adding her experience as, “The PDS students just had to teach a certain day so I told them what lesson I was going to be doing in reading and then I talked back and forth about what might be a good lesson, or ideas for them. Then, they wrote the lesson plan and emailed it to me. I had to give them ideas and tweaks and then they would just come in and teach it.” Ashley shared, “It just seemed like a random lesson plopped into the middle and it might fit our theme, but it didn’t really flow well.” Maggie added to this concept of disconnect by mentioning, “With the traditional teacher candidates, it’s more like ‘I have to do this one lesson. What would you like me to teach around this time?’ And it was very independent from what could have been going on in the rest of the class. It wasn’t necessarily inclusive to other subjects and topics and things. I think it wasn’t as connected. I don’t want it to be stand-alone. It’s kind of an isolated-type lesson, maybe that doesn’t flow as much with the other things. With PDS, it’s just more of one content area instead of being there a whole day.”

Teacher candidates enrolled in the traditional pathway to teacher education are offered multiple opportunities to plan appropriate lessons as stated by faculty with
traditional teaching experience at UCM. Cooperating teachers have mixed opinions of how prepared these candidates are for writing lessons for the purpose of implementing in a classroom of children versus practice in the college classroom. Many cooperating teachers expressed the need to support and assist traditional teacher candidates in their planning of lessons.

**Traditional pathway teacher candidates.** Traditional teacher candidates who have just completed their first semester of the senior experience, referred to as PDS, were also asked to share their experiences. These teacher candidates are embarking on student teaching in the next semester and have come together to share their thoughts on lesson planning in the traditional pathway. Traditional teacher candidates described the lesson planning process, including struggles and strengths relating to the traditional pathway.

Teacher candidates quickly began to share their personal process for creating lesson plans. Rae explained, “I choose a standard. I figure out what I want them to learn, and then I find an assessment, and then I fill in the gaps between.” Reba described a similar process by saying, “I look at the standards first and then I pick a standard that I want to use and base my lesson around that to make sure I meet all the objectives.” Robin included, “The first thing you do is look at the standard that you’re trying to meet and then you go from there. You create your objective and then work on your activities.” Renee agreed and elaborated, “I do it the same way. I look at my standards and then find an activity and objectives. Then I work on everything that goes with it.” Reese and Rena shared similar thoughts. Reese said, “My process is the same” where Rena elaborated, “I also use different guides and templates that the instructors provided and taught us.” Rosanne described her process in a similar way by saying, “I’ll back up what they just
said but also make sure you add in what your classroom’s interests are, not just focusing on the standard itself. You can do a different standard if your classroom has the desire to be learning something different. You want to take the kids and their personality types in consideration, think about what they’re into. It’s important in making lesson plans.”

As traditional teacher candidates discussed starting with standards when writing a lesson plan, some described a second focus when planning. Ruby discussed, “You’re going to look at the standards. You’re going to write a detailed lesson plan. I base my standards on how the class flowed after the first day I’ve met the class. You can write a detailed lesson plan, but if the classroom management isn’t good in that class, then you’re not going to get anything done. You’re wasting the time writing the lesson plan so detailed if you don’t understand how the flow of the class goes. That’s how I base my lesson plans. Roberta shared a similar idea, “You have to know your students before you really make lesson plans because if they’re more hands-on learners, you can’t really do a lecture-based or worksheet-based lesson. You have to figure out something that meets their needs more than your needs.”

Others found different techniques for lesson planning. These teacher candidates shared different processes for lesson planning. Rachelle started, “I tend to start with the objective, and then I kind of figure out what I want them to learn, and then I try to find a standard that ties into my objective. That’s probably where I start, and a lot of times I try to look back at my previous lessons to see if I have a format that I really like that will work for it, or a similar activity that worked well in a different class.” Ruth discussed her process by saying, “I first try to figure out what the students need to know and what they need to work on. Then I find a standard. After that, I try to narrow it down to an
objective, and then I look at strategies for teaching that specific skill through videos and lesson plans online.” Rori agreed by stating, “I plan for what content I’m trying to teach them and then try to make it something that engages them.” Rose stated, “I tend to start with what topic I need to cover, then I look for the standard that it covers, and then I build from there. I search online for some kind of activity or a hook for the lesson, like the information that I need, and then I go through the ‘I do. We do. You do.’” Ria added to this technique by saying, “I start with thinking about what I want the kids to learn and the just go from there to match the standard. Then I just go through the process.” Ryn described her process as, “I get on Pinterest and look up cute ideas and stuff.” Rori agreed by including, “I was going to say that too. I do too, or Teachers Pay Teachers.” Rozlyn described her process as, “I like to do the backwards lesson planning. I start with what I want the assessment to be and then build from there.”

A couple of teacher candidates discussed how MoPTA factored into their lesson planning process, connecting to university faculty discussion. Rian shared, “Now knowing what MoPTA is and being able to kind of practice writing lessons that way, I think that’s how I start, by looking at that format and then just trying to put all the pieces together first before I write it. That way, I have a better idea of getting the whole lesson that will prepare me for student teaching when I have to submit it.” Rose shared further by explaining, “The MoPTA has several steps. It’s just putting it into the form. Instead of ‘I do, we do, you do’ I have to remember it’s guided practice, independent practice, and modeling. It’s just knowing the format of MoPTA . It’s not something I feel comfortable with.”
Many of the traditional teacher candidates began to explain what parts of the lesson planning process they believe they are more confident in and which aspects challenge them more. Roberta shared her confidence in lesson planning by saying, “I feel confident in all of it. I’m kind of too far in not to feel confident in my lesson plans. I think if I don’t feel confident as a senior in my lesson planning, I should probably switch majors.” Many others nodded heads and muttered agreement, but others did not provide actual discussion on this statement. Other traditional teacher candidates in different focus groups shared confidence in writing about the modeling aspect of the lesson plan. Reagan mentioned, “I would say I feel really confident with the whole modeling process, like showing the students exactly how you want to do it and even the guided practice more. So those first two steps where you can really tell the students, ‘This is how you should do it. This is how I do it.’ That way, they know what to expect. I think that just doing the ‘I do. We do. You do’ format of the lesson, like being able to show our students how to model it, and then giving them some guided practice, and then letting them do it on their own in a way that’s practical that they’ll actually remember.” Ruth included, “I’m confident in hooking the students’ interests and modeling the concept.”

Another group of teacher candidates provided an array of confidence points regarding lesson plan writing. Rian added, “I think I’m more comfortable with differentiated instruction, being able to adjust and modify what I need to, to fit every learner.” Randi agreed by including, “I feel confident with finding different cooperating learning strategies or modifying the lesson plan to meet the needs of students.” Regina also felt confident in differentiated instruction. Regina shared, “I am confident in making accommodations for students.” Rose found confidence in a different aspect of the
planning process. Rose said, “I excel in integration. I’m good at integrating language arts into other kinds of lessons or other subjects into language arts lessons.” Roslyn stated, “I think I’m good at coming up with assessments and getting to understand if the students understand what the lesson was about.” Robin shared, “I’m confident with making the activity creative. Rita found confidence in transitions. The conversation supported different aspects of confidence through descriptions of lesson plan components.

Along with confidence come areas for growth and further understanding. Some students expressed a lack of confidence or clarity in different aspects of the lesson planning process. Rachelle found, “I feel least confident in assessing because I feel like a lot of times what I have down on paper for them is right on track. I think, ‘Yah, they’re totally going to get this.’ Then, when you get in there and you explain it and you walk around and a lot of them are confused, I realize they didn’t get it. So I think definitely the assessment at the end is probably the most difficult for me.” Rylee shared this lack of confidence by sharing, “I would say, what I’m least confident with, just because we haven’t really had the opportunity to do so in PDS, is using our assessments to evaluate what we need to teach them, or re-teach them, because we teach a lesson and then that’s it. We don’t get the chance to go back the next day and say, ‘Okay, you guys didn’t get this, so let’s go over this.’ The next time we teach a lesson again is a month later. So, that’s something that I feel like I haven’t had practice with.” Several other teacher candidates agreed with this concern. Ruth said, “I’m least confident in assessing the students.” Randi included, “I’m least confident in figuring out how to properly assess their knowledge.” Reese, Rae, and Rena all agreed through head nods and saying, “Yes” while Ruth and Randi spoke. Rita also shared this lack of confidence. Rita explained,
“I’m least confident at finding a way to properly assess the students at the end of the lesson.” Raven elaborated by including, “and using the information from your assessments to help make improvements in how you’re teaching.”

Ronda shared a different difficulty with lesson planning. She mentioned, “What I would say I was the least confident with is providing an extension to the lesson. If students finish early, providing something that extends the lesson, something that’s relevant to what I’m teaching.” Rose agreed by adding, “I struggle with differentiation, thinking of different ways to teach different things for different levels of students.” Robin shared this lack of confidence and discussed it further by adding, “I think it’s very hard, especially for us because we didn’t know our classroom when we were going into. Sometimes you don’t have a class, you just have to think of some things that could be wrong with some of your students. It’s very hard to make something up.”

Other teacher candidates shared a variety of concerns focused on lesson planning. Rachel included, “I think where I am the least confident would be with the activity. I never know if it’s going to go right until it’s actually done, and then I can kind of look back and then say, ‘Yah, that kind of worked,’ or realize it didn’t.” Rosanne discussed a lack of confidence related to time management. Rosanne shared, “Sometimes you think it’s going to take longer than it does. Sometimes it takes longer than what you thought. It can go either direction.”

A concern for several of the traditional teacher candidates was a lack of lesson planning in specific content areas. Rylee started the conversation by saying, “One more thing about lesson plans is that I can’t think of a time that I’ve ever created a math lesson plan. I feel like that’s something that I’m going to need to know how to do, and I guess
it’ll be trial-by-fire next semester. That’s not something that I’m entirely confident in.”

Rose added, “I agree, I’ve only written one lesson plan ever in my math course for teaching and that was it. That’s all I’ve ever written, and I’ve never actually taught one.” Rachelle concurred with the previous comments by adding, “I have never written a math lesson plan.”

Throughout the conversation, some students raised awareness of the lesson plan template and tasks. Rian shared, “One of the MoPTA tasks is a math lesson, and so I feel like I’m comfortable in doing that, but I feel like there’s some people that aren’t going to be as comfortable because they haven’t had exposure to that.” Rachelle asked Rian, “How do you know so much about the MoPTA lesson plan? I’ve never seen a MoPTA lesson plan.” Rian answered the question with, “I know so much about it because of the clinical pathway. We went through what MoPTA was in clinicals and we practiced using the MoPTA lesson plan format.” Rylee commented, “We haven’t really been exposed to MoPTA, like a big scary word all semester, but we haven’t had the opportunity to practice. It would really have been beneficial to at least practice one of the tasks so we know what they’re looking for. It would have been nice to have been exposed to it before the last day of class last week, because that was the first time we heard anything about the MoPTA, and if we’d known about it all semester, we could’ve maybe written our lesson plans in that format.” Rachelle commented, “Our entire class has never seen a MoPTA lesson plan.” Where some did not have experience with MoPTA, others stated they did. Rian shared, “That’s all that we used in our PDS class. Our teacher practiced the entire task one with us too.”
**Implementation of traditional lesson plans**

**University faculty.** After gathering all traditional faculty responses focused on the lesson planning process, the researcher asked this same group of participants to describe the implementation process. Perceptions of lesson planning understanding and then the implementation of those plans can be different. Therefore, the following conversation provides an overview of how traditional teacher candidates implement prepared lesson plans based on the perceptions of traditional teaching faculty and through a variety of traditional courses.

Lora, providing her own experiences with the traditional pathway lesson implementation process, did not hesitate to respond. She stated, “At the junior level, limited, if any. There is just not an opportunity for that application experience. This semester for the very first time, we’ve made a connection with one of the local schools. It was a challenge to get into that schedule. We had twenty minutes for a lesson; it was just very contrived. All of the lessons took place in the hallway. I think about the physical challenges of finding a place to actually teach. So again, I just said it was very contrived and limited in focus. It was good because I think I have seen an improvement in their lesson plans after they have worked with kids. But, I’m not sure it’s sustainable. I don’t know that it’s enough.” Leslie concurred with Lora’s response, adding, “In one of the districts our students were teaching in the halls, in the coach’s office, wherever we could find a spot. It’s nothing the district or principal had control over. Their buildings are just packed full. It was better than nothing, and that was even in the senior level, trying to find a place for those teachers to pull their focus group kids to do their interventions.”
Emily and Elaine both described the expectations of traditional teacher candidates when implementing lesson plans by Emily first saying, “they are responsible for implementing the lesson from introducing it, gathering the children wherever they want them, doing that first transition, and using all parts of the lesson plan, and being familiar enough with the plan to not have to have it in front of them. We ask them to call the students by name, so they need to be very familiar with that, and sometimes that’s hard. They’re only there one day a week, but they’re doing it pretty well. They implement the whole lesson. They finish with a closure, and they turn it over, verbally, to the other teacher.” Elaine included, “We do the MoPTA lesson plan, and that big-time focuses on before, during and after. That’s a great big deal, that whole lesson plan. And so, they have to include the before, during and after, the implementation of the lesson and the assessments as it goes along. They also are not supposed to look at the lesson plan while implementing, but it doesn’t happen. They’re looking at those lesson plans. They’re very insecure. I mean, only a few feel secure in it, because it’s their first time to really be in a classroom.”

The idea of insecurity sparked new conversation among faculty members in focus group sessions. Once the idea of insecurity was brought up by Elaine, Elizabeth shared, “I’ve had students in the past who perform really well in the classroom, and they write really well and they participate. But then, when they get out into the field they really are lacking in some people skills, social skills, and pedagogical skills.” Emily was able to contribute to reasoning for this phenomenon by including, “We have some students who have not ever been in front of live kids. They’ve only done role-playing, and this is their first semester of their senior year. That needs to be changed dramatically if we’re to
continue to have a traditional pathway.” This idea was supported with nods from the
group and Elaine’s response, “My PDS students will say, this is their first time. So, this is
truly their first time working with children.” Ella then included, “When I take them out, I
put them in groups so that they have support with each other, but there are a number of
them that are just a basket case the first time they go out there because they have to face
real children.”

Those faculty members who have taught in both the traditional pathway and the
clinical pathway have also identified with the above statements. There has been
agreement with the idea that there are individual differences in the delivery of instruction,
while adhering to the same educational standards, but also providing continued concern
for the lack of experience in the field. For example, Leslie mentioned, “I’ve taught
seniors in both pathways and there’s a difference in the delivery of instruction, but the
standards are the same. I think we match that up pretty well. But it’s that opportunity to
implement in the field. They don’t have as much time out in the field to transfer what
they’re learning, and practice it. So I think that’s one place that is not quite aligned.” Lora
shared a similar comment focused on junior level coursework, “At the junior level, I
absolutely see a difference in learning. It’s not the standards. Up until this semester, there
has been no application of learning in the field at the junior level. And even now, the
application is very, very limited. They’re meeting standards, but they’re not applying the
learning. They are only doing what they have to do to prepare for the learning.”

Due to a lack of time in the field and previous experiences with implementation,
traditional teacher candidates struggle with pacing and focus of the lesson. Ella shared,
“Sometimes the small group has designated one person to create the lesson plan, and then
the rest of the group are not familiar with the plan. Uh, yah! So, that happens sometimes. That doesn’t get them all the points. The other thing that happens is because it’s an elementary school and because it’s science, lots of times the time gets cut short or they have more lesson plan than will fit in the time allotted. When you only get twenty to twenty-five minutes to teach a lesson, you’re going to be really hustling along, so part of the problem I have is keeping them from steamrolling to the end of the lesson plan. ‘I have to get it all in! I have to get it all in!’ Or, ‘What do we do? Where do we cut it off if we have to?’ It’s real life. Now, what do you do when you have a group that may be out of control? How do you handle that? What’s your plan?’” After Ella brought up the concern of moving quickly through a lesson plan implementation, Elaine, Emma, and Elizabeth all supported the concern by mentioning, “We’re really not very good on pacing, which many times has to do with behaviors of the children, too much time, or lack of things to do. Some of them bulldoze their way right through the plan.” Toward the end of this topic, Elaine implied a lack of experience related to difficulty with lesson implementation. Elaine’s comment was, “These traditional teacher candidates need extended time out in the field. They need some experience before entering their senior block, PDS.”

Elizabeth suggested the idea of transforming the teacher candidate thought process to “teaching kids rather than teaching the lesson plan.” and others in the group agreed when Emma stated, “That’s when they’re finally kind of getting it. They’re finally figuring out that just because it’s written down, that isn’t necessarily the way it’s going to go. You know, it just doesn’t happen. It’s real life.” To finish the conversation, Elizabeth mentioned, “I think the traditional students need some help writing lesson plans before
PDS. Sometimes when they get to PDS, that’s the first time they write and implement a lesson plan.”

**Principals.** Principals in local school districts support this concern with a lack of time in the field for the traditional teacher candidates. Jenna shared, “When they’re a PDS student, they just aren’t in the building long enough. And so, it takes them more time to feel that same level of comfort, so it’s almost like a slow-to-start kind of situation. It can still happen. You just have to have a different kind of personality to be able to take risks in the environment.” Julie, another principal agreed with this thought through her comment, “When they’re there for longer, they have more confidence in knowing what their abilities are and we may put them in different situations that we wouldn’t put the traditional teacher candidates in. We don’t have the time or the ability to know the traditional teacher candidate’s strengths and weaknesses.”

**Cooperating teachers.** Cooperating teachers shared their personal experiences focused on traditional teacher candidate lesson implementation. Trish shared her thoughts related to traditional teacher candidate’s ability to implement lesson plans. She said, “I thought my students did very well on teaching a lesson. They took what I had kind of helped them look forward to more and what to change, and they did make those changes and they did a good job of teaching their lesson. They followed the objectives and the guidelines and had a graphic organizer.” Jessica mentioned, “They would implement the lessons as they were asked to do.” Tara included, “I think I’ve treated the students the same either way and I think that they’ve done pretty well.” Joyce provided her thoughts by adding, “The traditional candidates aren’t bad at implementing their lessons, it just that they don’t have as much knowledge or as many tools in their toolbox.” Megan’s
statement supports other cooperating teachers, “They normally do okay. They need a little more help from me with planning the lesson out, what it’s going to look like, but when it comes to implementing, they can implement okay.” June shared, “I had a non-traditional student in a rigorous semester of PDS before student teaching and she was very comfortable implementing in front of the kids. If I were to imagine a teacher candidate who did not complete many extra hours in the classroom, I would think they would require more time to adjust to the classroom management and comfort level that can only come with experience. My candidate was able to jump right in. She still had to make adjustments and changes regarding classroom management to the individuality of the class, but her confidence in teaching was strong.”

Some cooperating teachers felt traditional teacher candidates did not implement lesson plans with as much confidence or ability to differentiate their instruction. These teachers shared experiences with candidates revealing a disconnect between writing the plan and teaching. Megan stated, “I have noticed that the students I have had can’t catch those little things. They can’t see that little Johnny doesn’t understand this and this is what I need to do right now. They might notice after the lesson and see that this kid didn’t get it, but they just can’t seem to see it during the lesson and be able to adapt at the time. A lot of times I have noticed traditional students seem to motor through their lesson plan, get through the beginning, middle, and end and wrap it up to be done. They want to get it done so they can get to their paper-pencil work. They don’t necessarily think the lesson implementation is a time where you might need to stop and check to see if they are learning and fix any problems during their lesson.”
Traditional pathway teacher candidates. Due to a variety of unrelated courses throughout the traditional pathway to teacher education, experiences with implementing planned lessons are varied and low in quantity prior to the PDS semester of blocked courses. PDS is the semester just before student teaching and seems to be the first opportunity many of these candidates have to implement written plans with children. Traditional teacher candidates continued to reaffirm that previous coursework offered opportunities for lesson plan writing, without the focus on implementation. Focus groups were held for the purpose of gathering teacher candidate perceptions of lesson implementation through the traditional pathway.

Rena first brought up the concept of implementation by saying, “In the traditional block, we didn’t have that many opportunities to teach.” Rachelle contributed to the conversation with, “I feel like PDS has been the only time that I have really written a plan and have taken it to the classroom. In all the other courses you make a lesson plan and then you just turn it in. It doesn’t really become real until PDS when you can actually start implementing those lesson plans.” Rebecca added to the concern by sharing, “Going on with that, I have written a social studies lesson plan, but I have never taught one. The only reason I ever taught a math lesson is because my PDS teacher asked me, ‘What is something that you need and think you need to teach?’ I said, ‘I’ve never taught a math lesson.’ So, I taught one and now I feel a little better about it, but that was one lesson and one class and one grade level, and so I do not feel prepared to teach.” Ria shared a similar concern by saying, “I don’t feel comfortable with teaching math. They teach us how to do each kind of math problem in five different ways but they don’t tell you how to work through it with the kids. They just expect you to be able to do it
perfectly whenever you go out into the classroom.” Rebecca included, “Even in science, we taught the science lesson, but we were in a group. It’s not just you when you’re in a group, and you kind of just end up having to go along with what the group says. When you’re placed in a group that has strong personalities, it’s hard to to make yourself be heard. So, the lessons that we taught might not necessarily be what I would teach if it was just me.”

Some courses prior to the PDS semester of coursework provided opportunities for teacher candidates to implement lesson plans to peers in the college classroom. Rosemary described her experience as, “Sometimes it was hard to implement the plans. In some classes we had to teach our peers. I thought it was kind of hard to act like you were a teacher teaching children. It was easier to go into a classroom and do what we did in PDS where we had experience with actual students.” Rylee found, “I also think that, as far as our classes before PDS, when we did lesson plans and we would have to present it to our peers, it definitely never went how I would want it to go in a classroom because half the time they’re not taking it seriously, or they’re just kind of sitting there when I give out a worksheet that I would actually expect students to fill out. Then I can’t evaluate it the way I should be able to.” Rae shared, “I think I can implement a lesson plan to my peers just fine, but it’s completely different when I get in front of a classroom of students.”

Due to lack of implementation with actual students prior to the PDS semester, and limited time in the field during PDS, many teacher candidates focused on not knowing the students they are teaching to. Ruth shared the concern by saying, “I believe it’s hard to know exactly what the students need to know or what to teach them when you don’t get that much time in the classroom. You’re only there one day. I feel like you don’t
really get to know the students or know what they need to learn. How do you teach a concept if you don’t know if the students already know it or if they need extra help with it?” Reba agreed by including, “About one-third of the time lessons don’t go as planned. It’s all about classroom management and you have to make a lesson plan before you can meet the class because it’s a one-and-done field experience. Sometimes the kids aren’t able to be controlled or follow along how you planned your lesson. You can detail your lesson plan as much as you want, but especially with the younger kids, it’s not always going to go the way you planned.” Rebecca said, “I think that it’s hard for us to plan lessons for students that we don’t even necessarily know.

Through focus group discussion, traditional teacher candidates shared struggles related to lesson writing and classroom management. Through expanded discussion, several teacher candidates described another struggle related to lesson implementation and lack of follow-up lessons. Rebecca shared, “Even in PDS, that first lesson that you plan, you’ve only had a short time with them. It’s hard to know exactly what’s going to work for them. And then you teach that one lesson and you don’t ever really go back to it. If something didn’t work, you don’t get a chance to try something else on the same lesson. It’s hard for whenever we have our own classroom then because we have to do that. I can’t just say, ‘Oh, I taught that lesson. We’re going to move on to the next one, in a month.” Reagan added, “I also think that not only do we not get the opportunity to go back and see, but then typically most lessons that we’re assigned, the classroom teacher picks up something afterwards, and a lot of times they give us an introduction lesson to something. We get to introduce the topic, but when you introduce the topic, the kids are so clueless, at the time. It just kind of throws us out there, like to the wolves, and I’m just
thinking, ‘Oh, I hope they get this.’ I never get to extend the lesson because I’m not back there for another week. By that time, they’re more than likely covering new content, so I don’t even get the opportunity to talk to them about it either. There’s not enough time to sit down and talk with students.” Roberta provided her perspective by sharing, “It’s kind of hard because you’re not really making your lesson plans. You have to talk to your cooperating teacher, so you’re not really doing stuff that you want to do. I would have a week to come up with this lesson plan to make sure the students get the information. You don’t have a lot of plot and planning because you can’t build off a unit to make it stick more. It’s kind of not your plan. It’s just something you would Google, copy, paste, and hope it works.”

Traditional teacher candidates began to describe a lack of time for implementation in the field, providing personal experiences with rushed lessons. Rachelle stated, “There just wasn’t enough time in PDS. I feel like my PDS teacher this semester expected us to teach in thirty minutes what they’ll cover in an entire week in a kindergarten classroom. The lessons just take a lot of time and you can’t crunch it all in thirty minutes and expect the students to learn what you want them to. That’s kind of what we’re expected to do in PDS just so we can get evaluated. Our instructors would say, ’That’s not reality. You usually have a week to cover what we have to cover in thirty minutes.’” Rylee added, “I feel like as far as science goes, while I recognize the importance of inquiry based lessons, I feel like teaching those lessons every single time was unrealistic. We were led to believe that is the expectation, but I feel like you can’t do a big science activity every time you teach a science lesson because kids have to learn basic concepts first. I’m not going to be able to teach them all the important stuff they need to know, do a fun activity,
wrap it up and evaluate them in thirty minutes, which is what we were required to do this semester. I just think we were not given realistic expectations for science.” Ruth expanded on the concern by sharing, “I believe it would be beneficial to be able to teach lessons in a classroom where it’s a more realistic experience, like having us do two lessons in the same day and trying to figure out how to transition the students from one subject to the next. When we go in and we just teach one lesson, I feel like it’s not as authentic as when we are student teaching. We’re going to have to learn how to teach one lesson, fit it into allotted time, and then transition them into a different type of lesson. That’s what teachers do in the elementary all the time.”

The conversation turned to lack of opportunities based on field and in-class experiences. Rachelle shared, “Reading and writing is pushed so much now that we’re really getting reading and writing. Any time I got to pick a subject to do a lesson on, I did literacy because that’s what I was most comfortable with. Now I’m graduating without ever writing or implementing social studies or math lessons.” Rita included her experience by saying, “I know reading is really important, but there is an extreme emphasis on that versus math and other subjects. I never got to teach or observe a math lesson.” Rebecca then shared, “You want to do your best because you want the good grades and the teachers are looking at you to recommend you for student teaching or not, so you don’t want to pick a lesson that you know you’re not going to be strong in. I was super-nervous to pick math and I still am not sure why I did it, but it ended up being okay. It sure could’ve not gone well. It could have been so bad because in our math for teachers, we never had to write a lesson plan. I mean, I’m just early childhood and the math that I took went all the way up to middle school. The time we spent on middle
school could’ve been time spent on lesson planning for my actual major.” Rose shared, “I’m really intimidated to go into student teaching. The school I’m going to teaches mostly literacy and math. When they’re teaching mostly math and language arts, it’s really intimidating for me to go in having never taught a math lesson. It makes me really nervous.”

Some students had previous experiences in the clinical setting before transitioning to the traditional pathway. These few students provided unique content to focus group discussion. Rian shared, “I don’t have the same experience as the other people in traditional just because I had experienced the clinical before. After jumping from clinical back to traditional, I see a complete difference because in clinical, there were the math lessons you created, the science, and the social studies. I’ve had that back ground and it was different jumping back into traditional and realizing that, ‘Oh, I just have to create one of these. What?’ So, I think maybe sometimes people aren’t as prepared as the other people in certain aspects.”

Clinical lesson planning

University faculty. Clinical faculty members were also included in a separate focus group, with the opportunity to share how this pathway of teacher candidates lesson plan and implement those plans. These faculty members provided a slightly different approach to lesson planning based on field experiences with data gathering first, followed by the creation of lesson plans based on observations. Although there was some variation between course sections, many faculty members described similar formats for teaching lesson planning.
Sadie began the conversation by sharing how the clinical students plan their lessons. She said, “Well, for us they gather information in the field where the students are, and so then they are guided to do the first lesson based on decoding, and then the second lesson based on comprehension. So, based on where their students are, they write their lessons accordingly. And then, we do peer-review, so they have an opportunity to read other’s comments and then talk about it. We do that a couple of times, plus my feedback.” Sam included, “We have them actually use assessments that I’m giving them in the assessment course. They have to be sure it’s assessed and then the lesson is driven in that direction. Kind of what Sadie is saying, ‘What level are you at?’ And, they have to have proof positive numbers. They have very small groups when they do things, but the lesson includes the standard and objective. The idea is to give them the real deal, so that when they’re out there they can see ‘This is how I plan.’ I have a standard, I have an objective that matches that standard, and my lesson goes accordingly.”

Clinical University faculty expanded the conversation to include the lesson planning process and MoPTA template. Sarah said, “Lesson planning occurs in a gradual process. First we look at how science and social studies content is taught in the grade level versus previous blocks and how this will be different in the schools. We look at the MoPTA lesson plan parts and complete a lesson plan. I then grade these and talk with the teacher candidates about their lesson plan. I teach in class and they complete another plan based on my lesson. We discuss the components and process again. They then complete another lesson plan for their own science and social studies lesson based on objectives and standards.” Cindy contributed, “We use the MoPTA lesson plan, so they should be getting pretty good.” Lana added to this subject by mentioning, “When the students
lesson plan, we all use the MoPTA lesson plan form. The students do have a little confusion because they want to make a lesson plan their own. We want them to make a lesson plan their own, but they also need to stay with the district’s pacing guide and their content.” In line with seeing how planning happens in the teaching world and how students are expected to become familiar with the lesson planning process, Leslie included, “In the curriculum course with clinical, we do an integrated lesson. The teacher candidates may integrate either social studies or science with math or ELA standards. They all use the MoPTA lesson plan. On top of that, I feel like it’s real important that they also learn how to design a unit of study. So, they flesh out at least one of those lessons into this integrated lesson. We go beyond just the lesson planning to a good solid overview of what a unit plan looks like.”

Due to the consistency and repeated process related to lesson planning in the clinical pathway, Leslie mentioned a student’s comment focused on progression and learning. Leslie said, “I had one of the students tell me just the other day, when they first started using the MoPTA plan, they thought it was just so tiresome and almost redundant. They felt like it took forever, but they said what a difference it’s made. They said they can really whip through it now. They know the stuff. It has made them really think deeply about how they conduct themselves in the classroom and how to make the instruction meaningful to students. It made me proud.”

Cooperating teachers. Cooperating teachers shared their perceptions of lesson planning while working with clinical teacher candidates. Jessica described her experience with teacher candidates, “As far as lesson planning, we would talk about what the district expected the lesson plan to include and what they needed to include for instructors.”
Maggie was able to provide some details to her experiences as, “The way we planned is that I walked the teacher candidate through how our building works as far as pacing guides and what we need to teach in what quarter and things that were coming up with different skills. We really focused on planning together so we could try to reach as many kids as possible.” Mindy included her experiences with planning by saying, “When I had a clinical student, we talked together about what she needed to do and then we actually did a really cool unit where we focused on polar bears. It was a polar bear unit and she helped to create some lessons and we created some lessons together. She taught some of the lessons, I taught some of the lessons, and we co-taught some of the lessons.” Melissa added, “When you have clinical students, it’s non-stop communication. You’re talking and planning when the children are in the room, when the children are not in the room, before school, after school, through text during the evening hours at home, through e-mail, it’s non stop.” June shared, “We planned during our plan time. The use of Google Drive in our district was helpful so we could share lesson plans.” Megan was able to provide a detailed account of how clinical teacher candidates have entered her classroom and planned for lessons. Megan shared, “I’m seeing when they come in during their Senior one semester before student teaching that they are comparable to a traditional student teacher. They come in ahead of the curve as far as being able to plan a lesson and be able to hit on all of the topics they need to hit on and then be able to reflect on the experience. They are not only prepared for student teaching as far as planning, but it’s not necessary for them to write out a complete lesson plan because they already have that engrained and fine tuned in what to do. They already have all those components in their
head and they don’t have to think through the whole process, or what the parts of a lesson plan are and don’t need a lot of direction in writing lesson plans.”

Other cooperating teachers described different experiences with clinical students and their lesson planning experience. This group of cooperating teachers found the clinical pathway to be comparable to the traditional pathway in terms of planning. Trish shared, “They had to teach a social studies lesson and we just explained where we were going and they made the plans. They emailed the plans to me, and I looked at it. She went from there. I don’t think they’ve gotten into the deeper part of the lesson planning yet.”

**Clinical pathway teacher candidates.** Teacher candidates enrolled in the clinical pathway to teacher education are not offered as many experiences with teaching of lesson plan components as those in the traditional pathway, as derived through faculty experiences. These teacher candidates are not able to devote as much time to the understanding of the lesson plan process, but are required to grasp a firm understanding quickly through the writing of plans and implementation of those same plans to varying groups of children. Cooperating teachers have shared experiences with clinical teacher candidates and their confidence in planning lessons appropriate for the group of children being taught. Teacher candidates enrolled in the clinical pathway were then asked to share experiences specific to the clinical pathway. These teacher candidates expressed their beliefs related to lesson planning through the clinical setting.

Teacher candidates shared their experiences with lesson planning, focusing on the planning process and a connection to standards. Cami explained, “I take a look at my mentor teacher’s plans, I kind of discuss with my mentor teacher what she thinks we should do and get his or her ideas. Then I use what I’ve learned in the last two years, like
any activities I’ve learned or things that I’ve done research on and then I just kind of fill out the long form, and then I teach it.” Kari shared her process as, “Definitely start with the end in mind. Start with your learning objective, what you want the students to know at the end and from there, determine what’s acceptable evidence that the students have learned that, and then plan a learning activity that’s going to get them to that end goal. I think, at the point where we are in the program, it’s easy to look at Pinterest and get a cute idea for something, but you really have to make sure you are meeting a goal and not just picking something because it looks cute.” Kendall added, “You have to make sure you’re looking at the standards. You have a cute lesson, but it might not even be age appropriate for these students and you might think it is, but you need to know the standards and what they’ve already learned and how they learned it.” Kristen included, “Usually, they’re based on where the kids are at, like what unit and what they’re studying. And then, one of the first things I do is I usually look at the standards and what I want the kids to be able to accomplish by the end of the lesson. I kind of go from there and ask myself what activities or things are we going to do to get those kids to meet those objectives and standard.” Cameron shared, “It’s a matter of looking at the standards, beginning at the end and determining what the end goal is supposed to be. But for me, it’s also how to make it fun and how I can tie this into what they’re talking about in class.” Carin added, “I base my lessons off of what the students are learning in class, so off of the Common Core standards, and then to the student’s needs because you get to know the students really well and what students will get excited about. I look at where I need to differentiate it to others and it helps me out in the planning of a lesson.”
Other clinical teacher candidates included additional comments related to lesson components. Kris mentioned the importance of engagement through the comment, “Making sure it’s engaging is really important. Make sure it’s engaging for all the kids.” Kim added another comment based on lesson components, “Making sure it meets those essential questions not only throughout the lesson but when you’re wrapping it up in the closure.” Cathy shared, “I feel like I’m pretty confident with resources. I know where to go and I know where to look. It’s just kind of compiling everything in a way that is effective.” Kristen added thoughts related to confidence by saying, “I feel pretty confident with the activities, or the actual lesson itself, like the structuring. I feel like I can come up with a lot of cool and engaging ideas that will be able to have the kids learn what I want them to.” Kendall agreed with this comment and added, “With this new MoPTA lesson plan format, they highlight which instructional strategies you use, and I think that’s one area that I seriously have learned during the clinical block is that you need to have different strategies. Even if you don’t use them, maybe just have them in your pocket so you can pull them out during the lesson.” Cameron added to the topic by sharing, “I feel like I’ve become more confident in identifying which collaborative strategies are the best. For some reason, those just seemed so simple before; there’s no way you’re going to be able to make them more efficient with something as easy as that. But, having done them a couple of times now, they’ve become so much more integral in the planning and to see how well they engage the students.” Kim expressed confidence through her statement, “I feel confident in my classroom management skills. I’ve used many different techniques to get the class rolling and getting them to the end of the lesson.”
When referencing the lesson planning process as a whole, several clinical teacher candidates shared their thoughts. Kylie included her thoughts by adding, “Every single block had a different lesson plan form that we would have to fill out. It was really nice because then if a school district wanted you to fill out different types of forms, then you would be able to be flexible with it.” Cathy mentioned, “I think it boils down to beginning with knowing who you are teaching first and knowing where you want them to end up. A lot of that is knowing where they came from and what they already know and the kids that you have to differentiate for. You have to be prepared to take that on a little bit of a different path than you would for the other ones.” Krista added, “I think the clinical pathway gives you a chance to really push yourself and test things out. This way, you can do it now while you are still a student rather than whenever you have a job.” Chloe shared a feeling of overall preparedness to write lesson plans. She included, “I feel confident from planning it to teaching it. I just feel like we were very well prepared throughout all the clinical. I think we literally went step-by-step from how to brainstorm, how to plan it, how to write it, then how to teach it, and even how to work one-on-one with your cooperating teacher.”

Challenges in lesson planning are only natural. Teacher candidates in the clinical pathway openly shared difficulties encountered in the lesson planning process. However, where some described weakness, others discussed strength. Clinical teacher candidate struggles encompassed objective writing, MoPTA format, and differentiated instruction.

Objective writing seemed to open the conversation related to lesson plan challenges. Kari shared objective writing as her strength, “I’ve seen myself grow in writing solid objectives. We learned at the beginning that objectives need to be
measurable and realistic and I struggled with that. I didn’t know how to assess my
students, but I think it all comes back to making an objective or a learning goal for your
students that makes sense and you can easily measure to see if your students are where
they should be.” Cameron, on the other hand, described a lack of confidence in objective
writing. Cameron added, “I know what it is that I want my students to learn, but it’s a
matter of rephrasing it in the more traditional objective sense.” Katie also shared her
struggle with objectives by saying, “I still don’t grasp objectives very well. Having a
measurable outcome for something like English is harder than having a measurable
outcome in something that has to do with math. That is still something I have to sit down
and think if I can measure this and what are my students getting out of it rather than me
just teaching a lesson and being done.” Caroline contributed to the conversation by
including, “I still have trouble with my objectives. I get them confused with goal wording
and so when I do write my objectives, they don’t come out as measurable as they should.
I’m learning to do that now through feedback.”

Some of the clinical teacher candidates shared a struggle with the MoPTA format.
Katie began with, “Also, I struggle with explaining the process; I’m a very concise
person, so if I can just write it down and be done, that’s what I’m going to do. But you
have to be able to explain why you’re doing it. Whether it’s for your instructor or for the
MoPTA, you’re going to have an explanation for everything you do. So, you just have to
get that in your mind.” Kim shared a similar concern related to the MoPTA by saying,
“I’m kind of worried about making a rubric, especially because of MoPTA. I know that
we’ve learned a little bit about them, but I just wish we spent a little bit more time on

138
them because it’s going to be a big deal on MoPTA; making rubrics to assess the student’s learning.”

A third focal point discussed in the focus groups was the ability to differentiate instruction for a group of learners. Cora shared, “I feel like I have grown with differentiation, for the low students and the advanced students as well.” Carin, on the other hand shared, “Differentiating sometimes for different students can be hard depending on the students’ needs and trying to come up with ideas. I’ll think of it after I teach the lessons, but when I’m planning the lesson, it doesn’t really work as well.” Kelli added by sharing, “I feel like I have the basic skills to differentiate. I feel like sometimes I still need assistance with that, especially for English language learners.” Kristen piggybacked on this concept by adding, “I have a hard time thinking about how to extend a lesson for certain students. It’s the lower students that I seem to think of or come up with a lot of ways for them, but it’s the higher students, the early finishers that I still struggle with how to really meet their needs.” Kari added to the conversation with, “I don’t think it was until this semester that I realized that you have to differentiate for higher students also. I think we’re always quick to think about how I’m going to differentiate for those lower students that are struggling, but at the same time, you’ve got to challenge those who already have met the learning goal and are ready for something else, something more difficult.” Caroline added, “I agree with the differentiation as well with the higher students, especially when you’re not quite sure how high they are.”

**Clinical implementation of lesson plans**

**University faculty.** After providing an overview of the lesson planning process in the clinical pathway and communicating teacher candidate increased success, participants
were able to describe how implementation looks for these students. At the junior level, Lora was able to share, “They do assessments on four students, and design a lesson, and then because we are juniors, we’re focusing on just small group instruction. There isn’t whole group instruction. For science and social studies, they design two lessons and select one that they teach. About 35 percent of my students will get to decide to teach that to a whole class as an option, with the approval and coordination of the cooperating teacher. So, most will teach to four children, but some will opt for the opportunity to go ahead and teach it to the whole class, which is their choice. And because they are two in a room, they will actually co-teach with somebody else.” Cindy provided her opinion of the clinical pathway and implementation process, including teacher candidate mannerisms by saying, “At the very beginning, I think they’re really uncomfortable and they don’t want to look at their plan, because they think they’re supposed to have it down and be natural with it. And then, we set up the expectation that this doesn’t come naturally and that’s why you plan; use your plan. Towards the end, I’d see them actually implement the way the plan was written. At the beginning it was just sort of like the nerves and things that kind of got in the way and they didn’t really know the expectations.”

One of the clinical blocks shared a volume dilemma in relation to lesson implementation. Sam provided a different experience with her students by including, “Our first lesson, because of sheer numbers, we had to be creative, and so we decided to do peer coaching, and we have such great feedback that they were like, ‘Oh, I’m so glad I taught my first lesson with a peer watching me and giving me feedback versus an instructor’ and so then I thought they felt that they were a lot more prepared for us because they got that initial one out of the way, because so many of them that was the
very first lesson they’ve written and taught.” Sarah shared, “They also complete mini-lesions to implement in the field. As a supervisor in the field, I am also able to observe and discuss the plans and their implementation with small groups of children.”

Differences between the traditional and clinical pathways surfaced during focus group discussions. Leslie was able to describe the difference between the two pathways in relation to lesson implementation as, “What I see the difference between implementation of clinical and traditional is the level of confidence, the level of intent, intentional teaching on the part of our seniors in the clinical versus the traditional, I think it’s just because they’ve had more experience in the classroom. They just felt more comfortable. They’re more focused, I think.” Sadie added, “I like the fact that they get to apply what they learn in class. They can apply it in the field, then come back and talk about it, reflect on it. You can see a lot of growth. You can see the lesson at the beginning, and then the lesson at the end, and the growth between. You can see how they’re blossoming into a full blood teacher.”

With all the spoken benefits to implementing lesson plans in the clinical pathway, clinical faculty have also voiced concern related to the logistics of implementing developed lessons in the field. Leslie articulated the concern, “It’s becoming a little more difficult for students to find a spot to teach their lesson within the classroom’s curriculum. We don’t feel like we can tell the classroom teacher that they must teach their lesson now. So, the students are trying to fit it in within the curriculum planning the teacher has done. And so, we are running. We’re trying to figure out how to adjust and work with that because we certainly can’t disrupt what’s going on in that classroom in the districts. So, it’s a little bit of a challenge.”
**Principals.** Although principals typically do not observe teacher candidates in the classroom, or are available to see teacher candidate lesson plan implementation, several principals offered an additional perspective in regards to the UCM teacher education program and teacher candidates from both pathways. Principals in districts with experiences with both pathways were encouraged to provide their experiences related to lesson implementation of lesson plans during the clinical pathway.

Jessica revealed, “The teacher candidates would implement their lessons as they were asked to do by their instructors. We would talk about good times to implement and where to implement.” Tess found implementation to be more situational rather than related to one pathway or another. Tess explained, “Some candidates are stronger than others obviously. Some, their lessons that they taught gave me great ideas and I’ve written them down. I’ve used the green, yellow, and red idea to teach paragraph, and things like that, that I’ve never seen before. They have good ideas. And then some were lacking a little bit, not quite as strong.” Tara added to the conversation by mentioning, “Some can just go with it and make up their own lesson. Some do ask for more help. They take your books home or take copies.”

**Cooperating teachers.** Cooperating teachers with experience in both pathways were asked to share the lesson implementation process specific to the clinical pathway teacher candidates. Maggie shared, “Lesson implementation with the clinical students tended to go a lot smoother because they were more connected with all the parts of the day. The students had a better relationship, listening to them and responding to them as their teacher versus a stand-alone body.” Joyce provided, “Clinical candidates have a better grasp on each standard and the best way to approach a lesson.” Michelle shared,
“The clinical students just seem to have more exposure and their ability to be comfortable while teaching is just higher.”

As differences between the two pathways became apparent, some cooperating teachers described personal experiences in relation to lesson implementation and comfort level in the classroom. Ashley shared, “They know our personalities better and what our expectations are as teachers and how we teach and are able to implement lessons that kind of fit our teaching styles and the way our classroom works too.” Megan provided a similar experience by stating, “I think there is this big difference between the traditional and clinical students because there is a big difference in time they get to spend with students. I can tell clinical students in my room have had more time with students. I can tell with clinical that they’ve had a lot more time with kids and I think that comes from experience. They are more comfortable coming in, they have had time to work with students one-on-one, work with them in a group, and also work with them as a class. When you have had a lot of time working with the students, you are able to see those things a lot quicker and you are able to recognize if a student is struggling or see what the student is doing to avoid doing the work and when you have that experience with the kids, you know what you can do to help them. I think a lot of it is the level of time they are with the kids and practicing with the students. I also think it’s the time they are with the cooperating teacher. They get to see the teacher with the kids. The more time you spend in the classroom during the day the more you are able to see and take in. They are able to practice this more for use in their own classroom.” Melissa included, “They’re more self-driven.”
Clinical pathway teacher candidates. Those teacher candidates who have taken coursework in the clinical pathway have had consistent experiences in lesson implementation throughout their junior coursework and carried into the senior year. Based on faculty explanation, clinical teacher candidates are able to implement their plans based on varying groups of children. Principals and cooperating teachers have provided additional information related to the confidence of these candidates in their ability to implement planned lessons. These professionals have shared examples of confidence and understanding of lesson plan components present throughout implementation. Teacher candidates who have just completed their first semester of the senior experience and who are embarking on student teaching in the next semester, have come together to share their thoughts on lesson implementation through the clinical pathway.

Some teacher candidates found implementing planned lessons to go well where others expressed lessons do not always go as planned. Cameron shared, “I’ve noticed that the first part of the program, a lot of my lesson plans were excellent in theory and on paper, but then actually implementing them was a little more of a challenge. So, by the end of my third semester, having failed that many times, in certain ways, I feel like my very last lesson that I developed and delivered was probably my best one so far.” Carisa explained, “Sometimes they go really well and sometimes they just fall apart, but it’s just a learning experience and the one ‘s that fall apart, you can go back and look at everything that you’ve done or you did in that lesson and plan for the next time. Just write notes down and you’ll be able to fit it or change it.” Kris shared further, “I think it really depended on the teacher you were with because sometimes it was really easy to
implement a lesson, but then other times it wasn’t. I feel that the teacher made it smooth or not smooth.” Cathy shared further by adding, “I thought some of my placements would guide me with ‘Okay, here’s what we are doing. Here you go’ and I’d kind of have to format it into a proper lesson plan. And then other teachers would tell me to do whatever I want. My first two placements told me what to do, which was fine, but then my last one didn’t have anything specific for me to do so it was kind of a freedom overload. I had to do some balancing there.” Kristen found the following to be true for her experiences, “One of the hardest things was giving the criteria of what our professors wanted and then trying to meet that need within the classroom. I think it got easier over the semester, but at first I was trying to meet the needs of both. I didn’t want to jump in and do something completely new until I could fit the lesson, but I also needed to meet the criteria.” Kelsey shared, “I feel like I’ve grown by keeping my students engaged throughout the whole lesson, focusing on keeping them engaged and interested in the activity or topic.”

As clinical teacher candidates discussed their experiences with implementing lesson plans, some began to share struggles. Kelsey shared, “My time management was lacking in the beginning of the pathway. I thought I had plenty of time to teach a lesson, but I’ve realized my time management has gotten a lot better, realizing what I can teach in the amount of time that I have.” Caroline chuckled while adding, “I’m getting myself a timer.” Kari included, “I just think it takes being in the classroom more frequently to learn what it looks like to implement a lesson. Have a lesson that looks good on paper is one thing, but until you are in the classroom and know what a typical school day looks like and going back to time management, I don’t think you’re really going to be successful in implementing a lesson until you’ve seen those things happening.”
Reflection in the traditional pathway

*University faculty.* Reflection in the traditional pathway comes in many forms. Some faculty members provide reflection sheets, other require written reflection papers, and even others discuss reflective components with teacher candidates while in the field and in the classroom. Through the following data collection, the value of reflection is clear.

When discussing the reflective component of coursework in the traditional pathway, Emma strongly stated, “Reflections are the important part, because they’re responsible for doing a reflection on what they’ve done. And, hopefully the second reflection is a comparison to the first one. Hopefully they can see, after we’ve talked to them, what they’ve improved on, where they still need help, what their strengths are and playing to their strengths. So, hopefully, that’s reflected in the reflections when they write and they can actually see the difference in the improvement. A lot of them are a lot less nervous the second time around.” Elizabeth elaborated on Emma’s statement by adding, “the other thing is that I think it’s important for them to be able to label what good instruction is, and of course what the student’s reflecting on it. I want them to be able to say what they did well and why they know they did it well or what they didn’t do well and why it didn’t go well. So, I think it’s important that they’re able to label what makes it good.”

After listening to peer discussion, Emily shared a different reflection process. She explained, “In my class, the written reflection is in two parts. The first one has specific questions about their performance like what they did well, what they would change if they were to reteach this lesson, and any changes they made from their written lesson
plan. The second part is a documentation of what the children learned. So they have to look at the assessment, analyze that and draw some conclusions about where they would go from there.” Erica agreed with this process and included, “My students are required to reflect on every lesson that they create and present to their students. Sometimes it is in written form and sometimes it is through a picture collage. They are required to focus on the student’s thinking and the process that the student went through and then the outcome, making them focus on what the standard was, what the objective was, and were those met.” Ella, Elaine, Leslie, and Emma all agreed with the written reflection discussion, each sharing similar reflection assignments related to lesson plans and teaching experiences. Emma did elaborate further by sharing “My kids have to do reflections, but in addition I give them notecards every week and I have four questions for them to answer. The questions are ‘look for’ items like what did they notice in the classroom and kinds of questions they might have. So they are reflecting without all the planning. Hopefully they’re reflecting on what they’re seeing and what they’re hearing.” Leslie also commented that, “Right after the lesson, their nerves and adrenaline are still rushing. It’s very difficult for them to sit down. I have them do the reflection paper later. Usually I give them almost a week to turn that in and have the discussion. It’s a whole different ballgame when they’ve had time to calm down and then reflect.”

Lora provide a very different perspective in relation to the junior level field experience reflection. Lora shared “This is the first opportunity in the traditional pathway for peer coaching. We couldn’t go with the students in the field, so we partnered them to peer-coach. Because of our numbers, we physically didn’t think we could be reflective. So they peer coached each other and then we conversed with them about their coaching
and they were very positive. They appreciated the opportunity to get peer feedback and were responsive to that. And, they were also appreciative of getting a chance to have a peer watch them before an instructor watched them. I think it helped them be more reflective when we sat down together because they’ve already been through that process with each other.”

**Cooperating teachers.** Some cooperating teachers found traditional teacher candidates to be reflective in the field. Teachers were able to share their experiences with the reflection component, voicing opinions through discussion. Emily shared, “Our classroom teachers give written feedback using the same lesson evaluation form as we use. They also conference with the teacher candidates whenever.” Tessa and Trish compared the two pathways in terms of reflection. Tessa shared, “The traditional students had to video tape their lessons but the others didn’t have to video theirs.” Trish added, “We didn’t have a feedback paper either, whereas with the traditional students, we had to do feedback. We always went over the sheet whenever I gave it to them and we talked about it.” Trudy shared an enjoyment and comfort with the reflection sheets by adding, “I feel like the paper helps the student be more critical about themselves. My traditional girl thinks about her lessons a little bit more. She puts creativity in them because she knows people are going to be watching her and filling out the sheets. I think the sheets help them.” Tara included, “The paper lets me know what I really need to look for too, because I don’t know. I need the paper too.” June provided additional insight into the reflective component by saying, “The traditional candidate I had was reflective. I think all students have a need for reflection to feel if what they did was successful, and they have to be open to support.”
Other cooperating teachers described different experiences with traditional candidates and the reflection process. This group of teachers found it difficult to reflect with the traditional teacher candidates due to a variety of factors. Tia shared, “I love my traditional kids and I love working with them, but they are just squashed on time. The schedule is way too tight; you cannot talk to them. Basically, when you have twenty-five seven year olds in your face, you really can’t talk to another adult and have a conversation. With the traditional kids, I can’t discuss with them. Yes, they have a reflection sheet, but basically I handed it to them. If they come back and we have some time, we can talk about it but typically, I really can’t do that.”

Other cooperating teachers found a difference in quality of reflective practice rather than quantity of time to reflect together. Megan provided, “In all honesty, when I have had traditional students there was not a large reflection piece to it. It was more me reflecting on their experience and not as much on the student’s part. I would always talk to them and tell them what I would see. You know, they didn’t seem to talk as much but it was more me telling them what I was seeing and not a lot of them reflecting on their own teaching or them saying, ‘Oh, I noticed this and this is what I should be doing.’ It was more directed from me and not a lot of conversation between the both of us.” Tia included, “This last time I discussed with mine. I asked her what happened and how was her interview, and what questions she had for me. I actually did talk to her a little bit before she left.”

As the focus group session continued in relation to reflection, many cooperating teachers discussed different approaches to traditional teacher candidate reflection. Tia said, “I think it’s kind of crazy and I don’t like it because I don’t need a piece of paper to
reflect with people. I hate that part of it, that we’re tied to a piece of paper.” Erin shared her experience related to traditional teacher candidate reflection as, “They used to keep journals and they would have to write down all this stuff and they would bring it and then we would have to go through it all and write back to them. That was so hard and so much work. I don’t think they got as much out of it.” Maggie included, “When I think about PDS, all the reflecting was done outside of being with students. It was done back with peers, or with the professor, or via assignment. When I think more of reflecting in the educational experience, it can and should be right then and now. It can be with other people that weren’t even there, it can be with administrators, it can be with people that don’t even know what you’re teaching. I just think the reflective process is a lot more than just writing down how something went or recording and watching it later. I think the reflective piece has to be more consistent and it has to be followed up. When a PDS student is in the classroom, there’s not a lot of time to communicate with that teacher. In know when I was in PDS, I think I was at a time when we had recess right after, so that was really my only opportunity to talk outside of that core time with the teacher I was placed with.” Andrea shared, “With the traditional pathway students you’d have to schedule a time to reflect or just tell them, “email me about that and we’ll talk about it.” Ashley added, “It was just more formal.” Michelle, after listening for awhile, added, “It’s just a disconnect that’s not with the clinical students. I mean, we said this before as well, there’s just not time to talk about stuff and that goes with when they’re reflecting.” Erin included, “If they’re only there a couple of hours a couple times a week, they’re just a visitor.”
The traditional pathway to teacher education, according to the faculty experienced in this teaching, has a thorough and thought-out process for reflection with teacher candidates. These faculty members have included examples of how teacher candidates are taught to understand the importance of reflection as well as how reflection is supported throughout the learning process. Cooperating teachers have provided mixed understanding and feelings related to the traditional pathway reflection component. Some have stated the reflection encourages critical thinking and stronger understanding of the purpose for reflection, where others have eluded to the idea that reflection is not as strong or deep with these traditional teacher candidates.

**Traditional teacher candidates.** Overall, traditional teacher candidates have shared beliefs that their time in the field is affected through the reflection process. Focus groups were held with traditional teacher candidates to gather their perceptions of the reflection process through their coursework. These teacher candidates were able to share their experiences and feelings toward reflection prior to the student teaching semester.

Reagan first responded to the reflection process by stating, “We reflect by writing. We have videos and we write reflections.” Rosemary shared, “We sat down and talked about what went well and what didn’t go well. We also had videos and iPads so we could see how we taught. That really helped me because I was able to see what I was doing.” Randi added, “We did a lot of journals. We would reflect on our experience and our teaching. We would have a journal due at the end of every teaching experience we had to do.” Ruth shared, “I felt like the reflections were beneficial but then also difficult in the way that there’s so many aspects of a lesson you can look at, and it’s difficult for me to
see all of the areas that they want us to show in a lesson, like differentiation. You can’t always pull everything into that situation.”

Many of the traditional teacher candidates found reflection and connection back to the classroom difficult due to lack of time in the field. Rian commented, “I wish sometimes we were able to be in a school for a full day and not a half day. From seeing clinical where it was a full day, you just see so much more, experience so much more of the classroom, and get to know your students better, rather than when it’s just a half day. You are there for a couple of hours and then you’re gone.” Reagan agreed by mentioning, “If we could be there more than one time a week because it’s not practical to go into a classroom once a week and expect you to just get how it goes. These kids learn so much in five days.” Rylee said, “For the assignments that we have to do, we need to spend way more than three hours to actually do what they’re wanting us to do. For example, the child study we have to do. How do you work for thirty minutes one time a week and be able to know the student super well? I don’t know what works and what doesn’t work because I don’t get to see it all play out. If I’m implementing something like an intervention in reading, I don’t always get to see everything they do in reading because I’m there one day a week for three hours.” Rachelle added, “It’s hard to see the interventions that I’m implementing. I don’t know if it’s carrying over because the classroom teacher doesn’t have the time to make notes for my work. It’s hard to even see if I’m getting anywhere.” Rylee included, “Especially as far as reflection goes with the intervention lessons that we had to do. We learned this semester that you have to work with a student at least 17 times on a certain thing in order for them to get it and we did one lesson once. Then we had to teach another lesson again. How is our doing one 15
minute lesson with a focus student going to help them at all? I don’t really think it did."
Rebecca shared, “It’s hard for us to write our child study reflection because I feel like I
don’t know what they learned, if anything. I’m basically winging it at that point."

Some traditional teacher candidates shared how they reflect on lesson plans and
their own learning process. Rose expressed, “I think that we need to do a lot more
reflecting and I think we need to be given opportunities to revise as well. I don’t mean
revise our lesson for a different grade, but to go back and talk about how the lesson went
and be able to reteach or teach a separate lesson to go over material that was missed. That
way we can just get a feel for what it’s actually like in a real classroom and it’s more
realistic. There are many times where I’ve reflected as I was teaching the lesson.
Afterward I would think about how I should have done it. If I would’ve gotten the
opportunity to teach that lesson a second time, or teach a different lesson, it would have
been more solidified.” Roxanne found that reflection offered benefits to learn. Roxanne
shared, “I learn from my mistakes from reflecting. I’m able to correct them or implement
better ways the next time I teach.” Rae shared, “You get to look back and you can always
critique yourself and just make it better, like make yourself a better teacher, learning
ways that you can improve.” Robin shared an experience from this past semester in
regards to reflection. Robin said, “I was thinking about how my students reacted to my
lesson. There was one lesson that they were just wild and crazy and I realized the lesson
didn’t work. I realized I had to change what I had to do because of how they reacted.”
Rylee included her thoughts by stating, “I would say reflections are beneficial because it
does force you to really think about how your lesson went. You don’t just teach it and
then you’re done. You have to go back and think about if I had done it this way, it would have gone better.”

Reflection, as discussed by traditional teacher candidates, appears to provide many benefits to teacher candidates. Traditional teacher candidates began to share aspects of the reflection process that have helped them to grow as future teachers. Ria described her experience with reflection as, “I think of what I could do differently next time. If I’m going to be in that classroom again, I think about what classroom management strategy didn’t work this time so I will try something different next time.” Roberta added, “When it’s reflecting on your teaching, of course it’s always beneficial. You always look at what you did and what you could do better. After every lesson, you come up with better ideas and things you can do next time.” Reagan found, “I’d say I’ve learned the most about myself during reflections by going back and watching videos of myself and being able to reflect on that. I notice I repeat things a lot or I use my hands too much and that’s something that I’ve been able to reflect upon.” Rose added, “I think reflecting has really helped me with my classroom management skills. I’m able to look back on my lesson and see how I could’ve more effectively used my time and how I could’ve instructed my students in a way that was more precise.” Ronda provided her thoughts on reflection as, “Aside from reflections being used to see what you’ve done wrong or what you’ve done right, I feel like it has gotten me in the habit of reflecting on what I’ve done and being able to use that in my teaching career. Once we actually start teaching, we’re going to have to reflect on ‘Oh, What did I do? What did I do right? What did I do wrong?’ I feel like it has really gotten me in the habit of self-reflecting.” Renee shared, “I gain how to improve lesson planning, like strategies and needs of the class.” Rita elaborated by
mentioning, “I think that if you don’t reflect then you’re never going to get better. You have to reflect on yourself and then how the students react and act within the lesson.”

Clinical reflection

University faculty. Clinical teacher candidates are assigned a reflection component throughout their courses. Educators have been asked to share experiences related to the reflection component in the clinical block. University faculty first provided their perspectives focused on teacher candidate reflection. Many included what they require of their students as well as what they see happening in the classroom and the field. Sarah was able to share a general overview of the reflection component in the clinical pathway through the following statement, “As a field supervisor, I am able to observe and reflect with the teacher candidates as they implement their lessons in the field. They also reflect with their mentor teachers about their lessons, they make changes to their lesson plans based on reflection too.” Sarah went on to say, “the students developed more of the reflective piece as the semester progressed. They were better able to see what worked and what didn’t in their planning.” Leslie substantiated the comment by including, “I think it’s very difficult for some of our students to reflect. It may be the first time they’ve been asked to reflect on this kind of level, professionally reflect. I see them being resistant at the beginning, but then the ones I’ve seen in clinical, I see growing very rapidly in their ability to reflect effectively. In the traditional, we did some of that too, but not to the level of the clinical pathway. There are a that just don’t get it, but for the most part, I think the students have grabbed ahold of this. A few of them have shared that it all came together for them when they were sitting in the collaboration meetings with their cooperating teachers and so that is reinforcing for them how
important that really is.” Also agreeing with this conclusion was Lora who added, “I see my juniors, for the most part, are quick to be reflective. I’m very impressed with their level of reflection. When I ask them after a lesson how it went, they always tell me what did go well and what fell apart. I always have to coach them to what did go well. I’m most impressed with the students when I can give them a day or two after the lesson to have that reflective conversation; the level of reflection is much deeper. For so many of them, this is their first time working with children, their first time to teach a lesson, and they are really starting off with that reflective piece.”

Where the previous faculty members found more reflection with time, the following focus group participants provided a different preference in relation to reflection. Cindy spoke first about a contradictory stance for reflection by mentioning, “Separate from all the written discussion they were in, I meet with them directly after they teach and talk to them about everything and immediately ask them, “How do you think it went? And so, it’s a lot of one-on-one.” Sam immediately responded to Cindy’s comment by including, “Just like their principal would do. For us, it’s probably more immediate where they have to schedule a meeting with their principal to go talk about it. By the time I would get to that meeting, I would forget everything except that it was great. What we get with feedback is how the lesson was awful or not good and when asked why, they say it’s because they didn’t follow the plan. That’s exactly what we want to see, for them to understand why they should follow the plan. Whereas if it were the traditional pathway, the students would never get anything near that reflection, but would say, “you don’t have to follow the lesson plan every time.”
The clinical pathway instructors were able to not only share how feedback and reflection occurred with teacher candidates, but also provide the amount of feedback and types of reflection. Sadie said, “They taught four lessons and they got peer feedback on one and instructor feedback on three, so they had a lot of feedback. They reflected with us and then wrote the papers.” Sam included, “A lot of email too. They’d want to make sure their plans were correct.” When reflecting on the lesson plans and feedback, Leslie came to an interesting conclusion, “I think what’s really neat about our lesson planning is that it’s not just lesson planning because we throw in the reflection piece and they have to do the reflection after their teaching as well. I think that is where everything changes, where they see they’re growing as a teacher candidate.” With this comment, Lora included, “They’ll reflect on planning and the delivery, but they’re also planning a next step. It’s an overview of where they would go next based on the information given from the lesson assessment. So they’re not just being dropped into the lesson and it’s done. It’s providing what they do, what we know now, and where are the students going to go next. So the planning has taken on a big picture look.”

What also seemed to be valuable to the clinical pathway faculty members was the peer coaching aspect of reflection. This was brought to the forefront by Sam, who mentioned, “They would get together and talk about the lesson and a lot of times they were telling us they would do their peer coaching assignment, where they had to just pretty much tell what happened or what they heard, or what they observed, but then when they got on the bus on the way home, they would talk about what they should have done differently, or what they saw and what the teacher candidate should make sure not to do next time. So that was kind of a good thing for them to reflect with. And then, of course,
they also write their reflection paper for us to read and talk about with them.” After this comment, Sadie included, “I think we’ve talked to them so much about reflecting that they are becoming really good at it. They were even talking today about how even coming home on the bus, they would sit with their partner in their classroom or even in their grade level and just reflect on how the day went. So, I think that we’re teaching them a really good strategy that teachers need to know how to do.” As much as all the participants agreed with Sadie’s comment, Leslie added to the thought by saying, “They have planned, taught, and reflected more than the traditional pathway. I think that’s something we need to make sure that the traditional block is doing stronger, preparing them to meet those reflective prompts.”

One clinical faculty member participating in a focus group presented further understanding related to the success of the reflective prompts in the clinical pathway. Lana mentioned in a lengthy statement, “When it comes to the reflection piece, I think the shift done in the clinical at the senior level where our reflection questions are aligned to MoPTA has made a strong influence in student reflection. I think these questions have helped the students really pick their lesson apart. I think there are good reflective questions and poor reflective questions to ask students. I think these questions really are making students think because not only do they have to answer them, but also they have to provide a rationale explaining the why. For a while, that was hard for them to provide a rationale. Some students just are deeper with their thinking and then we have a level of students that believe they are at that level where they don’t think they did anything wrong in their lessons. We do have a little bit of cockiness in our clinical group. But I noticed this semester with these questions we’ve given them to reflect on with their lessons and a
lot of dispositions this time around, they were thinking deeper and took a lot more ownership for their dispositions. I was really impressed with the change on that.”

**Cooperating teachers.** Cooperating teachers were asked to describe the reflective process related to the clinical pathway teacher candidates. Many shared similar experiences, including how the teacher candidates reflect in the field individually and including how they reflected with the cooperating teachers. Jessica said, “I would ask them how things went and we would talk about what they could improve on.” June also stated, “The clinical teachers had the tools and reflection was a part of the teaching.” Megan shared, “They are able to look at the practices of how they did. They are able to see if it was a good lesson or if they needed to make a change. They are able to determine if a change they made was a good change or not, if a particular kid got it or if another kid didn’t and what they need to do to go further.” Erin provided additional input by mentioning, “We can just talk all the time and we’ll be sitting there in the afternoon and they’ll reflect back on something from that morning. The individual reflection is huge because they ask, ‘Why’d they do it that way? Could we try it this way?’ They’re constantly thinking about what they can do to help that child get it better and we talk about it and then decide to go for it and try something new.”

Several cooperating teachers described the reflective process as a team effort. Tia shared, “The clinical people are there during a break, when we go outside to recess, and they are there at the end of the day.” Alex described the reflection and collaboration with the clinical pathway teacher candidates as, “I feel more like a team with them, from the beginning. It’s not like I’m the teacher and you’re the PDS student. I mean, you come in and you’re going to be in the room with us. We are the teachers.” Melissa included, “It’s
constant, we’re communicating by asking how they thought a lesson went and listening to the candidate’s reflection of the experience. They say the children really liked it and they learned the children do well if they put something to a song or to music. They need to see a little video or short song. They think about what works for them and what doesn’t work for them.” Maggie added, “I feel like a lot of our conversations with clinical students are reflection driven. It’s not like ‘oh, that didn’t work.’ It’s more like ‘Do you think this didn’t work because of this’ and ‘Do you think I could change this’ and ‘This might make a better outcome.’ It’s just a deeper level of thinking as far as reflection. I just feel like almost all conversations with clinical students have some sort of reflective piece to it, even if it has to do with something where they’re not in your classroom. It could be a completely different separate location where they’re not even involved but still voicing that reflective capability.” Andrea mentioned a very similar concept with her comment, “I think the clinical pathway students, because they’re so comfortable with who they’re with, we would just converse like two people sitting at a table. We were reflecting constantly throughout the day. It just flowed a lot better with the clinical. It was natural.” Alex added, “I think they also feel a part of the team because they eat lunch with all of us, so they get to reflect not only with me, but with the other kindergarten teachers. They get to stay for collaboration and get to have the input on that, and so they get to know your whole grade level.” Ashley added to the thought by including, “I think also, in reflection, they’re not afraid to tell you if they didn’t think something went well because they get to know us a lot better. They get to know the whole team, the whole school, so much better. It’s so much more fluid.”
One group of cooperating teachers found the clinical pathway to be lacking in the reflection component. These teachers described collaboration in the clinical pathway to be not as critical or as structured as the traditional pathway. Trish explained, “I don’t really feel like I really see a reflective piece, clinical wise. I try to let her know when I think she’s doing a good job.” Trudy added to the conversation by sharing, “My girls would ask how I thought a lesson they taught went and would say it was good and they would respond with something like “okay.” I would ask what kind of things they could do better on and they didn’t really think about it very critically. I feel like the paper in the traditional path helps them be more critical about themselves.”

The clinical pathway to teacher education, as shared by clinical teaching faculty, has a clearly embedded process for the teacher candidate reflection component. Faculty in focus groups shared examples of how reflection is understood by teacher candidates and used in future planning experiences. Cooperating teachers included details related to the reflection process by sharing how clinical teacher candidates reflect in the classroom and throughout the day.

**Clinical pathway teacher candidates.** Teacher candidates were given the opportunity to share their feelings toward reflection in the clinical pathway. Clinical pathway teacher candidates intertwined their experiences with clinical teaching faculty and cooperating teachers. Reflection was not expressed as a means to an end, but rather an integral part of the learning process.

In regards to reflection, clinical teacher candidates expressed positive experiences. Krista shared, “I feel like we do a lot of reflecting. Our teachers require us to do some sort of reflection. I think that’s been super beneficial for me, to have their
feedback and being able to apply it towards our next lessons. I feel like after you reflect on paper so much, you just start doing it automatically. So, having to do it all the time, really at this point now, has just made me automatically do it as soon as I’m finished with a lesson.” Carin said, “Well, I know our first assignments asked us questions and had us reflect on what we’ve done and think about it. Our mentor teachers give us feedback and tell us what went well and what didn’t go well. But, in my experience, it’s when I had two chances to teach a lesson, like when I had a reading class in the morning and different class in the afternoon. When I taught my lesson, I had two experiences of teaching it. The first time I was like, ‘This didn’t go well.’ I was able to talk to my teacher and see what went well, what didn’t, and then try fixing it for the afternoon class and revising it better. It was a good experience.” Carisa agreed with Carin’s thoughts by adding, “I agree, but we had a lot of assignments that made us go back and think about how we did and what we would change, but also my professor who came and watched me had a lot of feedback and helped me come up with ideas. If I needed help or if something didn’t go well, she said, ‘These are a few ideas that you could do.’”

The reflective discussion revealed the relationship between teacher candidates and cooperating teachers through teacher candidate classroom experiences. Carisa also shared, “The cooperating teachers that I was with this past semester also were able to sit down with me and talk about how I did and what I could change and what went well.” Kelli agreed with the process by describing her experience with reflection. Kelli stated, “When I was done with my lesson, I talked to the classroom teacher I was paired up with and then again with my college instructor, and then I would also take notes of my own of what I thought. All of that would help me plan my next lesson and kind of figure out
things to look for that I need to improve on or see something that went really well and maybe try to incorporate something similar in my next lesson.” Kristen shared, “It just takes using all different aspects to reflect, not only personally but with other’s feedback. I know that after I personally reflect on how a lesson went, I really would try and watch my cooperating teacher for what she did and try to incorporate some of those attention grabbers or classroom management aspects that the kids really already know. That was really helpful.” Candace included, “I feel like I’m really good at reflecting afterwards, but changing the lesson during, while I’m still teaching it, I need work on that a little bit more because that’s more difficult to adapt it to what the children need.”

Clinical teacher candidates not only recognized how reflection occurred, but why reflection is important. Chloe shared, “I think you gain on different perspectives because I know my cooperating teacher sat down and would watch me teach, and then she would take notes, and then we would have a conversation afterwards about my strong points, maybe things I could improve on, or things I didn’t notice in the activity. The same happened with my professors; they would watch, and constantly take notes, and then share back with me because once you’re in the zone you obviously only notice certain things. It’s nice to see some things that you had no idea about.” Kelsey agreed by saying, “I was very thankful for the professor that was out in the field with me because she would write down her notes and meet with me immediately after I taught and she picked up on things that I probably wouldn’t have because I was in the moment.”

Reflective discussion during the focus groups also revolved around teacher candidate perceptions of reflection and how reflection can affect teaching through varied reflective strategies. Kylie included, “One thing I gained from reflection was being able
to look in the future. If I were to reteach that lesson, what would I do differently or what did I do that I want to make sure I do again, but then you have to base it off your kids. It would kind of guide my future teaching.” Cameron shared, “I actually keep a journal now at home where I’ll jot things down. Something occurs to me after the fact because there’s a lot of times when you give your lesson and it doesn’t really occur to you until hours later what you could have done different.” Kim added, “I think it’s really common for all of us after we teach a lesson, to reflect on ourselves, how it went because I know I’ll teach a lesson and I know what I need to change and what did not work. I know I need to think of something else for the next one. It’s all about self-regulation, about how you thought it went.” Katie shared further by including, “Reflection also helps you to not get hung up on things. I know in my first junior block I would get hung up on saying, ‘Uh huh.’ And just not being fluid with my delivery. After reflecting on my lessons, I could see this is actually a really good lesson; I just need to maybe take a breather before I actually teach it. So I didn’t get hung up on those things that I do over and over unconsciously.”

Being reflective and receiving feedback can be difficult for many. Some clinical teacher candidates understood the importance of reflection, but also shared the struggle with receiving feedback. Kendall explained, “During the junior block I would get upset, not mad, but I’d be like, ‘Oh, man! That was really bad.’ Or, the feedback I got was mixed or I didn’t get true feedback and I would get mad at myself. But now I don’t get mad at all. I reflect on what went well and what didn’t go well and know that I’m going to learn next time. That’s what I have to do because there’s no reason to get upset at yourself. You just have to keep on learning and just learn from your mistakes. Just take it,
just take the criticism.” Cameron supported the comment by adding, “That’s pretty much what I was going to say, not just learning from what I did wrong, but a lot of times it also helps me to see what I’ve done right. The whole lesson may have felt like a total disaster until I get home and really think it through.” Kari shared, “I think in addition to seeing your weaknesses or areas that you need to grow, sometimes you can be your toughest critic and when you finish something, you think, ‘that was awful,’ but then, you have a quick meeting with your professor who watched it and they point out some of your strengths. Sometimes when you pause to think about the lesson afterward, you can also see the areas where there were strengths in your lesson or things that you’re doing well.”

Caroline was able to contribute to the conversation by including, “It’s easy to reflect, it’s actually hard to reflect on yourself.” Cameron closed the topic with this last comment, “Just to kind of sum it up, I think really what comes from what we gain from the reflection is the ability to think more objectively, which is super important when planning lessons and assessing lessons. If you can do that with yourself, then it becomes easier to do that with your students.”

**Collaboration in the traditional pathway**

**University faculty.** Collaboration between the cooperating teacher and the teacher candidate within the traditional pathway has been a challenge according to faculty comments. Many of the faculty members have found collaboration in this pathway to resemble scheduling and reviewing lesson plans rather than actual sharing and discussion. When collaboration or discussion has occurred in the traditional pathway, it has taken on different forms. Leslie found the following, “There have been instances, examples of students in the traditional who did form a really tight bond with the teacher. They were e-
mailing and continue to e-mail and stay in touch with one another, but I think when you’re only dropping in for a half day a week, it’s difficult. You are focused on the students, and it’s a little bit more difficult. So much of the collaboration is through email, which is not a prime way of doing that. So I think it’s been strictly a function of the amount of time.” Elaine’s comment supported that of Leslie and implied a greater extent and depth to collaboration in the traditional pathway by including, “My teachers conference with my students, and I don’t mean it’s sit down roundtable. It could be they’re walking to get the children, or they’re taking the children somewhere, or they’re doing it at recess. All of the cooperating teachers conference with my students, so, they’re working with them. They’ve done some co-teaching with the students too. Again, it’s a first step, but they are attempting it. When my students do implement their lessons, the classroom teachers will give them feedback, almost all of them. And, there are seventeen of them.” Although these two faculty members shared similar experiences, Lora’s comment contradicted these. Lora shared, “My juniors don’t collaborate in the traditional pathway. All they did was communicate with the teacher about a time and opportunity; that was it. There was no conversation about what they were working on in class. There was no conversation about what they would be coming to do. It was a drop in, deliver, and walk.”

Some faculty spoke directly related to school district differences in terms of collaboration. Lana shared, “I think it depends on the school district that they’re working with, with our juniors and seniors, because with the seniors for instance, one school district that we were in, even though they were only there for half a day on Tuesdays, during that time a lot of the teachers were able to participate in some sort of grade level
meeting. And then, say that day didn’t work for them, the principal even invited them back and said they could come another day if they wanted to. Sometimes they had to make-up a day, and they could join a collaboration day. Also the instructional coach in that building made it a point to hold professional development meetings with the students and gave them time to talk with each other as students, and to kind of have collaborative conversations during their professional development piece that she would hold with them. So, I think it depends on the district you’re partnered with too, and how much they’re going to provide for the students.” Leslie added by saying, “I think that over the years there has been a definite growth in the right direction. I am seeing a very positive partnership where the principals and the staff are reaching out to our students to broaden their experiences beyond when the students have to be there. I’m seeing that as a win-win and it’s awesome to see that happening.”

**Principals.** One group of principals provided comments supporting the instructor perspective related to collaboration in the traditional pathway. Tim, thinking in terms of the teachers in his building, was able to contribute, “Teachers like the traditional pathway because of the support. I think we have more support in our building with the PDS from the university with their professors than we do with the clinical. Those PDS professors are in the building while the kids are there the whole time. They’re interacting with the kids and teachers, and the staff. The teachers like that part of the supervision from the university.” Truman shared “Some of our professional development is more intentional when we have the traditional pathway students.”

To contradict previous comments and discussion related to preparation and what traditional course instructors have shared in relation to the change in collaboration
between traditional teacher candidates and cooperating teachers, some local school principals reported a lack of time affecting that collaborative relationship. Jill was able to share her perspective through the following thought, “The PDS students who come in, and they’re just there for a few hours, it’s a little bit more difficult to give them things to do or release stuff to them just because you aren’t with them all the time. You haven’t seen their abilities. So it kind of makes it a little bit more difficult with all the responsibilities that are put on the teacher to make sure they get done with students.” Jenna continued with, “When they’re only there for a few hours a day, they don’t participate in collaboration. They literally are just watching and taking notes.”

**Cooperating teachers.** Cooperating teachers were able to describe how collaboration looks with traditional teacher candidates placed in their classrooms. Trish shared, “A lot of times we would just sit down one-on-one and we would talk about where we were going and where we’re headed and what she could do to help in that process of getting there.” June explained, “The candidate I had was very engaged with the students and knowledgeable about the district procedures from day one. This really helped her in her confidence and the time it takes to acclimate to a new school, which could then be channeled into building student relationships and teacher relationships. We collaborated over plan, via email, or texting. I could not have done it any other way.” Tracy described her experience with traditional teacher candidates during collaboration as, “usually during plan time and at recess. They would go to recess or lunch duty with us, or if they came early enough in the morning. Then we go over plans for the day and what we would like for them to do or how they can implement their lesson in the classroom too.”
Contradictory of other cooperating teachers, some shared an uneasiness or lack of confidence with the collaboration process where others described an inability to collaborate due to time restrictions. Joyce stated, “The traditional teachers seemed to just be okay with being told what to do without the understanding of why they were told.” Melissa described collaboration as occurring “through emailing and quick conversations, but mostly emails; maybe some afterschool type collaboration if that’s the time that the teacher candidates are there. Sometimes it happens before school if they come early, but it’s not as deep. It’s very minimal.” Ann was able to include her perception of collaboration in the traditional pathway through this comment, “I don’t think it happened with the PDS because I didn’t have the plan time to stop and talk to them and you can’t just stop and talk with kids. The timing and just the way it was set up didn’t allow us to collaborate. I didn’t have a plan time in the morning to talk with them.”

Through conversations with cooperating teachers in regards to collaboration, several shared a barrier to traditional teacher candidate collaboration. Mindy shared, “The traditional pathway couldn’t do what the clinical can. They just aren’t here enough. They are here for a short time and don’t get to experience our PLC collaboration. There just wasn’t time to sit down and talk together.” Alex included, “With the PDS, they might not be there during your plan time. It might be in the afternoon and they were there in the mornings so you didn’t really have that time without children to have those meaningful conversations.” Megan’s statement concurred with previous comments, “When I had PDS students in the classroom, they would only come in during the morning for two or maybe three hours so they didn’t feel like a part of the classroom. When a student is in the classroom for a full day a couple of times a week, they get to see the beginning of the
day, the middle of the day, the end of the day, whole group, small group, everything. They really get to see what the kids are like. When you are only in for like two and half hours, with specials and lunch in between, you don’t get to really see what the classroom is like and there really isn’t time to talk about it either. Now, they would email me and I wanted them to email me ideas for lessons and they would do that. I would have them do more than what was expected of them. I would have them teach to small groups, I would hand them things and say, “Hey, I want you to teach this part of the reading lesson” or tell them this is a time to try things. I wanted them to get in and try things out. They were always teaching, they were always doing things, but they were not part of the school day. They were stopping in for a little bit, staying awhile and then they would leave.”

Teacher candidates enrolled in the traditional pathway to teacher education are encouraged to collaborate with cooperating teachers while in the public school setting. University faculty explained how collaboration occurs through face-to-face conversations as well as other media for the purpose of planning and creating relationships. Cooperating teachers provided mixed emotions related to collaboration with traditional teacher candidates. Some shared strong examples of collaboration with traditional teacher candidates, expressing little to no difference between those enrolled in the traditional pathway compared to those in the clinical pathway. Many others provided strong examples of a clear difference between the two pathways, claiming a lack of time in the field impedes the collaboration effort in the traditional pathway.

**Traditional pathway teacher candidates.** Traditional teacher candidates were asked to share perceptions of collaboration through the traditional pathway experience. Many teacher candidates described examples of interactions with cooperating teacher
where others chose to focus on collaborations with university traditional faculty members. Throughout the conversation, some traditional teacher candidates explained collaboration as discussions based on implementation times and lesson plan concepts. The following section provides a deeper understanding of collaboration in the traditional pathway according to traditional teacher candidates.

Roberta described her relationship with cooperating teachers by explaining what they discussed and worked on together. Roberta said, “You have to talk to your cooperating teacher that’s in the class. He or she tells you what they want. They tell you that they want your lesson over a certain subject.”

Renee described her experience collaborating with the cooperating teacher as positive and beneficial to her learning. Renee said, “This semester especially, after I taught, I would sit down with my mentor teacher and discuss what went well and what didn’t go well. We talked about how I could have done it differently. We discussed ways to make it go better.” Roxanne shared, “I actually lucked out in Clinton because the teacher I worked with allowed me to sit in on a parent/teacher meeting. She allowed me to view an IEP, and let me get to know the students through their packets. They have packets of information for each student from previous classes. That’s how I got to know all the student’s names. She wasn’t required to do that. She just offered a lot of information. Rebecca added, “I really liked how the classroom teacher would reflect. She would watch one of my lessons. You’re getting feedback from people who have been in the classroom, and that was probably one of the most beneficial things out of PDS. They build your confidence by telling you the good things that you do. That made me feel
more prepared. It made me feel like I have the ability that I didn’t necessarily feel like I did before those conferences.”

Others shared collaborative examples related to the traditional faculty. Ronda explained, “I know the professors worked really hard to help us. I would like to commend them on the reflections and advice they gave. I’ve never taught before this semester and I’ve never received feedback before. They actually watched me and observed me. They gave good advice. They’re very thorough.” Regina believed otherwise, “I wish I would’ve gotten more feedback on how we did with our lessons from previous semesters.” Rosanne described collaboration with faculty as, “I feel like all of our teachers this semester were very collaborative. I felt very comfortable. In fact, our science teacher worked around some of the things when our stress level was high in PDS. She worked around that a little bit to keep us maintained. I feel like they did work together.”

Clinical collaboration

University faculty. Collaboration is a unique experience where teacher candidates have the opportunity to plan, discuss, and work with professionals in the classroom and field. Teacher candidates have many opportunities for collaboration. Those faculty members in the clinical pathway focus group were able to provide descriptions of the collaborations taking place between cooperating teachers and the teacher candidates. Further, faculty members who have had experiences with both pathways were able to provide some insight into the experiences, relevance to teacher education, and access to a collaborative environment. The following descriptions of
collaboration within the clinical pathway provide insight into the experiences of the clinical pathway teacher candidate.

Lora was able to start off the conversation by sharing, “My juniors in the clinical pathway are highly collaborative. They are in constant contact with the cooperating teacher over the lessons they’re planning. They are asking the cooperating teacher if the lesson meets what the children are learning in class, does it meet the expectations, or can I introduce something that you will be picking up. So, the students are constantly e-mailing. They’re attending all the grade level collaboration meetings. They are attending district level professional development, at the junior level. Every Thursday they are participating in their grade level team meetings where there’ll be data analysis. Yesterday they did running records. They’re getting all kinds of opportunities to work closely, not only with the cooperating teacher, but the other teachers of the grade level and the building principals.” Sam could substantiate the comment with, “The majority of teacher candidates talked a lot about working with their grade level teachers and planning together. In the district we are in, that seems to be a really big deal, everyone has grade level meetings at the same time. I think they definitely saw the purpose of collaboration and how beneficial it is.”

Another benefit to clinical teacher candidate collaboration, as according to university faculty, is a supportive learning environment with multiple classroom experiences. Sarah was able to contribute by including lesson planning collaboration examples by sharing, “Clinical teacher candidates are able to get into the schools much sooner and many times before student teaching. During these experiences, they are able to collaborate and reflect on their lessons continuously throughout the semester. Since
they are able to be in the classrooms two whole days a week, they are able to discuss and collaborate all day long about the lesson planning process. I know they collaborate during the teacher’s plan times, before and after school.” Leslie, reflecting on her previous experiences with traditional and the comments within the focus group, included, “I have not seen that level of opportunity for the traditional students. Now maybe it just hasn’t been there because of the time in the field, but now I think they have extended to a full day, which will help. But, there’s no way to provide that kind of experience, outside of having the time to be there in that building. There’s no way for us to create that.”

**Principals.** Principals had some similar perspectives to that of the clinical pathway instructors. Ava simply stated, “They are a part of our culture in the building. It’s just a fabulous collaboration.” Jenna shared, “During the school day, there’s collaboration that takes place once or twice a week at minimum with the grade level team, along with before or after school and across grade level committees that the clinical students are able to participate in because they’re there for the full day. They get more comfortable in that environment, they might take more of an active role where they’re not just watching; they are actually participating.” Truman included, “With the clinical, they’re just a part of the natural things that we’re doing as a building. They are part of the team meetings and planning. I don’t feel like we’ve done anything different with the clinical kids that we kind of did with the traditional kids.” Eric mentioned, “There’s a collegiality piece where they feel like they are part of a team. Their voice is heard as a clinical teacher candidate. The clinical block is innovated to the point where they’re more confident in their actions when we’re collaborating. They are an equal member rather
than a person sitting off to the side watching.” Jill supported this concept by saying, “There’s a trust factor there. The teachers are more willing to give them a little bit more to do.”

**Cooperating teachers.** Collaboration can occur on many levels of involvement with teacher candidates. Cooperating teachers were able to share their experiences with the clinical pathway teacher candidates in relation to collaboration. June described a different perspective related to collaboration with clinical teacher candidates than peer cooperating teachers. June described her experience with candidates as, “We collaborated in similar ways to the traditional pathway. We collaborated over plan, throughout the day as we co-taught, and through email and text message.”

Other cooperating teachers shared experiences different from the traditional pathway. Trish explained, “I think it’s a little different with the clinical students because we have them here for two days in a row. So, you’re looking at two days and asking, ‘What are we going to be doing? Okay now, tomorrow, this is what I would like for you to do.’ Mine asked what she could do and I told her she could come up with a game for rotation. She came up with three, three different games, so I think the clinical is a little more involved, a little more in depth.” Melissa mentioned, “Collaboration is constant. They’re at our sides at all times, it’s during lunch, when we’re walking down the hall, in front of the kids, it constant, all the time.” Joyce explained, “The clinical students seem to be more inquisitive and they want to know the reason behind things.” Alex included, “Since they’re with us all day long, they’re also there during our plan times, so we have that chance to visit and talk about our planning and their planning. We get them here early before school even starts and they’re here until the busses leave, so we have time
afterwards. So, not only do we have the plan time, we have the before school, the after school, and we eat lunch together. There’s just so much more time for us to talk and plan and collaborate.” Tessa shared, “I think they saw the transition from day to day, from lesson to lesson, and the carry over from day to day.” Erin and Andrea agreed through similar comments.

Some cooperating teachers found clinical pathway collaboration to begin before the school start date, before school hours, or even after school hours. Erin said, “With them coming in on work days or in-service days, before school even started, they were so excited to help me put up literacy boards and get things in place before the kids show up. They wanted to come early, they wanted to stay late, they were anxious and excited about getting to do all that and they wouldn’t have been able to in PDS.” Andrea included, “They are very willing to stay after school or come before school, or help me with whatever I wanted. They were willing to stay because they wanted to see what I was doing, they wanted to help do it, whereas the PDS way, they never would have had that option or choice.”

Other cooperating teachers expanded on the collaboration discussion by explaining the role clinical teacher candidates are able to take on during district and school collaboration efforts. Mindy added, “We would sit and talk and come up with lessons together. She would even come with us to our PLC collaboration so she could see the data aspect of it. She knew where we were and where the class was. We would come up with ideas and we would just talk about it. We could even plan for the next week based on lessons and data.” Ashley included a feeling of confidence in the teacher candidates through her thought, “I feel like I’m more willing to let them do more than
what they’re supposed to do. I think I’m more open to their ideas. If they want to teach a
lesson or try out an idea, I just let them go for it because I think it goes back to knowing
them and knowing what they’re capable of and I think they are much more capable and
ready.” Megan shared, “Since they came two different days, it allowed us to be able to
talk about things that happened on day one and what to do for day two. We would
normally collaborate and talk in the classroom. Of course we would also use staff
collaboration meetings or collaboration time for the school and the students would go
with us, which was beneficial. Then there were times where I would get a text or email
and they would share an idea they found and wanted to try in the classroom. There was
communication outside the school day and the time frame in between their school days
with me.”

Maggie contributed further to the concept of collaboration with clinical teacher
candidates by opening up the topic of school collaboration. Maggie shared, “I think the
cool part about the clinical experience is with them being here in the school setting more
often is they’re not just planning with the teacher they’re with. They’re planning with
other teachers too. They’re planning things that effect grade level decisions, and they’re
planning the experiences that we’ve had with third grade clinical teachers. They’re not
afraid to ask another teacher what they’re doing.” Jessica mentioned, “When we
collaborated, we would do so as a whole team and the teacher candidates were involved
in that process. We would also collaborate after a school day to see what worked and
what we needed to change.” Melissa and Maggie shared an overall eagerness to become
involved in the school environment. Maggie included, “They want to be involved as a
staff member, not just seeing themselves as visiting the classroom and leaving after a
bit.” Melissa added, “They’re a part of our faculty meetings. They’re a part of our collaboration, and they want to be there. They’re dedicated to that. I think the way our district runs things lends itself to the clinical because we have a collaborative culture that fits together very well. I think that creates a very different kind of environment for the students that come.”

**Clinical pathway teacher candidates.** Teacher candidates enrolled in the clinical pathway to teacher education are also encouraged to collaborate with cooperating teachers and school administration while in field experiences. University faculty members teaching in the clinical pathway have discussed benefits to collaboration in the schools. Additionally, principals and cooperating teachers have shared their experiences with this group of teacher candidates, providing examples of collaborative opportunities in the building and classroom. Further, school administration has explained additional benefits to collaborating with clinical teacher candidates include future employment opportunities. Clinical teacher candidates were asked to provide their experiences related to collaboration in the schools during field placements.

Krista shared her experiences with cooperating teachers as, “In the clinical pathway, you just work super closely with your teachers, with your supervising teacher and your cooperating teacher. We would talk about what students were learning. We talked about a lot, what they did in the past in the classroom, and what worked well in their classrooms.” Claire contributed, “I think lessons plans were a lot easier to write and implement because we can go to the teacher and talk about what they’re actually doing in the classroom instead of just doing something random. That was nicer to actually know exactly what they’re doing and it will be on track for them.”
Caroline shared, “Something we really should utilize is the cooperating teacher we’re working with. After doing lessons, we need to ask them what we did wrong and what we did right and give them our opinion on how it went. This lets us see if they agree or disagree. It just sort of gets their opinion on our teaching for the future.” Cameron added, “We’ve had the opportunity to sit in with parent-teacher conferences and go to some of the collaboration meetings that the teachers have as well.”

**Traditional preparedness to student teach**

*University faculty.* All teacher candidates want to feel prepared to student teach and faculty work to prepare teacher candidates for the world of teaching through coursework and field experiences. Multiple perspectives were collected to determine preparedness to student teach. Faculty members present in focus groups shared how they believe the traditional pathway to teacher education prepares candidates to student teach. Elaine shared, “I feel that our traditional students are very well prepared for their student teaching experience. Everything they do in my course involves application of content, theories, and strategies. Many students comment on their course evaluations that they feel well prepared for student teaching. I do think that PDS is often more stressful for them than student teaching as it is the first opportunity many of them have to plan and teach whole group lessons and observe, assess, plan, and implement interventions for an individual student.” Emma echoed agreement by adding, “While I feel many are pretty nervous about student teaching, I feel they really think they are prepared and anxious to start their new experience.” Ella agreed with the previous statements, including a change that could further prepare these teacher candidates. Ella commented, “I do think that traditional teacher candidates are prepared for student teaching, but I also believe if they
had more clinical experience, it would be very beneficial for them. They grow in doing whole class lessons, assessing a student in reading and analyzing the data to create intervention lessons. They also have an opportunity to use classroom management strategies throughout their teaching and in the classroom.”

**Principals.** Some principals felt the traditional pathway to teacher education prepared teacher candidates equally or better than the clinical program. These principals found the individual candidates to be the difference, rather than the chosen pathway. Tess was the first to share, “I really don’t see that much difference in their knowledge before student teaching. I would say our PDS students are probably stronger candidates. Tami and Truman both supported the comment. Tami added, “I think we’ve had a couple three candidates that weren’t as motivated or weren’t as naturally talented at coming in and teachers have to come in and take charge. We are take charge people, so we like take charge people, whether traditional or clinical.” Later Tami shared, “I don’t personally see a difference as far as the preparation of students. Tim concurred with this statement, but then added, “I’d say that if I had to go a certain route right now, I would probably rather take on the traditional kids rather than the clinical just because I think that the level of supervision or the support from the university there is stronger for those kids. I just think it’s to our teachers’ advantage and the people doing the work in the building from the university to have that support there on hand.”

Many principals from separate focus groups shared a very different perspective, expressing a lack of preparedness to student teach from traditional students through an inability to form strong relationships with school staff, a lack of confidence in teaching, and less experience in the field. Eric shared, “Our traditional candidates aren’t as
prepared. I think there’s a little bit of fear when they get to that student teaching point.”

Tami backed up from a previous comment where she had stated traditional teacher candidates are more prepared than clinical and hinted at a lack of preparation through her comment, “Sometimes they might be a little timid. They might waste two weeks getting to know the classroom teacher whenever that classroom teacher only wants them to dive right in.” When considering candidates to interview, Jenna shared, “I think that with the traditional, you’re more likely to find the candidate that you aren’t interested in rather than the ones that you really are interested in. I don’t think the pathway sets itself up for the candidates to shine. I think it sets itself up for candidates that maybe aren’t taking it as seriously, through how they dress, how they interact, how they engage, even what they do. Like, if the teacher gets up and leaves to take the classroom for a restroom break, does the teacher candidate get up and go with the teacher and class? Those kinds of things occur.”

In relation to hiring traditional teacher candidates, some principals discussed concerns and additional supports required for those candidates to do well during the first year of teaching. Ava stated, “Traditional teacher candidates are more hesitant. They would need more support as a brand new teacher. They would require a teacher mentor who could give them tons of support.” Jake added, “I don’t watch the traditional teacher candidates as closely to hire later because they are there so little and they just can’t collaborate to the extent of the clinical. They just don’t have the same opportunities.”

Ava contributed to a concern with traditional teacher candidate preparation by adding, “It’s harder to get cooperating teachers to volunteer to host traditional students; they do prefer the clinical pathway candidates. I’m not saying there aren’t great teaching
candidates coming through the traditional pathway. I’ve seen some really good students come through the traditional pathway that would have been fabulous through the clinical pathway as well. I just feel more confident when I host clinical students versus traditional.” Eric, another local principal was able to elaborate on the lack of preparation through his comment, “I think our traditional teacher candidates have a tendency to take a little bit longer to get to the point where they feel confident. The traditional students tend to step back a little bit and wait and really look through a lens. I’ve actually had two student teachers that have been transferred because they weren’t making it here. It wasn’t going to work. Classroom management was the first weakness and organization was second.”

**Cooperating teachers.** Cooperating teachers shared their thoughts and experiences related to traditional teacher candidate preparation to student teach. Some cooperating teachers from focus groups shared a belief that traditional students are more prepared to student teach than clinical students. These teachers became outliers through their provided experiences specific to their classrooms and assigned teacher candidates. A second group of teachers found it difficult to determine if the pathway prepares the teacher candidate or the candidate determines own experience through the pathway. Others found a lack of preparedness to student teach through shorter time frames in the classroom and fewer experiences throughout coursework.

Trudy explained, “My traditional student was a lot better than both my clinical girls. She would jump in there and she was more of a go-getter. She had more creative lessons.” Mindy was able so share two different opinions related to traditional pathway preparation. Mindy stated, “I think the traditional is great because it’s a traditional sense
of college experience, but they come in for a short time, they teach a lesson, and then boom, they are done. They are getting thrown in, and then they leave.” Michelle found the question more difficult to answer. Michelle shared, “I think it depends on the person. You could get a willing person who’s in the traditional program that can walk into a classroom tomorrow and be great.” Ashley really struggled with determining preparation to teach based on traditional coursework. Ashley stated, “I think overall, that with the clinical pathway, the students are much more prepared. I mean, I think it’s probably a student by student, case by case. I don’t know that I’ve ever had an experience where I felt like one was just truly not prepared, I think that’s very rare. I think clinical students become professionals sooner than traditional students.” Tara shared a similar thought by stating, “Clinical and traditional students aren’t always equally prepared. I think it’s just the confidence level of the different students. It just depends on maybe how much experience one has had over another.” Maggie contributed to the conversation by saying, “with a traditional candidate, sometimes weaknesses may show up or they may not, and then all of the sudden those weaknesses can be a problem in that final semester before student teaching. Sometimes they show up with us when they’re at this point, when they’re actually in our classrooms.”

Other cooperating teachers vocalized a distinct difference in the preparation of teacher candidates from the traditional pathway to those in the clinical pathway. Megan explained, “When Senior one students come in, they are more prepared than traditional students. They are coming in at the same level or higher than what my traditional students have been. I think it’s a matter of their time in the classroom. It’s hard to talk about behaviors they are seeing in a child or what is happening with a student when they can’t
see the whole day. We teach about the whole child and they should be able to see the whole picture of a child’s day. They need to talk about a whole child and see a whole child in the day.”

**Traditional pathway teacher candidates.** Determining how prepared teacher candidates are to student teach is a difficult task. University faculty members, principals, and cooperating teachers have all provided their opinions, as well as examples related to how prepared traditional teacher candidates are for the task of student teaching. After gathering these perspectives, teacher candidates themselves were given the opportunity to share their thoughts related to preparation. Many traditional teacher candidates expressed preparedness initially, but as the conversation flowed, a lack of confidence emerged through discussion.

When it comes to feeling prepared to student teach, one aspect leading to that level of preparation is confidence. Ronda shared, “I feel like nine times out of ten, that confidence is really what you need when you actually step into a classroom. You just need to feel like, ‘Oh, I got this!’ All the other stuff, I feel like it will come with experience. Confidence is what gets you there and that’s what the traditional path and PDS have built up.” Rena shared, “While we’re not spending as much time in the classroom, we at least gain knowledge on different kinds of students and how to teach with a bunch of different kinds of students, not just one group of students that we see everyday.” Ruth included, “I also feel like the teachers give us a lot of different tools that we can use that I feel are beneficial for student teaching and for teaching different types of students.” Reagan added, “It’s really a great program. You learn a lot.”
Traditional teacher candidates shared experiences in the traditional pathway leading to their preparedness to student teach. Many described different experiences prior to the PDS semester that hindered preparedness, elaborating on a lack of authentic experiences throughout junior year coursework. Traditional teacher candidates found a lack of preparedness early on, with opportunities to gain confidence and preparedness during the PDS semester. Ramona described her traditional experience by sharing, “I actually taught in a fifth grade classroom this year. It was only science. They rotated in the classroom, so I got to see the integration of math and reading and science as well. That was cool.” Rita supported these ideas by providing additional thoughts. Rita said, “This semester PDS was far more useful than anything else. All the other semesters were just sit back and watch and I did learn. But I learned way more this semester getting to be able to actually get in there and do it.” Roberta shared further, “The traditional pathway has gotten us in the classroom. It has gotten us the chance to get in there and teach. It taught us the information that we know, but everything looks better on paper than it does with experience. I did traditional because it just fit me better, but if I could, I would’ve done clinical just to get more classroom experience. It’s something you don’t really know you like until you just get in there and try it. With the traditional, we get in the classroom, but it’s not nearly as much as we should be.”

The most mentioned obstacle related to preparedness to student teach was the lack of time in the field and inability to have realistic learning experiences. Rae shared, “I need more time in the field, because one class with classroom management really doesn’t get you prepared to where you need to be.” Reese agreed and included, “I think classroom management techniques and more time in the field is needed for me to feel
prepared.” Rori shared, “I wish we had more time in the classroom because we’re going from one day a week to five says a week next semester. We’ll be fine once we do it, but it would have been nice to have more time in the classroom to have more experience before student teaching.” Reagan stated, “I think the biggest thing that we need to be ready to student teach is we need more time in the classroom, flat out more time in the classroom.” Rita reiterated, “I’ve never taught a math lesson.” Robin agreed by sharing the same lack of experience. Rebecca included, “I think we’ve spent so many hours observing and so few hours actually teaching. I just feel like I get so much more out of writing lesson plans, spending time in the classroom, rather than sitting. I need experience. I need real life examples. I need to see it. I can’t read a textbook because whatever’s written in the textbook isn’t realistic for a classroom, for an actual classroom and how things actually happen.” Rose added, “I feel like we don’t get enough applicable experience.” Roberta discussed, “The information we were learning in lectures is more stuff we can’t really learn unless we are seeing it. Like classroom management for example, it’s something you can’t just read about. The book can tell me to clap my hands twice to get the students to be quiet, but realistically, I’m not going to do it that easily. Reading it and doing it are completely different because not all my students are going to respond to clapping your hands.” Regina described her concern as, “I don’t feel ready to student teaching because I lack the confidence to be by myself.”

Other teacher candidates shared lack of preparation in relation to lesson planning. Rylee mentioned, “As far as being prepared for student teaching, I’ve never learned how to look at a school’s curriculum and base my lesson plans off of that. I’ve never looked at a curriculum to see what you need to teach and what you need to have done by certain
days so you can move onto another topic.” Rian extended the discussion by sharing,

“Traditional is a lot easier. It’s not as many assignments and you’re only there a half day. In the clinical, you’re there two full days out of the week and you have multiple lesson plans, like probably four or five within the semester. I just feel like I learned a lot more in clinical and I was kind of touched up upon a couple of things in traditional when I first got here.”

Several traditional teacher candidates have vocalized a need for diversified grade level experiences in the field. Rebecca said, “We should be teaching multiple lessons in each content area.” Reagan added, “And then do various grades. This was the first time I’ve ever been in anything as low as second grade. Everything else I’ve been put in was higher. I’ve been in third, fourth, and fifth grade all the time and then was put in second grade for PDS. They were so little; I didn’t know what to do with them. It’s been a whole new learning experience because I’ve never had to deal with that grade. I’ve read about it in textbooks, but there’s a whole difference between reading about it in a textbook and talking about it in class discussion, and seeing it being implemented. Rebecca included, “As an early childhood major, you’re pushed into birth to first grade so much that I would absolutely not feel prepared to do anything with a third grade classroom. What a kindergartner or preschooler or birth to age three aspect is so different than second or third grade. How the brain works, the things that you learn, the wait time, the classroom management, all of that experience. I just don’t think it’s very comprehensive, like I didn’t get everything my major covers.” Rachelle echoed the lack of preparedness by sharing, “I’m early childhood and I’ve never been placed in a classroom older than first grade. I have so much experience in kindergarten and first grade, especially kindergarten.
Naturally, I was hoping to get kindergarten for student teaching because that’s what I’m comfortable in, and I did. But if I had been placed in second or third grade, I would be clueless because I’ve never set foot in those classrooms.”

Two teacher candidates had experiences with the clinical and traditional pathways, offering a slightly different perspective than most. Rian shared, “I’ve had the opportunity to be in clinical and traditional. I’ve experienced every grade level. I’ve experienced all but first grade, which now it’s scary because that is what I’m student teaching. I still feel confident because I’ve had that ability to do the younger grades and to the older grades. I know the clinical pathway is so much more extensive than traditional, but I almost feel like traditional needs to get a little bit tougher to get that real comprehensive of everything. In clinical, you physically learn about each grade separately. Whereas in PDS, it’s all just kind of jumbled into one and so I think it almost needs to be tougher and more extensive so everyone’s getting confident going in no matter where they are placed or with what grade level.” Ruth shared her thoughts by saying, “Since I’ve been in both, I would say that the clinical has a lot more demand to it and a lot higher expectations, and more experience. Traditional comes with less time in the field but still quality teaching from the instructors.” Rian added further, “Having gone through clinical and traditional, I would choose clinical over traditional any day. I just feel the stuff I learned in clinical is what’s going to get me through student teaching versus what I learned in traditional. I know there isn’t anything wrong with that; I just feel that with clinical, I’m way more prepared.”

If given the opportunity to make the decision of traditional or clinical pathway, teacher candidates provided a mixed discussion. Many said they would choose the
traditional pathway again, providing their reasoning for the choice. Discussion ranged from time to graduate, flexibility of the courses, and the ability to take on additional tasks. One group of teacher candidates found commonalities in their decision to complete the traditional pathway, and their reasoning for choosing the path again. Rose shared, “I would have to because I was a transfer student and I would’ve graduated in six years instead of five if I had gone with clinical. I would’ve preferred to take the clinical pathway. I feel like I would be more prepared to go into a classroom and have ownership of my own classroom if I had taken clinical.” Reese added, “I was a transfer student and this was the easiest way for me to graduate in a decent amount of time.” Roberta shared, “I was a junior in bio-chemistry and I didn’t want to add three years to be a seven year college student.” Reagan included, “I was a transfer student and if I done the clinical pathway, I would’ve had to be here for an extra year.”

Others found the traditional path to be a good choice for a variety of reasons. Ruth said, “I was originally in the clinical pathway and switched due to issues with student teaching.” Rae shared, “I would probably stick with the traditional again but feel like I would get more time in the classroom with the clinical pathway.” Reese included her thought by stating, “I would probably still choose traditional just because of the flexibility, but I do think a pro to clinical path is more time in the classroom.” Ryn added, “The traditional path is more flexible with your schedule if you work or you have children. If you’re a non-traditional student, then it’s easier.” Rosanne shared, “I feel like because I’ve gotten to choose which classes I needed along the way and what best fits my schedule, my stress level is lower than it would’ve been if somebody had forced me into classes that I had to do at that particular time. I would have had to rearrange everything
else in my life. I feel like with the traditional pathway, I was able to choose what I needed to do to keep everything else in my life balanced.” Randi agreed, saying, “I didn’t have a lot of problems, or it wasn’t an inconvenience to me. I kind of enjoyed the traditional pathway.”

Some traditional teacher candidates recognized a struggle for scheduling ease and future preparedness. In the end, these teacher candidates are trading early stress for later lack of preparedness. Rachelle mentioned, “I feel like the busy worker and student that I am, I’d stick with the easier route which seems like traditional, even though it wasn’t easy at all. Part of me thinks it would save me stress down the road if I had chosen clinical because I would have felt way more prepared. Like, my first year of teaching when I have to prepare all these lessons or when I come to social studies and math, they wouldn’t be my first time doing those lessons. If I had to argue why traditional was better than clinical, I don’t have anything to say.”

Some other traditional teacher candidates expressed interest in the clinical pathway. Rena shared, “I would probably consider the clinical path because I’m more of a hands-on learner and education is more important than any outside activities.” Ruth included her experience with both programs and added her reasoning for each program. Ruth stated, “I have done both and this is my only semester in traditional. If I knew clinical was going to be so inflexible with the student teaching I probably wouldn’t have chosen it. I did think clinical was better in the sense that you get so much more time in the classroom. You have a lot more time with the students and learning how to teach them. Clinical is very high demand, really high demand compared to traditional, I believe.” Roberta shared her thoughts on the two programs. Roberta said, “I would tell
my friends to go to the clinical pathway so they get more time in the classroom and are more prepared.”

**Clinical Preparedness to Student Teach**

**University faculty.** Naturally, after asking these experienced participants questions related to lesson planning, implementation, and reflection, it seems only logical to gather perceptions of readiness to student teach. Therefore, faculty members provided reasoning for what they are seeing related to the two pathways to teacher education. Leslie first shared, “I’m right in the middle of giving feedback to clinical students, and grading unit plans and some lessons. By far, the majority of these students are writing excellent lesson plans. There are a few weak students, but most of them are doing a top-notch job. They’ve built in rationale for why they’re making certain classroom management decisions ahead of time. I see them, with a few exceptions, these kids, they’ve got it nailed. They are ready to student teach.” Lana let Leslie finish her thought, and then contributed to the discussion with the traditional pathway in mind. She began with, “Well, when I taught traditional, I don’t think it was at the level of the clinical students, but I still think they came out prepared. I think because they are in class so much and we talk about lesson planning, they kind of pick up on what lesson planning is over the clinical group at times. Even though they are ready to student teach, I feel like at the beginning of the semester, my clinical need extra discussion over the elements of a lesson plan and the components of lesson planning, what that looks like. And so I do think that sometimes the traditional pathway students have good lesson planning because we were able to really teach that in the coursework. Whereas in the clinical, they’re expected to learn it on their own a little bit quicker, and then we can talk about it in class.
But I think both come pretty equally prepared for lesson planning because our instructors want that for them.” The conversation provided insight into how both pathways teach lesson planning, including strengths of each. 

After listening to the lesson planning comparison discussion, Lora brought up the topic of confidence. Lora shared, “I would say my clinical students are much more confident about their ability to teach. I had one say, ‘We talked about classroom management. I thought I had it until I had to do it. Now I get it and I’m thinking about it in a whole different way.’ My traditional students had two twenty minute opportunities to deliver a lesson and one of my students didn’t have a great experience either time and so he walked away really not knowing what to do, where my clinical students are placed there all day long. They’re with a teacher who’s coaching them, who’s observing them, in addition to us, somebody who’s actually watching them and giving feedback. They are more grounded in the ability to teach beyond the planning, preparation, and content. Just the actual delivery of the lesson; what’s where I see a difference.”

University faculty were able to describe a sense of professionalism and purpose to the clinical pathway in regards to job placement. Lora continued to share, “The other big difference I see is that starting at the junior level, they are on a job interview. They are getting to know the teachers and the principals on a very collegial level. My traditional students don’t get that opportunity to build those relationships until their senior year and only in one place. They’re just doing observations, but that’s not the same kind of relationship that my juniors are building in multiple locations, with multiple teachers, and principals. I think that’s going to make a difference.” Leslie and Lana echoed thoughts of the same caliber. Both mentioning “the clinical model is a better preparation tool
appropriate for our students just because there’s some ground with those kids.” Leslie continued by adding, “You can’t replace those kinds of experiences by watching videos and discussing in class. There is no doubt in my mind that I would prefer those students that have had that clinical experience. They have an edge up on the traditional students.”

Another aspect of the clinical pathway revealed through focus group conversations revolved around the concept of attrition. Teacher candidates in the clinical pathway have such extensive experiences through coursework and field placements that some teacher candidates realize the career path is not as fitting as they once thought. Sam elaborated on the concept, “Oh my gosh! Clinical teacher candidates come out so prepared or else they realize they don’t want to do this. They may have to drop, which is a good thing; It’s not a bad thing. It might be a great thing or they might realize they don’t like those little kids but really like fifth grade. They get it all. They get the full spectrum.” Sadie elaborated by including, “We’ve had a lot of people who do the clinical and then realize this isn’t what they want and if they were in the traditional pathway, they probably wouldn’t recognize that. So now, they are only juniors and they’re able to go pick a different path, whether that is a different grade level or a different career in general. It’s been really helpful to them.”

Regardless of specific benefits discussed in relation to the clinical pathway, university faculty went on to discuss holistic benefits to the clinical pathway. Sarah’s comment supported this discussion piece, “I love the fact that clinical teacher candidates are in the classroom more often than ever before and are able to be in the actual classroom they will be student teaching in prior to the student teaching semester. I believe the clinical teacher candidates are better prepared to student teach because they
have so many hours in the classroom. They have opportunities to observe many different styles and types of teachers and have had the experience to implement many lessons prior to student teaching.” Lana contributed to the conversation further by agreeing with Leslie, Sarah, and Lora, but also including, “The clinical just get more opportunities to become confident. The traditional don’t always become confident until the very end of the semester and that’s make-it or break-it time. They have to develop a relationship with one teacher and maintain that because that’s who you’re with for sixteen weeks out of the semester. And then, that’s not necessarily the person they will student teach with either, so then they’re getting to know somebody else. Where with the clinical pathway, they’re in three placements and learning three different teaching styles, and they’re learning. I just think that type of learning can’t be replaced.” Elaine, a traditional faculty member echoed the voice of concern for her traditional students by saying, “Clinical gets more time out with the students and that refines anyone’s strategies, techniques, and skills.”

As the focus group discussion regarding clinical pathway preparedness slowed, some faculty members started reflecting on the traditional pathway. Elaine, “I think we are lacking in just getting the PDS out for half a day, one day a week. I would like to see that extended because I think the more you’re there, you refine your skills more.” Also concerned with differences in preparation was Elizabeth, who voiced, “I’ve heard the traditional students say they wished they were in the classroom more. They want to be there the full day. There’s nothing like experience to really move you forward. You can read about it. You can talk about it. You can reflect on it. But, until you’re actually there in the classroom doing it, you don’t really understand.”
To further justify the agreement that clinical are more prepared to student teach, Sam included, “I think the teacher candidates feel like they are ready. They kind of see themselves as a student teacher.” With this thought, Sadie identified confidence through a conversation she recently had with a clinical teacher candidate. Sadie shared, “I had a student come to me today and tell me that at the beginning of this there was a lot of work, but now she feels really ready. She mentioned that she has so much in her toolbox and has that foundation where if she had not been in the classroom at the junior level, she wouldn’t have felt that way.” Sam understood this perspective since a student recently approached her saying, “I’m actually really sad that we’re done because you’re with the same people all the time and even the person I was in the classroom with I got close to. It’s kind of like a family.”

After bringing up the subject of multiple placements and experiences, Leslie and Lora included benefits to this aspect of the clinical pathway. Leslie first added, “Because they’ve had experiences in multiple districts, with multiple grade levels, and multiple teachers, the students are really starting to learn about themselves through the process. They are learning what kind of teacher they want to be, what grade level they want to work with, and what type of setting they want to be in. I think that’s built in even another layer of reflection for them beyond what they’re doing with students. They’re reflecting about themselves personally as they’re growing as a teacher.” Lana finished the conversation by sharing, “I’ve noticed that the principals really know the clinical students which, again, doesn’t happen so much in the traditional pathway. The principals really know these teachers, these candidates’ skillsets to know where to place them when it comes time to student teach.”
**Principals.** Many principals from local school districts agreed with Lana’s comment about principals really knowing the clinical teacher candidates. Jake shared, “When they’re in the clinical pathway they have the opportunity to be in so many other places besides just coming for those few hours to the classroom. They are on an interview with us from the moment they step in the door. The interview is happening in those collaborative opportunities as well. The clinical students just have an opportunity for a better interview, honestly, because of all the chances they have to get more involved and build relationships in the schools.” Principals also supported university faculty recommendations that clinical teacher candidates are prepared to student teach. Julie mentioned, “Their foundational skills are a little bit better when they come in as clinical, rather than PDS. We also see that the rapport with the staff gains after building confidence and building that time between those days as they go to different teachers.” Eric was able to support the thought with the following, “Clinical block teacher candidates are co-operators from the first day they walk in the door. They learn systems and routines from day one.” Interesting to add to the conversation was a thought from Jake. He included, “I think with the clinical, the relationship is probably a little bit stronger. I’m thinking in terms of our staff and how much they learn and grow and get better because of the teacher candidates they have. Maybe it’s a little selfish on my part, but I think in general it’s probably a deeper experience for our staff members when they are with clinical students."

Through the focus group with principals, Julie brought up a valid concern related to preparation to student teach and a difference between the two pathways. She began with, “We had a clinical teacher candidate that was not ready to student teach, but the
university worked really well to have those conversations. We prepped that candidate often at the building. The instructors prepped the student often through the university. The candidate chose not to do student teaching the following year. They knew they needed more time to get prepared. It was nice to have the open dialogue and not force the student into a situation where they would not be successful. I think if the student was in PDS, they wouldn’t have had the same opportunity for growth. Being in clinical, it gave them a better opportunity to have more time with different teachers, and they all gathered the same information.” After listening to the situation, Jenna agreed with what Julie said by adding, “I think with a PDS student, the administration maybe wouldn’t have noticed the concern. It would have been one hundred percent on the university professors to notice that. When they see the students in the classroom, they may or may not have noticed that. I think that the fact that it was a clinical situation, the chance of us knowing that beforehand probably was helpful.”

One focus group including principals from a local school district shared contradictory content related to the preparation of the clinical teacher candidates. Some even suggested it’s the quality of the candidate, not the program that makes the difference in preparation. The principals in the group found clinical and traditional teacher candidates to be fairly well prepared, with the clinical group of candidates to be slightly less prepared. Tess shared, “You know, I think that they’re both fairly well prepared. I would say our PDS students are probably stronger candidates than our clinical candidates this year. I think that could vary from year to year based upon which route the student chooses to take. I don’t think it’s a result of the program, just the quality of the students that went that route this year.” Tami concurred and added, “It’s what is passionate in that
person. The bottom line is what they want to get out of the experience and how much they are willing to give back because they can learn so much during this time even though they are overwhelmed because they are learning so much. It’s how you take that in and what you want to do with it.” Truman supported these comments by adding, “I think we’re seeing good PDS students and good clinical students that are prepared to tackle that first step of what teaching really is. They have an idea of what it is, but they don’t know what it is yet.”

This same group continued to share thoughts related to the preparation of the clinical teacher candidates through prior expectations and faculty support. Tim shared, “I don’t see a difference in the preparation of either pathway. This was our first year for clinical and maybe my expectations were higher than what they actually could do, but I had this expectation that they would probably be stronger candidates, but I just don’t see that once they’re in the building. I think that they’ve gotten the same backgrounds. The biggest difference I see is the level of supervision from the college between the two programs.” Tess eagerly agreed and then added, “I did notice that difference. It was kind of on my radar. In those first couple of years with the clinical we were in discussion constantly. It was almost as if they were a part of the staff. And then this year it seems very different.” Tami then asked, “When does she come around though? What was her name, I forgot her name.” After some discussion over this difference in pathways, Tess added, “I’m not saying that she’s not doing her job. It’s just that the traditional faculty and I have had so many discussions and maybe it’s because of the type of program or the level that the clinical kids are in that there’s not as much supervision.” The conversation then seemed to take a turn back to preparation. Tami mentioned, “But is preparation
necessarily a result of the UCM instructor not being able to be here? Not really. To me it goes back to who that person is and their level in their preparation.” Tess also commented, “From what I see and the feedback that I get from teachers, where we see the difference is not the pathway but the individual and what the individual’s strengths are and what the individual’s needs are.”

**Cooperating teachers.** Some of the cooperating teachers shared a similar focus with principals who described preparation as being based upon the student rather than pathway. Maggie stated, “I feel like the clinical is molding more effectively, but it could also be the people that we’ve had with that experience too.” Ashley and Alex shared similar ideas related to clinical molding. Ashley shared, “I think it’s probably student by student, case by case. I think clinical students become professionals sooner than PDS students. I think they are ready to go sooner.” Alex added, “I feel more comfortable with them taking over.” Michelle concurred by including, “Yes, I think probably the clinical pathway draws a different type of person that is more willing to be open to new things. There’s a willingness to try something new. That is a characteristic of a good teacher; it’s trying and being willing to try something new and go out on a limb. It’s the risk-taking.”

When determining readiness to student teach, cooperating teachers were asked to provide their thoughts. Jessica shared, “I felt like having them in my classroom for two days a week during the semester helped with their confidence and when they came back for student teaching, they were ready to go. They already knew my routines.” Tara shared a similar thought process by suggesting, “I had a clinical student last semester and now I get one back, so I think she is already aware of what’s going on in my classroom. She was there for five weeks, so she’s ready for when we come in day one in January because
she already knows our routine. She’s already used to what’s going on, so I think she’s ready to go in full force as soon as she gets here instead of not having any idea.” Alex agreed with this by including, “I think that they are ready to go because they’ve been with us and had that experience. When they come in on day one, I can start them out with the lessons.” Erin and Ashley both noticed stronger relationships with clinical teacher candidates. Erin mentioned, “With this program I’m assured to get someone that has already been in my classroom and already has a connection with my students, so that’s the best part of it to me.” Ashley agreed by adding, “There’s a better chance of getting somebody that fits your personality.” Ann included, “They’re in the classroom more. They spend all day with you a couple of days a week and they have a little more of an idea of the routine and what’s going on than when the traditional students were here for a couple of hours at a time.” Andrea included, “In the clinical they can pick up faster when they’re watching us all day long because they see us doing it.”

Many of the cooperating teachers focused on the ability to manage the classroom. Megan included, “They have all been really good, or maybe I have just been really lucky that each student who has come through has had great classroom management. They have been able to manage small groups and put small fires out. They are able to see the big picture in the classroom and also the small picture for each child. They see how they can help the children. They seem to have a better understanding of what it takes to be a good teacher. They understand more than just getting a toe wet. They get to jump right in. They have a better understanding because they have had more experience in the classroom. They are in the classroom more and also the make-up of their block supports learning that’s a whole piece, an entity. Because learning is set up in blocks, they see that
learning is connected to each other.” June also mentioned, “I definitely see the positives in the clinical. Anytime candidates have more exposure to the classroom, the preparation will be richer.” Mindy included, “The clinical is this new concept of, well not 100% real world, but there is more observation time and hands-on time. They are seeing it in action, they are doing it in action and then we can discuss it. It’s just a constant cycle. They are more prepared that way. It’s just better, you can see it.”

Several cooperating teachers shared thoughts comparing the two pathways. Some cooperating teachers mentioned a shyness, or lack of confidence in the traditional teacher candidates. Others said the two pathways equally prepare teacher candidates, with some benefits to the clinical pathway. Trish included, “I think they’re a little more confident in what they’re doing. They have a better understanding of what they’re going to be doing.” Joyce mentioned, “I think the two pathways equally prepare them to student teach, but I also think the clinical gives them a leg up. The clinical students are more prepared sooner and seem more confident in helping our children. They are eager to learn and are not afraid to make a mistake.” Tracy added, “They’re not as shy. They’re ready to get in there and help the kids. They want to get involved. They’re not wanting to sit and observe anymore.” Maggie shared, “I think in the clinical pathway, they’ve been in the classroom doing more intensified work at an earlier stage and by the time they get to that late clinical phase, which is about the same time as the PDS semester for traditional candidates, there was a big difference. Some PDS candidates are not ready to be in the classroom. I feel like they weren’t necessarily taking the initiative but clinical students I’ve seen are ready to jump in, eager and excited. They have questions along the way, but they are the right type of questions. It’s not, “How do you do this?” They have a lot of
content knowledge and pedagogy to back it up and I think that makes a difference. There seems to be more support along the way to help figure out weaknesses in order to help build upon and strengthen those areas and if they do have weaknesses, it seems like they have that opportunity to strengthen them earlier instead of it becoming a bigger issue.” Michelle added, “I think the clinical pathway spends more time molding a person that may not be able to walk into a classroom and know what they’re doing automatically.”

Melissa stated, “I only want the clinical students in my room anymore because I know that they have the willingness; I know they have the drive. I can work with them and not work for them because they have the drive to push further.” Michelle added, “If it was presented to me that I could either have a clinical or a traditional student, and I had nothing telling me the backgrounds of anything, then I would definitely choose clinical.” Maggie agreed and included, “If there was an option to change the traditional program and PDS, to me it would be better. I know you can’t just change everything and just be all clinical.” Megan supported this thought by sharing, “After I had my first clinical student, I said I’m never going back. I’m never going to have another traditional PDS or student teacher again because there is no comparing it. There is absolutely no comparing a traditional teacher candidate to a clinical teacher candidate. If I’m going to have a student in my classroom where I am going to spend as much of my time as I can preparing them, I want to make sure it’s the best person I can have for the job and it’s a clinical pathway student. It’s not like I had poor experiences with my traditional students; they were good and they were good compared to each other. But then when I had my first clinical teacher and then had her through student teaching, she was light-years ahead of the other ones.”
One group of cooperating teachers shared a different perspective in relation to clinical preparation. These teachers found traditional teacher candidates to be more prepared than the clinical. Trudy explained, “Both my clinical people were not really go-getters. They didn’t jump in there and help with stuff. I kept telling them to jump in there and if they see someone with a problem, help them. I kept telling them to do that but they never really picked up on that.” Tessa agreed with observation and added, “My clinical students didn’t want to do things around the room.” Tara joined the conversation by including, “I was surprised with my clinical girl. I had her in the beginning and she had never written on chart paper. I asked her to write on the chart and she said she had never done that before.”

The clinical pathway to teacher education lends itself to multiple experiences in the field, with opportunities for learning in non-traditional formats. Instructors teaching in the clinical pathway have provided their perspectives related to student teaching preparation and have expressed confidence in the teacher candidates’ ability to enter student teaching feeling prepared for the task. Additionally, principals and cooperating teachers with experience in the clinical pathway have also provided their perceptions of preparation to student teach through the clinical path.

Clinical pathway teacher candidates. With all the different perspectives in mind, clinical teacher candidates were also asked to share their own feelings of preparedness to student teach. These teacher candidates have just completed their first semester of the senior year. The teacher candidates sharing their perspectives will student teach in the subsequent semester. Many of the clinical pathway teacher candidates in focus group sessions shared overwhelming satisfaction in relation to preparedness to
student teach. These teacher candidates shared personal experiences related to the clinical pathway and their feelings for the program, attributing their confidence to the clinical pathway.

Cameron first shared, “I think I’m so prepared because of the hours in the classroom. Honestly, I don’t know how others manage to do it with so few hours. I think we have hundreds, literally hundreds of hours behind us now, and I think that’s been vitally important because we know what to expect, and so we’re not completely thrown the first time something happens.” Krista included, “I don’t think I could even do student teaching without the clinical pathway program.”

Kristen stated, “I’m so prepared because the clinical is the best way to get the most experience, hands-on, out in the field, experience. However, you have to be prepared to give a lot of time and a lot of work toward it, but it is definitely worth it in the end, especially leading up to student teaching and the experience you get prior to jumping in a classroom with students.” Kelli contributed by adding, “We’re a lot more prepared for student teaching. Talking to people in the traditional pathway, a lot of them say they wish they had chosen clinical because of the experience, even with the MoPTA and everything. We’re a lot more prepared for that part of student teaching too.” Kim added, “I feel that clinical students have gotten to see all ranges of the classroom. I know traditional go in, teach a lesson, and then leave. We’ve got to use our classroom management skills and develop stronger techniques and strategies.”

Not only did clinical teacher candidates share benefits related to classroom experience, but several added how lesson planning and implementation experience aided in their confidence. Kali included, “I just feel like the experience really helped me,
implementing lessons from courses has really helped me just to build my lessons. I’m not as worried about that as I would be if I hadn’t had experience in the past.” Kelli elaborated, “Really, every teacher has taught us a different style of lesson plan, so that has helped too.” Kim was able to contribute to the conversation by adding, “I feel like we’re more confident to go into a classroom and get down to work, get our hands dirty, and help the students. We’re not as timid or scared and we’re really strong with our classroom management. Throughout this semester we learned how to handle a classroom and how to get the students’ attention and bring them back to lessons.”

Clinical pathway teacher candidates have found they are prepared for student teaching due to many aspects of the program and course delivery and shared their experiences related to teaching and learning. Carisa mentioned, “We have had so much time in the field. I know I’ve had three blocks in the field. I think just being able to be in a classroom before student teaching has prepared me a lot more because I feel like we have a good understanding of what we’ll expect.” Chloe shared a similar thought related to experience. Chloe said, “I think being able to see a different variety of grade levels and school districts is incredible. I know some people who are in the either the traditional or at other universities and they only get to see one school district and one grade before they student teach and that’s it. Then, they have this mindset of, ‘Oh, that’s what grade I like’ but in reality, there are so many different grades and so many different school districts.” Kelli added, “Having that different grade level experience helped with kind of seeing what your strong grade level might be, or not strong grade. Also, just seeing different districts and getting to know different teachers and their styles inside and outside the classroom.” Krista described a similar experience, “You’re exposed to such a variety of
grade levels and districts and different types of teachers that you can really kind of figure out where you want to be and what grade works best for you.” Caroline shared further by including, “It also helps you figure out what kind of teacher you want to be by being able to observe and work with numerous teachers in just a few years time.”

Many teacher candidates suggested preparation in relation to school relationships. Cameron said, “The whole structure of the program helps me feel like a peer with the rest of the teachers in my grade level, and they welcome me as such too. It’s been a major help, to feel like a teacher and it gives me the confidence to go forward.” Kari added, “I would definitely agree that this program just gives you confidence. I feel like the teachers in the building with you know that you have those hours behind you and they respect you for that.” Kylie shared, “One thing I really like is that I already know my kids and my teacher. So whenever some of my friends that go to other colleges are freaking out because they don’t know their teacher yet, and they are having a panic attack, I already know my teacher and already know I work really well with her and I already know some different things. That also helps for the MoPTA because I’ve already had these kids for five weeks and after this semester, it will be seven. That’s just a really nice feeling getting to know that you already know your teacher and you already know your kids.” Krista reiterated this thought with, “We’ve worked with the teacher we will be student teaching with and we’re not going in without having any idea of how they teach.”

Another benefit clinical teacher candidates described was the ease and familiarity with MoPTA. Some teacher candidates discovered through conversations with peers, that not all teacher candidates were prepared to begin completing MoPTA tasks. Katie shared further by adding, “It’s really good that we have the experience that we do know our
student teacher placements because we can start working on MoPTA task one immediately. We can start working on that over Christmas break and then we won’t have to worry about it in January or February whenever that task is due. We can just move forward; it’s not so daunting now.” Kristen elaborated further by adding, “I think the experience has kept us from jumping into a classroom where we don’t know the students, we don’t know the teachers, and we have really never been in front of the class for more than a couple of hours. We go in knowing where we are, who we’re with, and having a lot of experience teaching lessons, learning from them, and managing the classroom.”

After sharing experiences specific to the clinical pathway, teacher candidates overwhelmingly mentioned that even though it was hard work, they would have chosen this pathway to teacher education again. Carin expressed, “I would definitely choose this pathway again because I don’t think I’d be where I’m at and be as confident in my career choice if I had not chosen this path. It’s given me so much experience and growth, and life-long friends because we’ve been together the last two years.” Kasey was able to share, “One thing that the clinical pathway has done for me is know we can go to any one of our classmates and they’ll help us. They won’t judge us for asking a question, they’ll do anything that they can to help us and see us succeed as much as we would do for them.” Carisa included, “I have friends in the traditional pathway who don’t know anybody in their class; they just go to class every day. When they hear me talk about how I am constantly talking to people in my class or hanging out with them or seeing that I can rely on them to give me advice. My friends in the traditional pathway think it’s crazy because they don’t have that. I can’t imagine not having that.” Candace added, “I feel like we’ve become a family, not only with our teachers, but our fellow classmates.”
In addition to the friendships that have developed between classmates, many of the candidates shared similar discussions in relation to the instructors in the pathway. Chloe said, “I think being in clinical, our professors almost take on the role as like our second mom. They’re literally there for us for everything, whether it be school-wise or not. I mean, in life they are just there for you. I think even next semester in student teaching and even in our careers as teacher they will continue to be there for us.” Cami agreed by adding, “My grandma passed away earlier this year and it was really, really hard for me. The professors went above and beyond, especially two of them, to make sure I was okay as a person, not just as a student. It was just really good. They were amazing.”

Although the clinical program was viewed as more difficult for transfer or non-traditional students by some instructors in different focus groups, some teacher candidates identified themselves with these criteria and described what they have gained from the clinical pathway. Katie shared, “I would definitely choose this program again. Before I came to this program, I wasn’t the hardest worker. It was a struggle for me to earn my associate’s degree, and yes, I’m a transfer student. I’m actually non-traditional as well. I’m older than a lot of my classmates. But, this pathway made me realize that there is stuff that you’re going to do and you’re not going to like it. I didn’t like writing a fifteen-page paper three times. I don’t enjoy that, but I do see the merit in it. I did learn a lot from it. Definitely being in the classroom has just boosted my confidence and I am not scared to go in that classroom in January and be with those kids.” Kim said, “I would do it all over again with the tears that came along with it because it is stressful and there are times when you question why you are even doing this. But then, you go into the
classroom and you know these experiences are why you want to be a teacher and why you keep doing what you are doing.”

Regardless of specific aspects of the program that prepared these teacher candidates, many of those participating in focus groups shared experiences related to overall feelings of preparation. Cameron shared, “You are in the classroom so much sooner and have so much more experience and so many more hours behind you that when it is time to student teach, it’s not a big deal. I’m ready for it. I feel prepared.” Carin said, “I feel like all of the experience that we get helped me grow as a teacher and has made me feel more passionate about what I’m doing and more confident in myself about teaching. The clinical pathway has prepared me a lot more for student teaching because it’s given me more confidence.” Cami added, “I’m a very hands-on learner, so I don’t think I could be learning the stuff that we’ve experienced in the classroom from a textbook. I just don’t think I would be able to latch onto that and really take in..” Kylie included, “I would definitely choose this pathway again. There is no question about it. Anytime that anybody that is choosing between clinical and traditional, I told them that it’s not an option, ‘You have to go clinical’ because I think that I would’ve gotten down a lot more because I wouldn’t have seen all of the hard work that I’m putting in and I wouldn’t have seen it in the kids. I wouldn’t have been able to see how my lesson plans would be implemented. Like, ‘Oh, wow! Look at this really hard lesson that I worked on and then you don’t even get to teach it.’ I think that would’ve gotten me down a little bit and this is just like what everybody said, it boosts your confidence and it’s been a wonderful experience.” Coryn added, “I would definitely choose this pathway again because it builds your confidence. The professors are really there for you. They give you
awesome feedback. I know people in traditional say that they don’t want to do clinical because it’s a lot of work, but it’s worth it. It actually works you, helps you, makes you more confident in the classroom and actually makes you ready to teach.”

Summary of the Results of the Qualitative Analysis

Qualitative results derived through focus groups with university faculty, principals, cooperating teachers, and teacher candidates revealed varied experiences between the traditional and clinical teacher candidates. Discussions revolved around the experiences available to teacher candidates in each pathway. Traditional teacher candidates are not afforded the same authentic experiences in the school setting, and therefore concentrate on planning for later teaching. Clinical pathway coursework is heavily embedded in field experience, allowing for authentic teaching experiences, but sacrificing detailed instruction in lesson planning.

University faculty, most principals, many cooperating teachers, and several teacher candidates described a lack of preparation for student teaching in regard to the traditional pathway teacher candidates. Overall, a lack of time in the field and limited early experiences with children put these teacher candidates at a disadvantage for the PDS semester, prior to student teaching. Many faculty members found PDS students behind their peers prior to the PDS semester of coursework. Throughout the PDS semester, traditional teacher candidates began to catch-up in regards to authentic experiences in field placements. These same faculty members discussed the ability for traditional teacher candidates to reach the quality of clinical teacher candidates by the student teaching semester. The lack of early field experiences is what led many cooperating teachers to notice a lack of preparation.
Some university faculty, principals, cooperating teachers, and teacher candidates shared opinions opposite to their peers. These unique perspectives focused on self-driven teacher candidates with confidence to enter student teaching equal to clinical teacher candidates. The perspectives supporting equivalent preparation were limited to particular placements and within specific course sections.

Themes

Through data collection and analysis, five consistent themes emerged among university faculty, principals, cooperating teachers, and teacher candidates enrolled in the traditional and clinical pathways at UCM. Data gathered and analyzed provided consistent patterns in relation to comments and experiences with the traditional and clinical pathways. As these themes emerged throughout the results section of the qualitative findings, it became apparent how each is integral to the others. The five themes are: time, lesson planning and implementation, relationships, intervention, and confidence.

Themes developed across participant types, appearing throughout findings, regardless of pathway or of participant affiliation. All participants invited to focus group sessions and contributing to the research study had previous experiences with these two pathways and were able to provide insight into the preparedness of teacher candidates prior to student teaching.

Time

Time was a word used repeatedly throughout the results. The word was mentioned in regards to field experience and authentic experiences with children, ability to collaborate, and through the lesson planning process including reflection. Time
became the word binding readiness and confidence in teacher candidates. Time, from the perspectives of these participants, could be a positive attribute to a program or hindrance to a teacher candidate’s success.

**Field experience and experiences with children.** A lack of time in the traditional pathway has caused a lack of confidence prior to student teaching. Elizabeth found, “I’ve had students in the past who perform really well in the classroom, and they write really well and they participate. But then, when they get out into the field they really are lacking in some people skills, social skills, and pedagogical skills.” Emily included, “We have some students who have not ever been in front of live kids. They’ve only done role-playing, and this is their first semester of their senior year. That needs to be changed dramatically if we’re to continue to have a traditional pathway.” Elaine shared, “My PDS students will say, this is their first time. So, this is truly their first time working with children.” Ella then included, “When I take them out, I put them in groups so that they have support with each other, but there are a number of them that are just a basket case the first time they go out there because they have to face real children.” Leslie shared, “It’s that opportunity to implement in the field. They don’t have as much time out in the field to transfer what they’re learning, and practice it.”

Lora shared a similar comment focused on junior level coursework, “At the junior level, I absolutely see a difference in learning. It’s not the standards. Up until this semester, there has been no application of learning in the field at the junior level. And even now, the application is very, very limited. They’re meeting standards, but they’re not applying the learning. They are only doing what they have to do to prepare for the learning.” Elizabeth voiced, “I’ve heard the traditional students say they wished they
were in the classroom more. They want to be there the full day. There’s nothing like experience to really move you forward. You can read about it. You can talk about it. You can reflect on it. But, until you’re actually there in the classroom doing it, you don’t really understand.” Elaine vocalized, “Traditional pathway means to me, PDS that started over ten years ago when I was in the public schools. It also now means to me they don’t get enough time in the field.” A lack of time in the field hinders teacher candidates from valuable learning experiences.

Time allowed for, or discouraged, differentiation and assessment strategies. Megan stated, “I think there is this big difference between the traditional and clinical students because there is a big difference in time they get to spend with students. I can tell clinical students in my room have had more time with students. I think that comes from experience. They are more comfortable, they have had time to work with students one-on-one, work with them in a group, and also work with them as a class. When you have had a lot of time working with the students, you are able to see those things a lot quicker. I think a lot of it is the level of time they are with the kids and practicing with the students. I also think it’s the time they are with the cooperating teacher. The more time you spend in the classroom during the day the more you are able to see and take in.” Carisa, a clinical teacher candidate, mentioned, “We have had so much time in the field. I know I’ve had three blocks in the field. I think just being able to be in a classroom before student teaching has prepared me a lot more because I feel like we have a good understanding of what we’ll expect.”

Traditional teacher candidates also shared this theme of time in relation to field experiences. Many described a concern related to time interacting and engaging with
children in the classroom. Rian commented, “I wish sometimes we were able to be in a school for a full day and not a half day. After coming from the clinical pathway where it was a full day, you just see so much more, experience so much more of the classroom, and get to know your students better, rather than when I’m in the traditional pathway now. It’s just a half day. You are there for a couple of hours and then you’re gone.” Ruby, a teacher candidate, shared, “You can write a detailed lesson plan, but if the classroom management isn’t good in that class, then you’re not going to get anything done. You’re wasting your time writing the lesson plan so detailed if you don’t understand how the flow of the class goes.” Rylee said, “For the assignments that we have to do, we need to spend way more than three hours to actually do what they’re wanting us to do.” Ruth shared, “I believe it’s hard to know exactly what the students need to know or what to teach them when you don’t get that much time in the classroom. You’re only there one day. I feel like you don’t really get to know the students as well, so you don’t know what they need to learn. How do you teach a concept to a student if you don’t know if they really know it or if they need a lot of help with it? They might find it so easy that they just breeze through.”

Time, or lack there of, has been found to be integral in the learning process for teacher candidates in both pathways. Teacher candidates in the traditional pathway have recognized a barrier to making connections with students, assessing benchmark goals, and developing a rapport with the children in the classroom due to a lack of time in the classroom. These same teacher candidates have indicated a struggle with understanding the role of classroom management and the ability to differentiate instruction.
teacher candidates have been viewed by cooperating teachers and principals as more confident and eager to step into the classroom with ease due to extensive time in the field.

**Collaboration.** Time affected collaboration and reflection in the field. Alex included thoughts on clinical teacher candidates, “Since they’re with us all day long, they’re also there during our plan times, so we have that chance to visit and talk about our planning and their planning. We get them here early before school even starts and they’re here until the busses leave, so we have time afterwards. So, not only do we have the plan time, we have the time before school, the time after school, and we eat lunch together. There’s just so much more time for us to talk and plan and collaborate.” Tessa shared in relation to clinical candidates, “I think they saw the transition from day to day, from lesson to lesson, and the carry over from day to day.” Erin said, “With them coming in on work days or in-service days, before school even started, they were so excited to help me put up literacy boards and get things in place before the kids show up. They wanted to come early, they wanted to stay late, they were anxious and excited about getting to do all that and they wouldn’t have been able to in PDS.” Andrea included, “They are very willing to stay after school or come before school, or help me with whatever I wanted. They were willing to stay because they wanted to see what I was doing, they wanted to help do it, whereas the PDS way, they never would have had that option or choice.”

Through reflection on time and collaboration, it becomes apparent how time can affect the collaborative relationship between cooperating teachers and teacher candidates. In fact, some principals also described stronger connections with teacher candidates through district and school collaboration meetings. PDS teacher candidates are not able to arrive to the school early, or stay later due to the limited time in the field. These teacher
candidates are not able to visit with the cooperating teacher over lunch, or assist and engage in grade level collaboration. Clinical teacher candidates are at an advantage when it comes to future job placement due to the stronger collaborative relationship they have had the opportunity to form through undergraduate work.

Lesson planning process. Lora described a lack of time in relation to where to focus instruction through this comment, “My traditional class is doing much more lesson planning than my clinical pathway because there’s less application opportunity. Therefore, there’s more of an emphasis on planning.” Melissa, a cooperating teacher, shared, “With the PDS students, usually I did the lesson planning, they would come in and assist. I felt like it was my job to get them in there and even give them an idea for their lesson. They would more assist than actually do the teaching. We just don’t see them after school, before school, or during plan time.” Rachelle, a traditional teacher candidate, included, “There just wasn’t enough time in PDS. I feel like my PDS teacher this semester expected us to teach in thirty minutes what they’ll cover in an entire week in a kindergarten classroom. The lessons just take a lot of time and you can’t crunch it all in thirty minutes and expect the students to learn what you want them to. That’s kind of what we’re expected to do in PDS just so we can get evaluated. Our instructors would say, ‘That’s not reality. You usually have a week to cover what we have to cover in thirty minutes.’ Rylee added further, “I’m least confident with using our assessment to evaluate what we need to teach them, or re-teach them, because we teach a lesson and then that’s it. We don’t get the chance to go back the next day and say, ‘Okay, you guys didn’t get this, so let’s go over this.’ The next time we teach a lesson again is a month later.”
The reality of the traditional pathway is evident through the theme of time. Traditional teacher candidates are provided extensive classroom instruction over the construction of a lesson plan. However, these same teacher candidates are not provided sufficient time in the field to observe and collaborate with cooperating teachers on how to construct daily lesson plans, how to differentiate instruction, how to pace lessons, or how to evaluate teaching through assessments. Without time in the field, a strong, well-written lesson plan is not beneficial to the teacher candidate embarking on student teaching.

Lesson planning and implementation

The lesson plan process and implementation became an intertwined theme, showcasing strengths and weaknesses, and encompassing confidence in teaching. The theme is presented from the perspectives of different participants due to experiences and interactions with teacher candidates. University faculty all described the lesson planning process from different perspectives, concluding that although traditional teacher candidates have more experience writing lesson plans, clinical teacher candidates quickly catch on through implementation.

Lesson planning. University faculty discussed the lesson plan process similarly, and it was not until implementation that differences began to arise. Sadie described the clinical process, “Well, for us they gather information in the field where the students are, and so then they are guided to do the first lesson based on decoding, and then the second lesson based on comprehension. So, based on where their students are, they write their lessons accordingly. And then, we do peer-review, so they have an opportunity to read others and then talk about it. We do that a couple of times, plus my feedback.” Emily provided an overview of the traditional pathway lesson planning process. Emily said,
“We look at the lesson plan and think about classroom management first. We are thinking about how we’re going to distribute materials, how we’re going to transition the children, and how we’re going to focus them again, those kinds of things. Then we look at our objectives and plan a lesson in the workshop model, so it’s kind of an I do, we do, you do plan. Then they practice one lesson in the classroom with their peers, and develop one a week before they actually teach it to children.”

When discussing the graduation from lesson planning to lesson implementation, some participants have shared differences between the teacher candidates in the two pathways. Leslie shared, “By far, the majority of clinical teacher candidates are writing excellent lesson plans. There are a few weak students, but most of them are doing a top-notch job. They’ve built in rationale for why they’re making certain classroom management decisions ahead of time. I see them, with a few exceptions, these kids, they’ve got it nailed. They are ready to student teach.” Lana expressed, “Well, when I taught traditional, I don’t think it was at the level of the clinical students, but I still think they came out prepared. I think because they are in class so much and we talk about lesson planning, they kind of pick up on what lesson planning is over the clinical group at times. Even though they are ready to student teach, I feel like at the beginning of the semester, my clinical need extra discussion over the elements of a lesson plan and the components of lesson planning, what that looks like. And so I do think that sometimes the traditional pathway students have good lesson planning because we were able to really teach that in the coursework. Whereas in the clinical, they’re expected to learn it on their own a little bit quicker, and then we can talk about it in class.”
Implementation. Several participants shared a discernable difference between the teacher candidates in the two pathways. Lora, a university faculty member, shared, “At the junior level, I absolutely see a difference in learning. It’s not the standards. Up until this semester, there has been no application of learning in the field at the junior level. And even now, the application is very, very limited. They’re meeting standards, but they’re not applying the learning. They are only doing what they have to do to prepare for the learning.” Megan, a cooperating teacher, included, “They come in ahead of the curve as far as being able to plan a lesson and be able to hit on all of the topics they need to hit on and then be able to reflect on the experience. They are not only prepared for student teaching as far as planning and it’s not necessary for them to write out a complete lesson plan because they already have that engrained and fine tuned in what to do. They already have all those components in their head and they don’t have to think through the whole process, or what the parts of a lesson plan are and don’t need a lot of direction in writing lesson plans. When I had traditional students, they needed help writing out their lesson plans. They knew the overall parts of the lesson plan but needed help with the individual parts of the plan. They couldn’t dig as deep as they needed to. They needed help with the structure of the plan and differentiating instruction to all learners. They just needed more help from me as a cooperating teacher.” Joyce, a cooperating teacher, provided her thoughts by adding, “The traditional candidates aren’t bad at implementing their lessons, it just that they don’t have as much knowledge or as many tools in their toolbox as a clinical teacher candidate.”

Teacher candidates were also able to notice differences in writing and implementation ability. Rylee, a traditional teacher candidate, included, “We learned this
semester that you have to work with a student at least 17 times on a certain thing in order for them to get it and we did one lesson once. Then we had to teach another lesson again. How is our doing one 15 minute lesson with a focus student going to help them at all? I don’t really think it did.” Cameron, a clinical teacher candidate, shared, “I’ve noticed that the first part of the program, a lot of my lesson plans were excellent in theory and on paper, but then actually implementing them was a little more of a challenge. So, by the end of my third semester, having failed that many times, in certain ways, I feel like my very last lesson that I developed and delivered was probably my best one so far.”

Cooperating teachers and university faculty all described similar experiences in terms of lesson planning and implementation. Traditional university faculty members have shared through focus group discussion, an abundance of lesson planning, with a lack of implementation opportunities. Clinical university faculty members have described a lack of time to thoroughly teach and discuss lesson plan writing, but balance this with several implementation opportunities. Due to the time in the field to implement so many lesson plans, clinical teacher candidates are provided experience with classroom management, differentiated instruction, and the general flow of the implementation process. The experience embedded in the clinical pathway has created very different outcomes for teacher candidates, outcomes noticeable to cooperating teachers and principals as well.

**Relationships**

The relationship theme emerged from discussion related to collaboration, reflection, and feedback. Collaboration across focus groups and participants became synonymous with reflection. Many shared experiences where collaboration derived from
reflection and reflection flourished within collaboration. Many participants discussed the two together, as if the two concepts could not be separated. Through focus group discussion, participants mentioned natural relationships, connections, and teamwork. As participants spoke of their experiences, the relationship aspect of each pathway emerged.

Melissa, a cooperating teacher, referred to a lack of relationship with traditional teacher candidates as, “We just don’t see them after school, before school, or during plan time. We just don’t have a connection.” Julie, another cooperating teacher, included, “We don’t have the time or the ability to know the traditional teacher candidate’s strengths and weaknesses.” These, and other similar comments reflected weak relationships between traditional teacher candidates and the districts these candidates are placed. Relationship building was difficult for these candidates due to time and experience.

Relationships seemed to form naturally in the clinical pathway. Discussions related to lesson planning and reflection allowed for easy connections to learning. Andrea, a cooperating teacher, said, “I think the clinical pathway students, because they’re so comfortable with who they’re with, we would just converse like two people sitting at a table. We were reflecting constantly throughout the day. It just flowed a lot better with the clinical. It was natural.” Jessica mentioned, “When we collaborated, we would do so as a whole team and the teacher candidates were involved in that process. We would also collaborate after a school day to see what worked and what we needed to change.” Maggie included, “They want to be involved as a staff member, not just seeing themselves as visiting the classroom and leaving after a bit.” Alex mentioned her experience with clinical teacher candidates, “I feel more like a team with them, from the very beginning. It’s not like I’m the teacher and you’re the PDS student. I mean, you
come in and you’re going to be in the room with us. We are the teachers.” Ava simply stated, “They are a part of our culture in the building. It’s just a fabulous collaboration.” Jenna, shared, “During the school day, there’s collaboration that takes place once or twice a week at minimum with the grade level team, along with before or after school and across grade level committees that the clinical students are able to participate in because they’re there for the full day. They get more comfortable in that environment, they might take more of an active role where they’re not just watching; they are actually participating.” Truman included, “With the clinical, they’re just a part of the natural things that we’re doing as a building. They are part of the team meetings and planning. I don’t feel like we’ve done anything different with the clinical kids that we kind of did with the traditional kids.” Eric mentioned, “There’s a collegiality piece where they feel like they are part of a team. Their voice is heard as a clinical teacher candidate. The clinical block as innovated to the point where they’re more confident in their actions when we’re collaborating. They are an equal member rather than a person sitting off to the side watching.”

**Intervention**

One aspect of teaching and learning is the ability to identify skills related to later teaching success. University faculty, principals, teachers, and teacher candidates shared how earlier experiences in the field helped to identify teacher candidates requiring more support or modified career plans. Overall, comments focused on how early clinical experiences mold and support learning. These early field placements allow teacher candidates to discover their future goals rather than determining a lack of desire for teaching right before student teaching.
Change in major. Teacher candidates do not always know what the end goal is, or even have a real concept of the work it takes to become a teacher. Different participants suggested early field experiences assist with providing insight to teacher candidates prior to the student teaching semester. Sam, a university faculty member, offered, “Oh my gosh! Clinical teacher candidates come out so prepared, or finding they don’t want to do this. They may have to drop, which is a good thing; It’s not a bad thing. Or, they may realize they don’t like those little kids but really like fifth grade. So, I mean, they get it all. They get the full spectrum.” Sadie, another university faculty member, elaborated, “We’ve had a lot of people who do the clinical and then realize this isn’t what they want and if they were in the traditional pathway, they probably wouldn’t recognize that. So now, they are only juniors and they’re able to go pick a different path, whether that is a different grade level or a different career in general. It’s been really helpful to them.” Sam shared the experience of another teacher candidate, “When I was conferencing with a student after her lesson, I said, ‘Are you happy? Are you excited about what you’re doing?’ I could tell she wasn’t. She said she wasn’t and she wants to go into math, just math. I thought, ‘Okay, all makes sense.’ It all clicked.”

Additional field support. Incorporating the same concept as with those teacher candidates benefiting from additional field experiences for major degree changes, other teacher candidates benefit from early intervention in preparation for student teaching. Julie, a principal, shared, “We had a clinical teacher candidate that was not ready to student teach, but the university worked really well to have those conversations. We prepped that candidate often at the building. The instructors prepped the student often through the university. The candidate chose not to do student teaching the following year.”
They knew they needed more time to get prepared. It was nice to have the open dialogue and not force the student into a situation where they would not be successful. I think if the student was in PDS, they wouldn’t have had the same opportunity for growth. Being in clinical, it gave them a better opportunity to have more time with different teachers, and they all gathered the same information.”

**Strength in weaknesses.** Other teacher candidates do not necessarily need major interventions or to be led to a different career path. Instead, many teacher candidates simply lack experience with students. The clinical pathway provides early experiences in the field with supporting faculty and cooperating teachers. Through these experiences, participants shared an ability to identify weaknesses in teacher candidates. By identifying weaknesses early, university faculty, cooperating teachers, and principals can work to strengthen these areas in an effort to build confidence in teacher candidates. Maggie shared, “I think in the clinical pathway, they’ve been in the classroom doing more intensified work at an earlier stage and by the time they get to that late clinical phase, which is about the same time as the PDS semester for traditional candidates, there was a big difference. Some PDS candidates are not ready to be in the classroom. I feel like they weren’t necessarily taking the initiative but clinical students I’ve seen are ready to jump in, eager and excited. They have questions along the way, but they are the right type of questions. It’s not, “How do you do this?” They have a lot of content knowledge and pedagogy to back it up and I think that makes a difference. There seems to be more support along the way to help figure out weaknesses in order to help build upon and strengthen those areas and if they do have weaknesses, it seems like they have that opportunity to strengthen them earlier instead of it becoming a bigger issue.” Michelle
added, “I think the clinical pathway spends more time molding a person that may not be able to walk into a classroom and know what they’re doing automatically.”

Confidence

Through focus group discussions with all participants, another theme quickly emerged. The idea of feeling confident prior to student teaching seemed to evolve through pathway experiences. The two pathways provide different experiences to the same goal. University faculty, principals, cooperating teachers, and teacher candidates shared their experiences with the traditional and clinical pathways in relation to confidence; confidence in the quality of teacher candidates, the experience with classroom management, and of teacher candidates through meaningful experiences.

Classroom management. Data analysis revealed a theme of confidence through classroom management experiences. Eric shared, “Our traditional candidates aren’t as prepared. I think there’s a little bit of fear when they get to that student teaching point.” Tami said, “Sometimes they might be a little timid. They might waste two weeks getting to know the classroom teacher whenever that classroom teacher only wants them to dive in.” Ava added, “Traditional teacher candidates are more hesitant.” Eric commented, “I think our traditional teacher candidates have a tendency to take a little bit longer to get to the point where they feel confident. The traditional students tend to step back a little bit and wait and really look through a lens. I’ve actually had two student teachers that have been transferred because they weren’t making it here. It wasn’t going to work. Classroom management was the first weakness and organization was second.” Lora shared, “I would say my clinical students are much more confident about their ability to teach. I had one just Tuesday say, ‘We talked about classroom management. I thought I had it until I had
to do it. Now I get it and I’m thinking about it in a whole different way.’ My traditional students had two twenty minute opportunities to deliver a lesson and one of my students didn’t have a great experience either time and so he walked away really not knowing what to do. The clinical pathway teacher candidates are more grounded in the ability to teach beyond the planning, preparation, and content.” Kim, a clinical teacher candidate, was able to contribute to the conversation by adding, “I feel like we’re more confident to go into a classroom and get down to work, get our hands dirty, and help the students. We’re not as timid or scared and we’re really strong with our classroom management. Throughout this semester we learned how to handle a classroom and how to get the students’ attention and bring them back to lessons.”

**Teaching experience.** A third aspect of confidence was related to teaching experiences. Eric, a principal, stated, “Clinical block teacher candidates are co-operators from the first day they walk in the door. They learn systems and routines from day one.” Kelsey, a clinical teacher candidate, shared, “My time management was lacking in the beginning of the pathway. I thought I had plenty of time to teach a lesson, but I’ve realized my time management has gotten a lot better, realizing what I can teach in the amount of time that I have.” Kari, another clinical teacher candidate, included, “I just think it takes being in the classroom more frequently to learn what it looks like to implement a lesson. Have a lesson that looks good on paper is one thing, but until you are in the classroom and know what a typical school day looks like and going back to time management, I don’t think you’re really going to be successful in implementing a lesson until you’ve seen those things happening.”
The clinical pathway teacher candidates are offered more experiences in the field to become confident. Traditional teacher candidates are just not able to become as confident through the experiences available. Lana, a university faculty member, added, “The clinical just get more opportunities to become confident. The traditional don’t always become confident until the very end of the semester and that’s make-it or break-it time. They have to develop a relationship with one teacher and maintain that because that’s who you’re with for sixteen weeks out of the semester. And then, that’s not necessarily the person they will student teach with either, so then they’re getting to know somebody else. Where with the clinical pathway, they’re in three placements and learning three different teaching styles, and they’re learning. I just think that type of learning can’t be replaced.” Elizabeth, another university faculty member, voiced, “I’ve heard the traditional students say they wished they were in the classroom more. They want to be there the full day. There’s nothing like experience to really move you forward. You can read about it. You can talk about it. You can reflect on it. But, until you’re actually there in the classroom doing it, you don’t really understand.” Rebecca, a traditional teacher candidate, included, “I think we’ve spent so many hours observing and so few hours actually teaching. I just feel like I get so much more out of writing lesson plans, spending time in the classroom, rather than sitting. I need experience. I need real life examples. I need to see it. I can’t read a textbook because whatever’s written in the textbook isn’t realistic for a classroom, for an actual classroom and how things actually happen.”

**Principal perspectives.** Through discussions, it became evident that there is now a raised level of confidence in the quality of teacher candidates the ECEL department assigns to field experiences. Clinical teacher candidates are provided opportunities to
build and strengthen relationships with principals and cooperating teachers on a collegial level. Traditional teacher candidates are not provided such early experiences to form relationships. Jenna, a principal, shared, “When they’re a PDS student, they just aren’t in the building long enough. And so, it takes them more time to feel that same level of comfort, so it’s almost like a slow-to-start kind of situation. It can still happen. You just have to have a different kind of personality to be able to take risks in the environment.” Julie, another principal, said, “When they’re there for longer, they have more confidence in knowing what their abilities are and we may put them in different situations that we wouldn’t put the traditional teacher candidates in. We don’t have the time or the ability to know the traditional teacher candidate’s strengths and weaknesses.” Ava, a different principal, said, “I just feel more confident when I host clinical students versus traditional.” Jill, a principal, shared, “The PDS students who come in, and they’re just there for a few hours, it’s a little bit more difficult to give them things to do or release stuff to them just because you aren’t with them all the time. You haven’t seen their abilities. So it kind of makes it a little bit more difficult with all the responsibilities that are put on the teacher to make sure they get done with students.”

The theme of confidence has been identified by several participants as one of the greatest benefits resulting from the clinical pathway. University faculty members have described confidence in terms of lesson planning and implementation. Principals have shared a noticeable level of confidence in teacher candidates who are involved in the clinical pathway, and cooperating teachers have identified confidence in relation to teaching experiences, interaction in the classroom, and the ability to connect on a professional level.
Summary of the Themes derived from Qualitative Analysis

The five themes emerging from qualitative analysis revealed consistent evidence related to the differences between the traditional and clinical pathways to teacher education. Time, lesson planning and implementation, relationships, intervention, and confidence are all inter-related and connected to perceptions of preparedness. Without time in field placements, lesson planning cannot lead to effective implementation. With additional time in the field, professional relationships are able to flourish. By providing early authentic experiences in the field, teacher candidates are provided opportunities for intervention when required. Teacher candidates gain confidence through additional time in the field; lesson planning with student populations in mind, and by implementing planned experiences. Further, preparedness seems to derive through confidence.

Answering of Research Questions

Research Question One

Research question one for this study is “To what extent do teacher candidates who choose different paths for the same degree program feel prepared to teach prior to student teaching?” Incorporating quantitative and qualitative analysis, the research question is answered by collecting multiple perspectives and experiences in relation to the traditional and clinical pathways to teacher education at the University of Central Missouri (UCM). Overall, traditional teacher candidates recognize a lack of preparation for student teaching in relation to clinical teacher candidates. Although traditional teacher candidates were found to self-rate higher on specific confidence and efficacy questions from the Teacher Confidence and Efficacy Surveys, university faculty who reviewed dispositions revealed these same teacher candidates provided more modest responses to
preparedness whereas clinical teacher candidates self-rated consistently higher levels of
ability and preparedness for student teaching across three semesters of archived data. For
a thorough triangulation of the data collected, qualitative analysis contributed to the
answering of this research question, providing teacher candidate perspectives.

Such responses revealing differences in preparedness include when Rebecca
shared her experience in traditional as, “I think we’ve spent so many hours observing and
so few hours actually teaching.” So many other traditional teacher candidates discussed a
lack of preparation due to the time in the field. This was also recognized in comments
such as when Rachelle shared, “I’m early childhood and I’ve never been placed in a
classroom older than first grade. I have so much experience in kindergarten and first
grade, especially kindergarten. Naturally, I was hoping to get kindergarten for student
teaching because that’s what I’m comfortable in, and I did. But if I had been placed in
second or third grade, I would be clueless because I’ve never set foot in those
classrooms.”

Teacher candidate quantitative and qualitative results revealed a lack of
preparedness to student teach in relation to mathematics. Traditional teacher candidates
self-rated lower than clinical teacher candidates on Teacher Confidence Survey items
focused on locating resources to prepare mathematics lessons, teaching algebra, and
providing concrete experiences in learning mathematics. The statistical significance
revealed on these items paired with qualitative findings support lacks of readiness to
student teach among traditional teacher candidates. Rylee shared, “One more thing about
lesson plans is that I can’t think of a time that I’ve ever created a math lesson plan. I feel
like that’s something that I’m going to need to know how to do, and I guess it’ll be trial-
by-fire next semester. That’s not something that I’m entirely confident in.” Rose added, “I agree, I wrote one lesson plan ever in my math course for teaching and that was it. That’s all I’ve ever written, and I’ve never actually taught one.” Rachelle concurred with the previous comments by adding, “I have never written a math lesson plan.” Rian explained the difference between the traditional and clinical pathways in regards to mathematics experience by saying, “I don’t have the same experience as the other people in traditional just because I had experienced the clinical before. After jumping from clinical back to traditional, I see a complete difference because in clinical, there were the math lessons you created, the science, and the social studies. I’ve had that background and it was different jumping back into traditional and realizing that, ‘Oh, I just have to create one of these. What?’ So, I think maybe sometimes people aren’t as prepared as the other people in certain aspects.”

Carin’s statement regarding clinical was echoed from many students in the pathway. Carin said, “I feel like all of the experience that we get helped me grow as a teacher and has made me feel more passionate about what I’m doing and more confident in myself about teaching and has prepared me a lot more for student teaching because I feel like I know I could do it and it’s given me more confidence when I see myself.” Cameron’s comment describing why she believes she is prepared for student teaching was also repeated by many other clinical candidates, “I think I’m so prepared because of the hours in the classroom. Honestly, I don’t know how others manage to do it with so few hours. I think we have hundreds, literally hundreds of hours behind us now, and I think that’s been vitally important because we know what to expect, and so we’re not complete thrown the first time something happens.”
Research question one, sub question one. Research question one, sub question one for this study is “To what extent do teacher candidates who choose different paths for the same degree program feel prepared to teach prior to student teaching as measured by confidence survey?” According to the quantitative analysis and derived results from a one-way ANOVA, teacher candidates in both pathways self-rated similar levels of confidence prior to student teaching.

The survey provides a somewhat skewed perception of preparedness to student teach due to lack of accountability in relation to self-assessment. Regardless, teacher candidates in the traditional pathway self-rated higher on specific confidence survey items that clinical pathway students, revealing a perception of being equally prepared for student teaching. Teacher candidates in the clinical pathway self-rated higher on specific confidence survey items related to mathematics, where traditional teacher candidates rated lower.

Participants enrolled in the traditional pathway self-rated higher on the Teacher Confidence Survey items, “Establish a feeling of community in my classes,” “developing an assessment rubric,” and “create integrated lessons and units.” Clinical pathway teacher candidates self-rated higher in relation to the items, “Locate resources for preparing mathematics lessons,” “Teach algebra,” and “Give students concrete experiences in learning mathematics.” Although there were these few items revealing statistical significance, the majority of responses revealed insignificant differences. From the 28 survey items, 79% of responses revealed insignificant differences between the two pathway participants leading to the conclusion that according to the Teacher Confidence
Survey, teacher candidates who choose different paths for the same degree program feel equivalently prepared to teach prior to student teaching.

**Research question one, sub question two.** Research question one, sub question two asks “To what extent do teacher candidates who choose different paths for the same degree program feel prepared to teach prior to student teaching as measured by Teacher Efficacy Survey?” According to the quantitative analysis and derived results from a one-way ANOVA, teacher candidates in both pathways self-rated similar levels of self-efficacy prior to student teaching. From the 23 survey items, 96% of responses revealed insignificant differences between the two pathway participants. Only one efficacy survey item revealed statistically significant results following analysis. Participants enrolled in the traditional pathway rated higher when asked how much can they do to get children to follow classroom rules ($M = 7.82$, $SD = 1.44$) than participants enrolled in the clinical pathway ($M = 7.36$, $SD = 1.31$). Due to 96% of responses revealing no statistical significance when comparing the two pathways, research question one, sub question two finds teacher candidates who choose different paths for the same degree program to feel equally prepared to teach prior to student teaching as measured by the teacher self-efficacy survey.

**Research question one, sub question three.** Research question one, sub question three inquires “To what extent do teacher candidates who choose different paths for the same degree program feel prepared to teach prior to entering into the student teaching semester as measured by self-assessment through the use of the teacher candidate disposition form?” Archived dispositional data were collected and analyzed to determine
whether teacher candidates in one pathway appear more prepared than the other. Analysis was conducted over a three-semester timeframe.

Analysis revealed teacher candidates enrolled in the traditional pathway appeared less prepared to student teach when comparing the two pathways across three semesters of data collection. Results were statistically significant based on two of three semesters, without statistical significance during the spring 2014 semester. Although the spring 2014 semester did not reveal statistical significance, the results did reveal clinical pathway teacher candidates rated slightly higher in preparedness than traditional pathway teacher candidates from that semester of data collection. Fall 2013 semester dispositional analysis revealed 100% of responses identified clinical pathway teacher candidates to be more prepared for student teaching prior to the student teaching semester than traditional teacher candidates.

Spring 2014 semester dispositional analysis revealed 92% of responses identified non-significant differences between preparedness of teacher candidates. Data analysis revealed 73% of non-significant results showed slightly higher rates of preparedness to student teach from clinical teacher candidates. In addition, 25% of non-significant results revealed traditional teacher candidates to be more prepared for the student teaching semester.

To add to the results and answering of this research question, fall 2014 semester dispositional analysis revealed 83% of responses identified clinical pathway teacher candidates to be more prepared for student teaching prior to the student teaching semester than traditional teacher candidates. Therefore, the answer to research question one, sub question three is, teacher candidates who choose different paths for the same degree
program feel statistically significant differences in preparedness to teach prior to entering into the student teaching semester as measured by self-assessment through the use of the teacher candidate disposition form.

When combing results across three subsequent semesters of data collection, 64% of responses indicated higher levels of preparedness from clinical teacher candidates. The other 36% showed non-significant results revealing slightly higher rates of preparedness from clinical pathway participants. These results reveal a 28% advantage overall, where clinical teacher candidates indicate higher ratings of preparedness to student teach prior to the student teaching semester.

**Research question one, sub question four.** Research question one, sub question four asks “What is the perception of readiness to student teach among teacher candidates at the completion of each pathway?” Traditional and clinical teacher candidates have found the clinical pathway to teacher education to prepare teacher candidates more adequately for student teaching. The question is answered through qualitative analysis, coding focus group transcripts and identifying content for themes. Emerging discussion and themes revealed the perception that clinical teacher candidates are more prepared to student teach than those teacher candidates enrolled in the traditional pathway to teacher education.

Traditional teacher candidate responses revealed learning through the pathway, but not to the extent of the clinical pathway. Roberta shared, “The traditional pathway has gotten us in the classroom. It has gotten us the chances to get in there and teach. It taught us the information that we know, but everything looks better on paper than it does with experience. I did traditional because it just fit me better, but if I could, I would’ve done
clinical just to get more classroom experience. It’s something you don’t really know you like until you just get in there and try it. With the traditional, we get in the classroom, but it’s not nearly as much as we should be.” Additionally, traditional teacher candidates recognized a lack of experience in relation to preparedness as Rae communicated, “I need more time in the field, because one class with classroom management really doesn’t get you prepared to where you need to be.” Clinical teacher candidates also recognized differences between preparedness in the two pathways. Kristen explained, “I’m so prepared because the clinical is the best way to get the most experience, hands-on out in the field experience. However, you have to be prepared to give a lot of time and a lot of work toward it, but it is definitely worth it in the end, especially leading up to student teaching and the experience you get prior to jumping in a classroom with students and a teacher.” Kim’s comment also revealed differences in teacher candidate perceptions of preparedness. Kim stated, “I feel like we’re more confident to go into a classroom and get down to work, get our hands dirty, and help the students. We’re not as timid or scared and we’re really strong with our classroom management. Throughout this semester we learned how to handle a classroom and how to get the students’ attention and bring them back to lessons.”

Research question one, sub question four, “What is the perception of readiness to student teach among teacher candidates at the completion of each pathway?” is answered as teacher candidates shared experiences indicating the clinical pathway prepares teacher candidates to student teach more than the traditional pathway. The perception of the clinical pathway better preparing teacher candidates to student teach and eliciting feelings of readiness at the completion of the pathway is revealed through teacher candidate
responses. Rachelle, a traditional candidate, shared, “Part of me thinks it would save me stress down the road if I had chosen clinical because I would have felt way more prepared. Like, my first year of teaching when I have to prepare all these lessons or when I come to social studies and math, they wouldn’t be my first time doing those lessons. If I had to argue why traditional was better than clinical, I don’t have anything to say.”

Roberta said, “I would tell my friends to go to the clinical pathway so they get more time in the classroom and are more prepared.” Cami, a clinical teacher candidate, added, “I’m a very hands-on learner, so I don’t think I could be learning the stuff that we’ve experienced in the classroom from a textbook. I just don’t think I would be able to latch onto that and really take in.” Kylie included, “I would definitely choose this (clinical) pathway again. There is no question about it. Anytime that anybody that is choosing between clinical and traditional, I told them that it’s not an option, ‘You have to go clinical because …I wouldn’t have seen all of the hard work that I’m putting in and I wouldn’t have seen it in the kids. I wouldn’t have been able to see how my lesson plans would be implemented. It boosts your confidence and it’s been a wonderful experience.”

**Research Question Two**

Research question two asks, “To what extent are university faculty, principals and cooperating teachers able to identify dispositional and academic differences between teacher candidates within the traditional and clinical pathways prior to the student teaching semester of course work?” The question is answered through qualitative analysis, coding focus group transcripts and identifying content for themes. Emerging discussion and themes revealed the perception that clinical teacher candidates are more prepared to student teach than those teacher candidates enrolled in the traditional pathway.
to teacher education as observed by university faculty, principals, and cooperating teachers. The research question is answered by collecting multiple perspectives and experiences in relation to the traditional and clinical pathways to teacher education at the University of Central Missouri (UCM). University faculty, principals and cooperating teachers are able to identify dispositional and academic differences between teacher candidates within the traditional and clinical pathways prior to the student teaching semester of course work. To support the answering of this question, Ava shared, “Traditional teacher candidates are more hesitant.” Eric commented, “I think our traditional teacher candidates have a tendency to take a little bit longer to get to the point where they feel confident. The traditional students tend to step back a little bit and wait and really look through a lens. I’ve actually had two student teachers that have been transferred because they weren’t making it here. It wasn’t going to work. Classroom management was the first weakness and organization was second.” Other comments supported these statements, revealing a difference between the two pathways. Jenna shared, “When they’re a PDS student, they just aren’t in the building long enough. And so, it takes them more time to feel that same level of comfort, so it’s almost like a slow-to-start kind of situation. It can still happen.” Julie said, “When they’re there for longer, they have more confidence in knowing what their abilities are and we may put them in different situations that we wouldn’t put the traditional teacher candidates in. We don’t have the time or the ability to know the traditional teacher candidate’s strengths and weaknesses.”

**Research question two, sub-question one.** Research question two, sub-question one asks, “To what extent do university faculty, principals, and cooperating teachers
perceive teacher candidates are prepared to teach developmentally appropriate lessons?"

University faculty, principals, and cooperating teachers perceive clinical teacher candidates to be more prepared to teach developmentally appropriate lessons. This question is answered through qualitative findings and analysis where perceptions of traditional teacher candidates and clinical teacher candidates were collected and coded for themes. University faculty and cooperating teachers provided personal experiences with teacher candidates focusing on lesson planning and then of implementation of lesson plans in order to answer the research question.

Qualitative findings revealed traditional teacher candidates wrote more lesson plans than clinical teacher candidates. Lora said, “My traditional class is doing much more lesson planning than my clinical pathway because there’s less application opportunity. Therefore, there’s more of an emphasis on planning. They’re writing a couple of lessons to get started, and this semester for the first time they’ve had a chance to go deliver those lessons in a rather contrived setting, but it was better than nothing. But then, they write two one-week unit plans that are embedded in a larger unit. They write twelve lessons over the course of the semester.” Leslie added, “The traditional teacher candidates planned, taught, and had some reflection, but not as much as we’ve built into the clinical.”

Cooperating teachers described traditional teacher candidate lesson planning as satisfactory, but not comparable to the clinical pathway teacher candidates. Responses supporting this answer included when Megan shared, “When I had traditional students, they needed help writing out their lesson plans. They knew the parts of the lesson plan but needed help with the individual parts of the plan. They couldn’t dig as deep as they
needed to. They needed help with the structure of the plan and differentiating instruction to all the learners. They just need more help from me as a cooperating teacher.” Andrea felt like she had to provide the scaffolding to the teacher candidates. She shared, “I felt like with the PDS students, I was tweaking more of their lessons during every little step.”

Perceptions of traditional teacher candidate readiness to teach lessons further included participant perspectives. Elaine, a university faculty member, included, “They’re looking at those lesson plans. They’re very insecure. I mean, only a few feel secure in it, because it’s their first time to really be in a classroom.” Elizabeth agreed by stating, “I’ve had students in the past who perform really well in the classroom, and they write really well, and they participate. But then, when they get out into the field they really are lacking in some people skills, social skills, and pedagogical skills.” Cooperating teachers supported these thoughts. Joyce added, “The traditional candidates aren’t bad at implementing their lessons, it’s just that they don’t have as much knowledge or as many tools in their toolbox.”

Clinical teacher candidate readiness relied on the perceptions of university faculty and cooperating teachers as well. Leslie was able to describe the difference between the two pathways in relation to lesson implementation as, “What I see the difference between implementation of clinical and traditional is the level of confidence, the level of intent, intentional teaching on the part of our seniors in the clinical versus the traditional, I think it’s just because they’ve had more experience in the classroom. They just felt more comfortable. They’re more focused, I think.” Sadie added, “I like the fact that they get to apply what they learn in class. They can apply it in the field, then come back and talk about it, reflect on it. You can see a lot of growth. You can see the lesson at the
beginning, and then the lesson at the end, and the growth between. You can see how they’re blossoming into a full blood teacher.” Cooperating teachers also noticed differences in how clinical teacher candidates implemented lesson plans. Maggie shared, “lesson implementation with the clinical students tended to go lot smoother because they were more connected with all the parts of the day. The students had a better relationship, listening to them and responding to them as their teacher versus a stand-alone body.” Joyce provided, “Clinical candidates have a better grasp on each standard and the best way to approach a lesson.” Michelle shared, “The clinical students just seem to have more exposure and their ability to be comfortable while teaching is just higher.”

**Research question two, sub question two.** Research question two, sub question two asks, “To what extent do university faculty, principals, and cooperating teachers perceive teacher candidates are able to collaborate with assigned cooperating teachers and university supervisors as a team?” This question is answered through qualitative findings and analysis where perceptions of traditional teacher candidates and clinical teacher candidates were collected and coded for themes. Clinical teacher candidates were identified as being more collaborative with cooperating teachers in the field and becoming perceived as part of the team than traditional teacher candidates. University faculty and cooperating teachers provided personal experiences with teacher candidates focusing on collaboration in order to support the answer to the research question.

Traditional pathway teacher candidate collaboration was found to be difficult to implement and encourage in the schools. Leslie explained, “There have been instances, examples of students in the traditional who did form a really tight bond with the teacher. They were e-mailing and continue to e-mail and stay in touch with one another, but I
think when you’re only dropping in for a half day a week, it’s difficult. You are focused on the students, and it’s a little bit more difficult. So much of the collaboration is through email, which is not a prime way of doing that. So I think it’s been strictly a function of the amount of time.” Ann supported the answer to this research question with, “I don’t think it happened with the PDS because I didn’t have the plan time to stop and talk to them and you can’t just stop and talk with kids. The timing and just the way it was set up didn’t allow us to collaborate. I didn’t have a plan time in the morning to talk with them.” Mindy shared, “The traditional pathway couldn’t do what the clinical can. They just aren’t here enough. They are here for a short time and don’t get to experience our PLC collaboration. There just wasn’t time to sit down and talk together.”

The difference between traditional and clinical pathway teacher candidate collaboration was noticed by clinical faculty, principals, and cooperating teachers. Sarah said, “Clinical teacher candidates are able to get into the schools much sooner and many times before student teaching. During these experiences, they are able to collaborate and reflect on their lessons continuously throughout the semester. Since they are able to be in the classrooms two whole days a week, they are able to discuss and collaborate all day long about the lesson planning process. I know they collaborate during the teacher’s plan times, before and after school.” Eric mentioned, “There’s a collegiality piece where they feel like they are part of a team. Their voice is heard as a clinical teacher candidate. The clinical block as innovated to the point where they’re more confident in their actions when we’re collaborating. They are an equal member rather than a person sitting off to the side watching.” Melissa mentioned, “Collaboration is constant. They’re at our sides at all times, it’s during lunch, when we’re walking down the hall, in front of the kids, it’s
constant, all the time.” Jake added, “I don’t watch the traditional teacher candidates as closely to hire later because they are there so little and they just can’t collaborate to the extent of the clinical. They just don’t have the same opportunities.”

**Research question two, sub question three.** Research question two, sub question three asks “What is the perception of readiness to student teach among university faculty, principals, and cooperating teachers assigned to teacher candidates from either pathway?” University faculty found teacher candidates in both pathways to be ready to student teach, with expressions that the clinical pathway has provided additional experiences to the clinical teacher candidates, making them possibly more prepared for student teaching sooner. Principals and cooperating teachers found clinical pathway teacher candidates to be more prepared for student teaching, sharing experiences where the clinical teacher candidates revealed readiness to student teach much earlier than traditional teacher candidates. This question is answered through qualitative findings and analysis where perceptions of traditional teacher candidates and clinical teacher candidates were collected and coded for themes. Clinical teacher candidates were identified as being more prepared to student teach, sharing experiences in relation to readiness to student teach. University faculty and cooperating teachers provided personal experiences with teacher candidates focusing on readiness in order to support the answer to the research question.

University faculty shared a belief that traditional teacher candidates are ready to student teach. However, these same faculty members express the teacher candidates show feelings of nervousness and could have more experiences prior to student teaching. Emma said, “While I feel many are pretty nervous about student teaching, I feel they
really think they are prepared and anxious to start their new experience.” Ella commented, “I do think that traditional teacher candidates are prepared for student teaching, but I also believe if they had more clinical experience, it would be very beneficial for them. They grow in doing whole class lessons, assessing a student in reading and analyzing the data to create intervention lessons. They also have an opportunity to use classroom management strategies throughout their teaching and in the classroom.” Lana also explained, “Well, when I taught traditional, I don’t think it was at the level of the clinical students, but I still think they came out prepared.”

Principals have noticed the same differences in preparation in relation to pathway. Eric shared, “Our traditional candidates aren’t as prepared. I think there’s a little bit of fear when they get to that student teaching point.” Julie mentioned, “Their foundational skills are a little bit better when they come in as clinical, rather than PDS. We also see that the rapport with the staff gains after building confidence and building that time between those days as they go to different teachers.” Cooperating teachers also expressed differences in preparation. Ashley stated, “I think overall, that with the clinical pathway, the students are much more prepared. I mean, I think it’s probably a student-by-student, case-by-case. I don’t know that I’ve never had an experience where I felt like one was just truly not prepared, I think that’s very rare. I think clinical students become professionals sooner than traditional students.” Tara shared a similar thought by stating, “Clinical and traditional students aren’t always equally prepared. I think it’s just the confidence level of the different students. It just depends on maybe how much experience one has had over another.” Through these combined perspectives related to teacher candidates in the two pathways to the same degree program, it becomes apparent that
clinical teacher candidates are found to be more ready to student teach prior to the student teaching semester of coursework than teacher candidates in the traditional pathway.

**Reflection of conceptual/theoretical framework**

As mentioned in the original purpose and design of this research study, The UCM Elementary and Early Childhood (ECEL) program was recently accredited by the National Council for Accreditation of Teacher Education (NCATE) and will be weaving the following five categories of standards into both educational pathways for future CAEP accreditation. The accreditation process and defined standards have served as the defining framework for the purpose of this study and are supported through qualitative analysis and revealed findings. The categories, as mentioned by Sawchuk (2013), will be addressed and substantiated in this section, providing supporting evidence of meeting the categories.

Through focus group discussion and coding for themes, analysis revealed evidence related to the first accreditation category. The first category is equipping teacher candidates with appropriate content knowledge and strategies. Discussion and experiences with both pathways provides support for equipping teacher candidates in the two pathways for content knowledge. Emily explained, “We look at the lesson plan and think about classroom management first. We are thinking about how we’re going to distribute materials, how we’re going to transition the children, and how we’re going to focus them again, those kinds of things. Then we look at our objectives and plan a lesson in the workshop model, so it’s kind of an ‘I do, we do, you do’ plan. Leslie mentioned, “I’ve taught seniors in both pathways and there’s a difference in the delivery of instruction, but the standards are the same. I think we match that up pretty well.”
The clinical pathway qualitative analysis provided data to support strong collaboration between districts, university faculty, and teacher candidates for the purpose of developing strong teacher candidates. Jake described, “I think with the clinical, the relationship is probably a little bit stronger. I’m thinking in terms of our staff and how much they learn and grow and get better because of the teacher candidates they have. Some principals found strong candidates in both pathways, supporting the category of recruiting a diverse and academically strong group of teacher candidates to the education field. Truman shared, “I think we’re seeing good PDS students and good clinical students that are prepared to tackle that first step of what teaching really is. They have an idea of what it is, but they don’t know what it is yet.” Erin, a classroom teacher mentioned, “With this program I’m assured to get someone that has already been in my classroom and already has a connection with my students, so that’s the best part of it to me.”

In relationship to the category of demonstrating that graduates are successfully boosting student academic achievement, Megan included, “They have all been really good, or maybe I have just been really lucky that each student who has come through has had great classroom management. They have been able to manage small groups and put small fires out. They are able to see the big picture in the classroom and also the small picture for each child. They see how they can help the children. They seem to have a better understanding of what it takes to be a good teacher.” Emily included, “They need to pick up learning styles and interests to really know what academic levels the kids are performing at.”

The last category of standards for the national accreditation process takes a deeper look at maintaining a quality-assurance system and cannot be supported at this time with
the two pathways to teacher education due to clear differences in the outcomes of teacher candidates in each pathway (CAEP 2013 Standards, 2013). As discussed early in this research study, CAEP has planned to assess higher education programs related to candidate performance, use of data in program self-improvement, and educator preparation providers (EPP) capacity along with commitment to quality (CAEP 2013 Standards, 2013), leaving room for research related to teacher candidate efficacy as compared between the traditional and clinical pathways. This research study provides an in-depth look at the two pathways to teacher education at UCM and encourages discussions for the future of the ECEL department.

Social Development Theory has been the catalyst for this study. The ECEL learning process has been facilitated through collaborative efforts and planning among university faculty. Further, collaborations in the partner school districts has encouraged further learning and strengthened relationships among university faculty, principals, cooperating teachers, and teacher candidates (Atkinson & Pugsley, 2005; McCallister et al., 1997; Rigelman & Ruben, 2012). The research has revealed how collaborative relationships between teacher candidates and cooperating teachers has not only facilitated the learning process for the teacher candidate, but has also strengthened the learning of the cooperating teacher. Further, these early collaborative relationships have encouraged stronger team building in the school districts and instilled a culture of teaming in teacher candidates prior to the student teaching experience. Open-ended discussion and reflection techniques were observed in clinical pathway experiences. These discussions seemed to strengthen the learning from all involved and guide teacher candidates toward a collaborative nature across disciplines. (Bruffee, 1999; Rigelman & Ruben, 2012). By
embracing collaborative learning, the presence of trust between University faculty, principals, cooperating teachers, and teacher candidates was revealed (Dee, 2012; Rigelman & Ruben, 2012).

In accordance with Social Learning Theory, the research study revitalized the significance of self-efficacy and utilizing effective reflection techniques to strengthen pedagogy. These constructs, in addition to confidence and collaboration, have become the framework for this study (Grusec, 1992; McKenna, 2009). According to Bandura (1986), social learning attributes affect planning for future and the acting out of such plans. This process not only affects the teacher candidate in their learning placement and experiences, but also relates to the researcher, and stakeholders for teacher education. The knowledge gained from teacher candidate learning experiences, as well as derived data collected in principal and cooperating teacher focus groups contribute to the understanding of the world surrounding those experiences and later connects back to pedagogical knowledge contributing to the future of teacher education at UCM (Bandura, 1986; McKenna, 2009).

Recalling that Social Learning Theory includes the acquisition and development of “competencies, self-beliefs of efficacy to exercise control, and self-regulatory capabilities for influencing one's own motivation and actions,” it becomes apparent how the clinical pathway to teacher education is founded in the theory and thrives on active learning experiences for motivation to learn and improve teaching techniques (Bandura, 1986, pp.7-8). These attributes related to Social Learning Theory are the motivation for individual success for career goals and educational outcomes directly affecting teacher candidates in teacher education pathways at UCM (Bandura, 1986; Darling-Hammond,
2006). These attributes are measured during self and instructor disposition assessment, as presented in this study (Bandura, 1986; Darling-Hammond, 2006). These aspects of the learning theory support the researcher’s individual learning style. Further, university faculty members, principals, cooperating teachers, and teacher candidates have provided through the data analysis that collaborative contributions yield an encouraging and supporting direction for future opportunities (Bandura, 1986).

The Constructivist worldview has become the catalyst for this research project, and is directly related to the problem of the study, allowing participants to interpret their own understanding and interpretation of their experience through active learning (Bredekamp, 2014; Creswell, 2012; Khalid & Azeem, 2012). Further, Bandura’s Social Development Theory provided the framework outlining the importance of social interaction. Social Development Theory has clearly become the catalyst for social learning and the development of the UCM clinical education program, but even those creators of the pathway could not have imagined engrained the program would become in the theoretical framework. Clinical pathway learning occurs through collaborative efforts between teacher candidates, cooperating teachers, principals, and university faculty (Atkinson & Pugsley, 2005; McCallister et al., 1997; Rigelman & Ruben, 2012). The learning does not derive from one setting, but instead fluxuates and appears in different capacities, creating learning experiences in the classroom and the field, where all stakeholders become learners and all stakeholders in turn become teachers. According to Bandura (1986), social learning theory adversely affects the planning process across the two pathways, encouraging reflection and change for the future of teacher education and the acting out of such plans. The knowledge gained from this research, including
university faculty, principals, cooperating teachers, and teacher candidates will impact learning experiences and the social construct will shape understanding of the world surrounding those experiences and contribute to pedagogical knowledge (Bandura, 1986; McKenna, 2009).

**Discussion**

**Quantitative analysis and findings**

Quantitative analysis revealed little difference between teacher candidates in the traditional pathway to those in the clinical pathway to teacher education at UCM when gathering perceptions of confidence as measured by the Teacher Confidence Scale. The purpose of the analysis and one-way ANOVA was to determine if teacher candidates in one pathway identified as more confident than the other. After careful analysis, findings revealed little significance between perceptions of confidence when comparing the two pathways. In fact, where some statistical significance did occur, the traditional pathway teacher candidates appeared to identify as more confident than clinical pathway teacher candidates. The clinical pathway teacher candidates self-rated higher and identified as more confident than traditional pathway teacher candidates in relation to teaching mathematics. In fact, when triangulating the data and including traditional teacher candidate qualitative discussion, there appears to be a significant lack of confidence among traditional teacher candidates in relation to teaching mathematics through lack of application.

Quantitative analysis comparing the levels of confidence between teacher candidates in the two pathways prior to student teaching revealed traditional teacher candidates viewed their ability to establish a classroom community, develop assessment
rubrics, and create integrated lessons and units as higher than clinical pathway self-ratings. These results can be explained a number of ways. First, it could be possible these teacher candidates are more prepared for student teaching and recognize the confidence level attained through university coursework. This solution is not likely due to the triangulation of the data, incorporating dispositional assessments and qualitative analysis in the answering of research questions. More plausible is the inherent understanding of self-assessment. The confidence survey is designed as a self-assessment tool without criteria or university faculty assessment. Teacher candidates across both pathways shared high levels of confidence when self-assessing through the use of the confidence survey without the reliability measure of a faculty member reviewing and reflecting with the teacher candidate related to particular confidence survey items.

Also significant to the particular items traditional teacher candidates self-assessed at higher levels than clinical candidates, was the connection to university coursework and assignments. Traditional teacher candidates have been deprived of additional field experiences early in coursework, resulting in extensive discussion and specific courses to develop pedagogy and practice with establishing a classroom community, developing assessment rubrics, and creating lessons and units of instruction. Although it has been later determined through qualitative data collection and analysis that these traditional teacher candidates are not afforded authentic learning experiences in the field with school-age children across subject areas, this knowledge seemed to not be a factor for traditional teacher candidates when self-assessing confidence on the scale. Therefore, traditional teacher candidates revealed statistically significant results on these confidence
survey items based upon university classroom experiences through lecture, class notes, practice with peers, and lesson writing experiences.

When reflecting on the confidence level of clinical teacher candidates, data revealed either insignificant differences when comparing the pathway to the traditional teacher candidates, or revealed lower levels of confidence on specific confidence survey items in relation to the traditional pathway teacher candidates. The only items on the confidence survey where clinical teacher candidates were found to have higher rates of confidence was in relation to preparing and teaching mathematics lessons. Initially, the concept of this items standing out as a high-confidence area for clinical teacher candidates seems odd. However, once the qualitative data were analyzed and findings revealed, traditional teacher candidates shared a lack of learning experiences in teacher education math courses. In fact, traditional teacher candidates described a lack of confidence in teaching math concepts to children due to an inability to plan and implement to small groups of children. In light of this knowledge, the results to the confidence item seem appropriate. With the triangulation of the data, incorporating qualitative data collection into the analysis and understanding of quantitative data results, there seems to be little reason for clinical teacher candidates to reveal similar confidence ratings at traditional teacher candidates based on field experiences. The most obvious conclusion to the confidence scale results lies within confidence itself. Teacher candidates exhibit high levels of self-confidence towards the end of university coursework and prior to embarking on the student teaching experience. Teacher candidates completed confidence surveys one month prior to the completion of the senior one experience on campus. Due to the timeframe of scale completion and the lack of
explanation for ratings on confidence items, teacher candidates from both pathways expressed high levels of self-confidence, therefore creating non-significant results on many confidence survey items.

These results appear to reflect that when expectations are unknown, confidence levels appear to be higher. Data analysis provided a trend related to novice teacher candidates and perceptions of confidence and efficacy. This emerging trend led to considerations focused on self-assessment practice prior to intensified experience in the field. The University of Central Missouri (UCM) Teacher Education Assessment Committee (TEAC) has collected data for the Annual Report to the Teacher Education Council to measure first-year teacher dispositions in comparison to principal ratings. The committee was established in April of 1988 and has served as the means for periodic assessment of the Teacher Education programs at UCM to date (Zelazek, 2016). Data analysis from the report continually reveals principals rated first-year teachers slightly lower on average than the teachers for all questions (Zelazek, 2016). The findings from this annual report provide evidence for higher teacher candidate self-assessments when comparing those with heavily embedded field experiences to those with limited time in field placements.

With additional time in the field, confidence appears to be lower due to the understanding of what it takes to be an effective teacher. Teacher candidates with more knowledge in a subject area have a more involved understanding of the importance of the concept, therefore revealing a lack of confidence in self-rating. Those teacher candidates with less knowledge and experience in a content area are not able to identify what is not known about the subject and appear to be more confident through self-rating.
Additionally, teacher candidates tend to self-assess higher without university faculty evaluation and discussion. The Teacher Confidence Survey, as implemented, did not require the inclusion of examples or discussion related to answers, nor was there a faculty evaluation aspect to responses. Without accountability, teacher candidates were able to self-assess without reflection or concrete evidence of knowledge. The confidence survey results appear to be non-applicable without teacher candidate accountability and justification or significant descriptions to provide proof for responses.

In regards to the Teacher Efficacy Survey results as part of the quantitative analysis, data revealed little difference between teacher candidates in the traditional pathway to those in the clinical pathway to teacher education at UCM when gathering perceptions of efficacy. The purpose of the analysis and one-way ANOVA was to determine if teacher candidates in one pathway identified as having higher levels of efficacy than the other pathway. After careful analysis, findings revealed little significance between perceptions of efficacy when comparing the two pathways. In fact, where a statistical significance did occur, the traditional pathway teacher candidates appeared to identify at higher levels of efficacy than clinical pathway teacher candidates.

A one-way ANOVA revealed relatively insignificant results based on efficacy ratings. Surprising to the research, traditional teacher candidates self-rated higher than clinical teacher candidates when asked, “How much can you do to get children to follow classroom rules.” These results were not expected due to the lack of field experiences traditional teacher candidates have prior to student teaching. Through qualitative analysis and findings, teacher candidates in both pathways expressed an unequal distribution of field experiences between the two pathways indicating a difference in the ability to create
and maintain classroom management strategies in the field. With a lack of authentic experiences in elementary classrooms, traditional teacher candidates would not be likely to rate higher on a question focused on strategies for classroom management. All other efficacy questions revealed insignificant results between the two pathways. The results from this efficacy scale reveal a need for explanation and justification of rating for each scale response, as well as examples derived from learning experiences. Further, Teacher Efficacy Survey self-ratings were not evaluated by university instructors or peers in the teacher education program; probing the question of accountability. Without accountability, self-assessment ratings cannot be taken seriously as an accurate account of perceptions related to preparedness to student teach.

Teacher candidates were asked to rate their ability to progress and become prepared to student teach in relation to 12 dispositional questions. The dispositional self-assessment process in the teacher education program has a different process than the confidence and self-efficacy scales. Dispositional assessments are first self-assessed by teacher candidates after time in the field. Teacher candidates not only assess perceived ability and progression of each disposition, but also provide comments and rationale for the selected rating of each disposition. Teacher candidates turn completed disposition forms into assigned course instructors for review and feedback, with the understanding that a truthful dispositional assessment is perceived as stronger than a contrived assessment. Due to the lengthy process and seriousness of the assessment technique, teacher candidate disposition assessments are found to be more valid than confidence and self-efficacy surveys. The results derived from one-way ANOVAs on each disposition item revealed varied levels of significance across three semesters of archived data.
When comparing dispositional data across pathways and semesters, teacher candidates enrolled in the clinical pathway generally rated themselves higher than traditional teacher candidates. Based on the previous knowledge of the dispositional assessment process, these initial results are not surprising and further substantiate the claim that confidence and self-efficacy surveys may not be valid indicators of readiness to student teach. Looking closely at the fall semesters 2013 and 2014, both revealed relatively significant results, showing higher disposition ratings from those teacher candidates enrolled in the clinical pathway. Triangulation of data by factoring in qualitative analysis provides a full explanation of why clinical teacher candidates could rate higher on the dispositions and not on the confidence and self-efficacy surveys. Further, the purpose and intent of the disposition assessment has been to observe and support teacher candidates in the field setting with the opportunity to intervene when teacher candidates do not appear dispositionally ready to student teach. With this knowledge available, clinical teacher candidates gain vastly more authentic field experiences providing ample opportunity to fine-tune disposition criteria prior to self-assessment and faculty feedback.

Another factor to consider when reviewing the results of the dispositional data collection is clinical teacher candidates are assessed by disposition forms each semester beginning during the first semester of junior year coursework. Traditional teacher candidates are not introduced to the disposition assessment until the senior one semester of coursework during the PDS block. Prior to the PDS block, traditional teacher candidates are not provided knowledge of dispositions, what the criteria are, how teacher candidates are assessed, or what type of feedback to expect from university faculty.
Further, these teacher candidates have limited experience in the field while some have never taught a lesson to children. Traditional teacher candidates cannot be expected to rate well on the disposition assessment form due to lack of experience with dispositions, lack of field of experience prior to the PDS semester, and lack of experience with lesson implementation prior to the PDS semester. The injustice of denying such experiences to traditional pathway teacher candidates has an impact on disposition ratings as compared to clinical teacher candidates at the same level of coursework with varied field experiences.

What is more surprising and somewhat difficult to explain is the difference in results during the spring 2014 semester. Data analysis appeared to reveal rather insignificant results when comparing the two pathways. In fact, spring 2014 semester dispositional analysis revealed 92% of responses identified non-significant differences between preparedness of teacher candidates, with 73% of non-significant results showing slightly higher rates of preparedness to student teach from clinical teacher candidates and 25% of non-significant results revealing traditional teacher candidates to be more prepared for the student teaching semester. The results from this one semester leave the researcher questioning what occurred during the spring 2014 semester to create similar ratings on dispositional assessments. Possible factors could include changes in faculty teaching and assessing dispositions, changes in field experiences, or timeframe of dispositional assessments in the semester.

Although discussion does not lead to answers to the phenomenon of spring 2014, what is significant to the research and validates the nature of the research is when the disposition assessment results from the three semesters are combined, there is a 28%
advantage where clinical teacher candidates indicate higher ratings of preparedness to student teach prior to the student teaching semester.

**Qualitative discussion**

Quantitative analysis is only one aspect of the complete research study and analysis of results. Findings cannot be considered valid without the qualitative experience to balance data collection and provide experiences to further explain or contradict the numbers. The qualitative analysis in this research study has captured the experiences and opinions of two teacher education pathways through university faculty, three school districts including principals and cooperating teachers, and two pathways of teacher candidates embarking on student teaching in the subsequent semester of university level coursework.

University faculty described similar formats for teaching content and methods of instruction to classrooms of teacher candidates. Faculty with varying perspectives shared perceptions of pride and confidence in teacher candidates regardless of pathway. Faculty members described evidence justifying learning is taking place for the purpose of preparing teacher candidates to student teach. Unfortunately, this is where the similarities stop for university faculty teaching in separate pathways to teacher education. As faculty members spoke of their prospective teacher candidates, a sense of animosity or pride would radiate through the room. The researcher, sensing the provoking of such emotion, was careful to not aggravate or encourage, but remain neutral through discussion of each pathway and learning outcomes. Traditional pathway university faculty exhibited frustration with a lack of time to devote to teacher candidates. The aspect of time continued to sneak back into the conversation. Elizabeth shared, “We only meet two days
a week, but I think that the second day that we meet, which is in the field, really helps us
to get to know the students better, and their strengths and weaknesses, and when we
actually see them trying to perform in the classroom.” Elaine also said, “Because we only
meet two days a week, sometimes we think we have a strong teacher candidate, and then
we get out into the schools with the students and we find out there may be many needs.”
These university faculty members clearly want to be seen as an equally viable pathway
for serious candidates to study the art of teaching.

Through conversations, these faculty members continued to praise the traditional
pathway, almost justifying a lack of experience through course content and assignments.
Focus group sessions with traditional faculty seemed to continually compare the two
pathways, revealing possible assumptions that the traditional pathway is not as worthy as
a teacher education program as the clinical pathway has become. Lora included, “My
traditional class is doing much more lesson planning than my clinical pathway because
there’s less application opportunity.” Elaine shared, “students do not truly understand
what a measurable verb is and then making the connection to the assessment. Just when
you get them to do the objective, then they have an assessment that does not match. They
don’t know how to specifically and formally measure how many of the children got it and
how many did not. That’s PDS, that’s clinical block, that is every class. It’s very hard to
begin with the end first, knowing what to assess and then get your objective. That’s really
hard.”

University faculty members expressed the lack of time in the field affected the
ability for teacher candidates to implement their lesson plans to an authentic audience,
resulting in inexperience prior to student teaching. Lora, providing her own experiences
with the traditional pathway lesson implementation process, did not hesitate to include, 
“At the junior level, limited, if any. There is just not an opportunity for that application 
experience.” The concept of providing authentic teaching experiences to junior level 
traditional teacher candidates is rare. Many of the traditional teacher candidates do not 
have teaching experience prior to the PDS semester of coursework. This has an adverse 
affect on traditional candidates as they enter the PDS semester. Not only do these 
candidates not know if they want to teach, but they do not have experience with knowing 
how to implement a lesson plan, how to evaluate the effectiveness of a lesson plan, how 
to follow a lesson plan and adapt to the abilities of the children they are in front of. 
University faculty members teaching in the traditional pathway to teacher education are 
at a disadvantage when it comes to preparing teacher candidates for student teaching. 
These faculty members recognize the challenge; these faculty members see the difference 
in candidates. Furthermore, faculty members teaching in the traditional pathway express 
a lack of equality in pathways, sharing concern for teacher candidate experiences. Such 
responses from traditional faculty members to support the concern include Emily’s 
statement, “We have some students who have not ever been in front of live kids. They’ve 
only done role-playing, and this is their first semester of their senior year. That needs to 
be changed dramatically if we’re to continue to have a traditional pathway.” Elaine 
shared, “My PDS students will say, this is their first time. So, this is truly their first time 
working with children.” Ella then included, “When I take them out, I put them in groups 
so that they have support with each other, but there are a number of them that are just a 
basket case the first time they go out there because they have to face real children.”
These same university faculty participants shared their opinion of change. Faculty members want what is best for the teacher candidates and they are not afraid to share their ideas. Elaine’s comment was, “These traditional teacher candidates need extended time out in the field. They need some experience before entering their senior block, PDS.” Elizabeth mentioned, “I think the traditional students need some help writing lesson plans before PDS. Sometimes when they get to PDS, that’s the first time they write and implement a lesson plan.” When a lack of resources creates a different experience for teacher candidates, and university faculty identify the concern, a change needs to occur. If university faculty were the only participants to identify this concern, then the theme would not be viable. What is disturbing is how this lack of time is obvious to all stakeholders involved in the education of these traditional teacher candidates.

Principals have clearly seen the difference in time and have related preparedness to student teach based on time and experience in the field. Over and over, when discussing the two pathways with school districts, many vocalized wanting only clinical teacher candidates. The response continued to be how clinical candidates had more time in the field, more experience with children, more time to collaborate, more time to devote to learning, and more time to become invested in children’s learning. Jenna shared, “When they’re a PDS student, they just aren’t in the building long enough.”

One group of principals shared a different perspective related to the preparedness of teacher candidates. Conversations with this group of participants revealed a confidence in the traditional teacher candidates and lack of preparedness to student teach in clinical teacher candidates. The results from this qualitative discussion required revisiting by the researcher, for the purpose of making connections to other principal experiences.
Findings from the focus group transcript revealed a strong connection to university faculty teaching the traditional teacher candidates in the field, rather than a focus on the teacher candidates themselves. Experiences between principals and the university faculty appeared to skew the results, where principals suggested clinical faculty are not as present in the school buildings and are not as available to support the candidates as those university faculty assigned to the traditional pathway.

The opinion was communicated through comments such as Tim’s, “Teachers like the traditional pathway because of the support. I think we have more support in our building with the PDS from the university with their professors than we do with the clinical. Those PDS professors are in the building while the kids are there the whole time. They’re interacting with the kids and teachers, and the staff. The teachers like that part of the supervision part from the university.” Tess added, “I really don’t see that much difference in their knowledge before student teaching. I would say our PDS students are probably stronger candidates. Tami shared, “I don’t personally see a difference as far as the preparation of students. Tim added, “I’d say that if I had to go a certain route right now, I would probably rather take on the traditional kids rather than the clinical just because I think that the level of supervision or the support from the university there is stronger for those kids. I just think it’s to our teachers’ advantage and the people doing the work in the building from the university to have that support there on hand.” These comments from the one focus group indicate strong relationships between the university traditional faculty and the school district.

Although exciting to see such collaborative and supportive relationships between districts and the university, the focus group appeared to lose focus on the preparedness of
the teacher candidates. The focus group developed a new focus on the availability and support seen from administration in the building in relation to the interactions between university faculty and teacher candidates. The findings from this particular focus group reveal that teacher candidates in the traditional pathway seem to require additional support and guidance in the field where clinical teacher candidates are expected to become confident in senior one, field placements.

Another perspective related to the availability of faculty in the field for the two pathways to teacher education appears to be a strain on clinical faculty to support and guide clinical teacher candidates in the field. Principals in the school district have observed a clear difference in the amount of time faculty members are available to coach and guide teacher candidates in the two pathways. The concern was derived through the focus group participant responses and a continued dialogue intended to focus on teacher candidate preparation. Tim suggested, “The biggest difference I see is the level of supervision from the college between the two programs.” Tess eagerly agreed and then added, “I did notice that difference. It was kind of on my radar. In those first couple of years with the clinical we were in discussion constantly. It was almost as if they were a part of the staff. And then this year it seems very different.” Tess further shared, “It’s just that the traditional faculty and I have had so many discussions and maybe it’s because of the type of program or the level that the clinical kids are in that there’s not as much supervision.” The discussion from this group of principals was supported through clinical faculty focus group discussion as well. Findings have revealed the stress of covering two pathways and providing teacher candidates enrolled in separate experiences with
university support and guidance. Sam, a clinical faculty member, stated, “Our first lesson, because of sheer numbers, we had to be creative, and so we decided to do peer coaching.”

A dilemma arising through data collection has involved principals and cooperating teachers and a difficulty in determining if the pathway makes the teacher candidate or if the teacher candidate makes the pathway. In other words, when asked whether the traditional pathway or the clinical pathway seems to prepare teacher candidates better for student teaching, many participants found it difficult to generalize to a pathway. Tess shared, “You know, I think that they’re both fairly well prepared. I think that could vary from year to year based upon which route the student chooses to take. I don’t think it’s a result of the program, just the quality of the students that went that route this year.” Tami added, “It’s what is passionate in that person. The bottom line is what they want to get out of the experience and how much they are willing to give back because they can learn so much during this time even though they are overwhelmed because they are learning so much. It’s how you take that in and what you want to do with it.”

In addition to these few principal responses, some cooperating teachers also found it difficult to separate specific situations with teacher candidates to a more general reflection of a pathway’s ability to prepare teacher candidates. Michelle shared, “I think it depends on the person. You could get a willing person that’s in the traditional program that can walk into a classroom tomorrow and be great.” Ashley really struggled with determining preparation to teach based on traditional coursework. Ashley stated, “I think overall, that with the clinical pathway, the students are much more prepared. I mean, I think it’s probably a student by student, case by case. I don’t know that I’ve never had an
experience where I felt like one was just truly not prepared, I think that’s very rare. I think clinical students become professionals sooner than traditional students.” Tara shared a similar thought by stating, “Clinical and traditional students aren’t always equally prepared. I think it’s just the confidence level of the different students. It just depends on maybe how much experience one has had over another.”

Qualitative data collection revealed thoughtful consideration of preparedness in relation to traditional and clinical teacher candidates. The struggle to identify one pathway as more prepared than another provides justification that both pathways are competitive and seen as viable options for teacher education. However, another perspective could be tied to the history of teacher education at UCM and a personal connection to the traditional pathway to teacher education from many of the participants in the study. Admitting a lack of preparedness or readiness to student teach upon completion of the traditional pathway could create a concern among UCM alum sparking the question of how prepared they might have been prior to their own student teaching experiences. These few responses could not become a theme in the research due to being a small representation of the participant population.

Although some participants found it a challenge to determine the readiness to student teach based on pathway experiences, many participants did not have difficulty with identifying a stronger pathway to teacher education in relation to experience, confidence, and overall preparedness. In fact, university faculty identified a lack of experience and weaknesses in reflection in regards to the traditional pathway. Further, principals have found clinical teacher candidates to be better candidates for future employment within the school district. Cooperating teachers not only identify clinical
teacher candidates as more confident, but also feel more comfortable sharing the classroom with these candidates. Most important are the experiences of teacher candidates in the two pathways. If university faculty, principals, and cooperating teachers all observe noticeable differences between the two pathways to teacher education, do teacher candidates also recognize noticeable differences between their course experiences and that of their peers in a different pathway?

As quantitative results revealed, traditional and clinical teacher candidates self-assessed as confident and prepared to student teach when not evaluated by university faculty. When evaluated by university faculty, clinical teacher candidates revealed higher levels of readiness to student teach. The quantitative analysis does not describe the experiences and opportunities provided to teacher candidates in either pathway, expanding on what makes a teacher candidate ready to student teach as discussed prior to the student teaching semester of coursework.

Qualitative discussion revealed recognition of differences, starting with classroom experience. Traditional teacher candidates repeatedly mentioned a lack of early experiences in the classroom, discussing the inability to implement written lesson plans. Early discussion with traditional university faculty revealed a strong lesson-planning component built into traditional coursework to compensate for the inability to implement plans to children. Teacher candidates enrolled in the traditional pathway did not describe a belief of being prepared due to experience with lesson planning. In actuality, teacher candidates were not able to understand how to easily implement lesson plans and adapt for classroom management and differentiated instruction due to inexperience with implementation. Traditional teacher candidates described this lack of experience. Rose
added, “I feel like we don’t get enough applicable experience.” Roberta discussed, “The information we were learning in lectures is more stuff we can’t really learn unless we are seeing it. Like classroom management for example, it’s something you can’t just read about. The book can tell me to clap my hands twice to get the students to be quiet, but realistically, I’m not going to do it that easily. Reading it and doing it are completely different because not all my students are going to respond to clapping your hands.”

Others described inexperience in necessary grade levels where teacher candidates are fearful of being placed. Rebecca said, “We should be teaching multiple lessons in each content area.” Reagan added, “And then do various grades. This was the first time I’ve ever been in anything as low as second grade. Everything else I’ve been put in was higher. I’ve been in third, fourth, and fifth grade all the time and then was put in second grade for PDS. They were so little; I didn’t know what to do with them. It’s been a whole new learning experience because I’ve never had to deal with that grade. I’ve read about it in textbooks, but there’s a whole difference between reading about it in a textbook and talking about it in class discussion, and seeing it being implemented.” Teacher candidates continued to share similar thoughts and concerns when discussing future teaching experiences. The traditional pathway is not preparing teacher candidates to the ability of the clinical pathway.

A few teacher candidates have had experiences in both pathways and self-identified themselves through focus group discussion. These few teacher candidates were able to share a perspective different than their peers. The teacher candidates with experiences in both pathways reiterate the thought that teacher candidates in the traditional pathway are not as prepared to student teach as the clinical teacher candidates.
It would be difficult to capture these experiences without teacher candidates having been enrolled in both pathways. It is difficult to compare one’s experience with another without complete understanding of that second opportunity. Therefore, those teacher candidates with experiences in both pathways provided additional differences and brought discrepancies to the surface for peers during focus group sessions. Ruth shared her thoughts by saying, “Since I’ve been in both, I would say that the clinical has a lot more demand to it and a lot higher expectations, and more experience. Traditional comes with less time in the field but still quality teaching from the instructors.” Rian added further, “Having gone through clinical and traditional, I would choose clinical over traditional any day. I just feel the stuff I learned in clinical is what’s going to get me through student teaching versus what I learned in traditional. I know there isn’t anything wrong with that; I just feel that with clinical, I’m way more prepared.”

Based on such strong and overwhelming discussion identifying the clinical pathway as preparing teacher candidates better to student teach than the traditional pathway, new concerns arise as to the future of teacher education at UCM. Principals shared a concern related to traditional teacher candidate placements. With overwhelming evidence and clear observations of the interactions and collaboration of clinical teacher candidates, principals described the struggle of placing traditional teacher candidates in the classroom.

Principals and cooperating teachers see significant differences in preparedness and do not want to spend additional time preparing traditional teacher candidates. Megan explained, “When Senior 1 students come in, they are more prepared than traditional students. They are coming in at the same level or higher than what my traditional students
have been. I think it’s a matter of their time in the classroom. It’s hard to talk about behaviors they are seeing in a child or what is happening with a student when they can’t see the whole day. We teach about the whole child and they should be able to see the whole picture of a child’s day. They need to talk about a whole child and see a whole child in the day.” Ava added, “It’s harder to get cooperating teachers to volunteer to host traditional students; they do prefer the clinical pathway candidates. I’m not saying there aren’t great teaching candidates coming through the traditional pathway. I’ve seen some really good students come through the traditional pathway that would have been fabulous through the clinical pathway as well. I just feel more confident when I host clinical students versus traditional.”

The results revealed through quantitative and qualitative data collection significantly impact teacher candidates regardless of pathway to teacher education. This research study supports the concept that the clinical pathway to teacher education provides experiences to teacher candidates affecting preparedness to teach. Further the discussion raises the concern of how the ECEL department can continue to offer the two options for teacher education, knowing that teacher candidates are not equivalently ready to student teach prior to the student teaching semester of coursework. This new dilemma should be at the forefront for the ECEL department in regard to offering the two pathways as opportunities for certification in teacher education.

**Recommendations**

After revealing experiences related to the traditional and clinical pathways to teacher education, three options are provided as consideration in relation to the future of the ECEL teacher education program and the offering of two pathways to teacher
education. Embedded with options are recommendations to strengthen the opportunity related to the results of this study. Each option offers opportunities for enhancing the learning experiences of teacher candidates, regardless of pathway to teacher education, keeping the best interest of all learners in mind.

Option One

In the best interest of all learners involved, and based on significant evidence, the researcher recommends building the ECEL teacher education program on the clinical pathway. With the overwhelming evidence presented as to the preparedness of teacher candidates enrolled in the traditional pathway to those enrolled in the clinical pathway, it appears the more progressive clinical pathway is the best model for preparing candidates to student teach. All teacher candidates are obligated to the best educational opportunity available.

Developing one program for all teacher candidates has repercussions for some transfer students as well as those teacher candidates searching for a flexible program design. Choosing to build one program based on the clinical model has many more benefits, outweighing the inconveniences to a small pool of teacher candidates.

The creation of one teacher education program will provide all teacher candidates more similar learning experiences with equivalent time in the field. Teacher candidates will all have early opportunities to create lesson plans for the purpose of implementing to small groups of children and gaining authentic experiences with classroom management. All teacher candidates will be offered extensive time in the field to collaborate with cooperating teachers through junior and senior year coursework. Teacher candidates will all have opportunities to implement lesson plans across content areas, and be able to
discuss and reflect with cooperating teachers in the field. All teacher candidates will subject to early intervention strategies based upon earlier experiences in the field, rather than not being seen as a possible candidate for a different program.

The development of one clinical model will provide benefits to university faculty load and distribution of courses including field experiences. All ECEL teaching faculty will be able to focus on the one pathway to teacher education, allowing for more time with teacher candidates in the field. This change will keep faculty from not being stretched to meet teacher candidates in the field. University faculty will be assigned smaller groups of teacher candidates, will be able to devote more time to the field experience placements, resulting in stronger relationships with students, cooperating teachers, and districts. Developing one program to teacher education resolves university traditional faculty perceptions of being viewed as a subpar pathway to teacher education.

Choosing to model the ECEL program based on the clinical pathway to teacher education will ease concerns from principals and cooperating teachers in partnering school districts. Principals will expand the pool of quality teacher candidates when searching to hire for future classroom teachers. Cooperating teachers will be more willing to accept any ECEL teacher candidate for field placement, no longer considering which pathway the candidate originates from. Through this option, cooperating teacher concerns that traditional teacher candidates are not as prepared or as desired to mentor during student teaching will dissolve. Further, the pool of available school districts where clinical teacher candidates are accepted for student teaching will expand, offering additional options and opportunities for the senior year of coursework.
**Recommendation one.** To address teacher candidate and university administration concerns, an action plan will be developed to actively engage community colleges and high schools offering dual credit in the teacher education pathway to teacher certification. The College of Education will communicate with partnering community colleges to determine what courses will need to be taken once enrolled at UCM in the teacher education program. Partnering community colleges and the UCM College of Education will be able to consider agreement terms for transferable courses. The articulation agreement is able to specify specific courses to be accepted into the field of study plan. Further conversations with school districts will outline what the UCM College of Education teacher education degree program entails, including benefits to this pathway. These early conversations will assist with the smooth transition to one pathway to teacher education and will prepare teacher candidates for a graduation plan including early authentic field experiences and greater identification with being ready to student teach prior to the student teaching semester.

**Recommendation two.** In recognition of the data analysis and in consideration of the relationship theme addressed, a second recommendation is suggested to assist with Option One. The ECEL department is encouraged to create stronger networks with the partnering school districts to strengthen the collaborative nature of the relationship between university faculty and school administration. Through the discussion in this research, an obvious conflict arose within one school district with strong ties to traditional faculty members and the presence of the pathway in the school buildings. Foreseeing the obstacle in implementation of one pathway, collaborative ventures are encouraged and proposed as an integral aspect of this first option. Collaborative
relationships are encouraged through content discussions and sharing of lesson plans and experiences.

Option Two

A less extreme option, where the end result is similar to discontinuing the traditional pathway to teacher education, is to continue to run the traditional pathway only as an alternative for teacher candidates who have extenuating circumstances that cannot be accommodated in the clinical pathway. Such circumstances where candidates qualify for the option of enrolling through the traditional pathway can include late transfer students and part-time students with full time jobs and/or families where school cannot be entered into as a full-time experience. Candidates who are approved for this traditional pathway will be enrolled similarly to an individual plan of study where a graduation plan is developed and followed based on personal situations.

The opportunity to opt out of the clinical pathway and select the traditional pathway will provide most teacher candidates similar learning experiences with equivalent time in the field. Teacher candidates self-selecting the traditional pathway will be provided literature related to readiness to student teach, understanding the pathway does not support high levels of experience in the field prior to student teaching. The purpose of this safe recommendation is to make clear to all teacher candidates the many advantages to clinical pathway coursework in relation to the traditional pathway.

The option to phase most teacher candidates to the clinical pathway will provide many benefits to university faculty, although not as significant as recommendation one, in relation to faculty load and distribution of courses including field experiences. More ECEL teaching faculty will be able to focus on the clinical pathway to teacher education,
allowing for more time with teacher candidates in the field. However, unpredictable numbers of faculty will be required to be devoted to the traditional pathway, making semester schedules difficult to predict and plan for. Further, by not eliminating the traditional pathway to teacher education, but providing the opportunity to choose the pathway meeting specific criteria, does not completely resolve university traditional faculty perceptions of being viewed as a subpar pathway to teacher education. Rather, by choosing this recommendation, the pathway will be scrutinized further by university faculty, principals, cooperating teachers, and peer teacher candidates.

**Recommendation one.** When choosing this option, an action plan will still need to be developed to actively engage community colleges and high schools offering dual credit in the teacher education pathway to teacher certification. The purpose of an action plan with this recommendation is to prepare future teacher candidates to enter into the clinical pathway to teacher education at UCM without major repercussions. The College of Education will communicate with partnering community colleges to determine what courses will need to be taken once enrolled at UCM in the teacher education program to create a seamless transition from community college experience to the university setting. Partnering community colleges and the UCM College of Education will still find it necessary to consider agreement terms for transferable courses. The articulation agreement will specify courses to be accepted into the field of study plan providing for the transition to the UCM teacher education program. Conversations with school districts will confirm a proactive plan to outline what the UCM College of Education teacher education degree program entails, including benefits to the clinical pathway, and the option for an alternate traditional pathway plan of study.
Option Three

The researcher finally recommends a third option based on the research, results, and discussion. The third option requires creative thinking and additional support from university faculty. The third recommendation is to continue to allow open enrollment in both the clinical and traditional pathways to teacher education at UCM in the College of Education. In order to make this option ethical, with equivalent learning experiences, there will be a general understanding that additional resources need to be devoted to each program in order to make the two pathways more equivalent in instruction and experience. The two pathways cannot continue to be implemented as current results reveal. The option suggests two pathways can still be available to teacher candidates, but not as long as teacher candidates are not provided equivalent learning experiences leading to differing perspectives of preparedness or readiness to student teach prior to the student teaching semester of coursework.

Recommendation one. This option recommends additional teaching faculty in the clinical pathway to supervise teacher candidates in the field. As revealed through focus group transcriptions, clinical university faculty shared concerns of high numbers of teacher candidates and lack of time to observe all teacher candidates in the field. Research has revealed a need for additional faculty in the field for the purpose of supporting teacher candidates. In addition, districts have come to rely on the collaborative effort between cooperating teachers and university faculty. Additional university faculty members are needed to strengthen the partnerships and relationships with partnering school districts. Possible exercises include scheduling collaboration among university
faculty and cooperating teachers and developing learning experiences for teacher candidates along side cooperating teachers.

Another opportunity to strengthen relationships and work collaboratively with cooperating teachers and district principals is through the ECEL annual Advisory Board meeting. The meeting is designed to bring partner school district personnel together to discuss and collaborate with university faculty members. Typically, the meeting agenda includes discussion related to state certification changes, areas where school administration identify a need for university instruction to be strengthened, and an over discussion of the vision for the ECEL teacher education program. Collaborative discussions specific to the clinical pathway and instructional opportunities are recommended to be included in the agenda.

**Recommendation two.** With this option, and in consideration of the clinical pathway, additional clinical field experiences will need to be explored and considered to alleviate saturation in specific school districts partnering with UCM. Through discussions with school districts, many schools struggle to find classroom placements for the growing number of teacher candidates. Further, some districts recognize an inability to hire all clinical teacher candidates placed within the district. Additionally, some traditional teacher candidates expressed reasoning for choosing the traditional pathway was related to student teaching placement. By expanding the student teaching placement partnerships, clinical teacher candidates will be provided additional choices in relation to student teaching.

**Recommendation three.** With this third option, decisions need to be made in consideration of the traditional pathway to teacher education. When selecting this option,
and choosing to continue with the traditional pathway to teacher education, resources needed revolve around consistent early experiences in the field. This pathway does not offer the same quality or quantity of early learning experiences in field placements with university support, as the clinical pathway. Therefore, specific junior level courses are suggested to include multiple opportunities for lesson implementation, reflection, and collaboration with cooperating teachers. As the pathway is implemented currently, these teacher candidates receive multiple opportunities for lesson planning through the writing and reflection of prompts and peer implementation. Teacher candidates are supported heavily in the college classroom by university faculty during the learning and understanding of the lesson plan writing process. These same teacher candidates are provided feedback from university instructors to revise written plans. However, these same teacher candidates are not provided sufficient opportunities to implement these written plans in authentic field experiences. Therefore, teacher candidates in the traditional pathway receive support and learning of the lesson planning process without the opportunity to implement and understand how to prepare for classroom management, differentiated instruction, and assessment of learning. The researcher proposes additional supervised field experiences for junior-level teacher candidates in the traditional pathway. Also suggested with this third recommendation is increased field time for PDS students and faculty in the traditional pathway to expand the required time in the traditional PDS semester and create equivalent time to that of the clinical pathway. These additions to the traditional pathway will boost university faculty confidence in both pathways, will provide teacher candidates additional experiences in the field to boost confidence and lead to higher levels of preparation, and will show cooperating teachers
and partnering school districts that teacher candidates from both pathways are more equally prepared to student teach.

**Limitations and Direction for Future Research**

Limitations are expected within research studies. This research study was not the exception to limitations. Limitations to this research include time constraints for data collection, lack of quantitative traditional pathway data to analyze, and an inability to compare responses and data analysis from the semester prior to student teaching to the semester after student teaching.

This research study was designed with one university setting in mind, comparing two pathways to one teacher education certification program. The study was specific to the university, the department, and the program in question. The research design allowed for participants in local school districts and included teacher candidates from the two pathways for the purpose of gathering multiple perspectives related to the research study. This study cannot be replicated in other settings with the expectation of similar results and recommendations.

As with any research study, time is a limitation to the research process. The researcher was able to gather perceptions of preparedness or readiness to student teach prior to the student teaching semester from teacher candidates at the end of the senior one semester. Additional time would allow for an in-depth case study, following teacher candidates from the senior one semester through the student teaching semester of coursework. Unfortunately, time was not available to extend the study into a second semester. This limitation to the study is extended with an inability to compare responses
and data analysis from the senior one semester of coursework prior to student teaching to the student teaching semester, and then on to the semester after student teaching.

Another limitation to the research study was the lack of quantitative traditional pathway data to analyze. Due to the newly developed clinical pathway to teacher education, absorbent data collection has been underway for the course of the past year. In addition, traditional pathway data collection has not occurred in recent years, leaving a gap in the available Teacher Efficacy and Confidence survey results. An additional limitation to the quantitative self-assessment through use of the Teacher Efficacy and Confidence survey results pertain to self-assessment practices. Teacher candidates tend to self-assess higher prior to teaching experience. Therefore, traditional teacher candidate survey results revealed higher levels of confidence and efficacy.

The researcher facilitating this study is a faculty member hired to teach in the UCM ECEL department. The relationship the researcher has with faculty, teacher candidates, and local school districts is a limitation to the implementation of this study and the analysis of results. Researcher bias was accounted for throughout research work.

Future research opportunities are revealed through limitations to the research design and results of the study. Future research opportunities lie within the experiences of teacher candidates during the student teaching semester of coursework. Experiences before this point are superficial, as to what seems like readiness or preparedness cannot actually be determined until the experience one is preparing for has been experienced. Therefore, a future research design can include gathering perspectives of teacher candidates during the student teaching semester of coursework. The research design can
provide opportunities to gain specific examples of readiness as compared to the senior one semester of coursework and emerging themes related to preparedness.

Another research opportunity encompasses the aspect of self-assessment as addressed through quantitative limitations. Confidence and Efficacy surveys will be administered at the beginning of coursework in the traditional and clinical pathways during the senior one or PDS semester of coursework. The surveys will be administered again after teacher candidates have been in the field for one month. Results will compare confidence and efficacy self-assessments prior to field experience and after gaining field experience.

Other research opportunities include the incorporation of the most recent MoPTA experience for Missouri Teacher Candidates attaining teacher certification. MoPTA instrumentation can facilitate the analysis and findings of preparedness or readiness to student teach. Further research can extend into the first year of teaching after graduation. The research study can support and extend data analysis and findings through comparing MoPTA tasks during the student teaching semester to those self-assessments and qualitative discussion during the first year of teaching upon graduation. The possible research study will reveal perceptions of readiness carried throughout the senior year of coursework and connecting to the first year of teaching upon graduation.

**Summary**

Although this research study encountered limitations including time constraints, a lack of available quantitative data to analyze, and an inability to compare responses and data analysis from the semester prior to student teaching to the semester after student teaching, the study provided strong evidence suggesting a need for change within the
Elementary and Early Childhood (ECEL) program at the University of Central Missouri (UCM). The study provided descriptions of experiences in relation to university faculty, principals, cooperating teachers, and teacher candidates in the traditional and clinical pathways to teacher education. The data analyzed supports the need for a change within the context of one university setting with the intent of providing ethical and equivalent learning experiences to all teacher candidates in the program. The results derived from this study provide a basis for future research opportunities to evaluate the effectiveness of changes to the program. In addition, future research will continue to model and guide the teacher certification program.
SECTION FIVE

CONTRIBUTION TO SCHOLARSHIP
Kristien Zenkoz, Senior Editor,

Please accept this article submission for review in the upcoming issue of School-University Partnerships. The attached article reflects the theme, “What is PDS” and offers new insight into the future of the PDS model. I understand your organization’s commitment to advocating for collaborative ventures across the PreK-12 and university communities as vehicles for the discovery and sharing of knowledge that shapes educational best practices, and I want to assure you of the fit with my manuscript. This submission specifically honors the voices of school-based and university-based educators, as well as teacher candidates and their experiences with PDS. Further, this submission provides understanding of the PDS origin and the successful evolution through a new partnership model.

This article is based on a qualitative research design, for the purpose of answering the research question, “To what extent are university educators, principals, and cooperating teachers able to identify dispositional and academic differences between teacher candidates within the traditional and clinical pathways prior to the student teaching semester of course work?” To narrow the scope of the research, the sub question for this research is, “To what extent do University faculty, principals, and cooperating teachers perceive teacher candidates are able to collaborate with assigned cooperating teachers and University faculty as a team?”

Please review this submission in relation to the Option 1 article type, adhering to the 15-25 page format. The article reviews extant literature and adds to the future of teacher education through new insights and understanding of field experience.
As author, I am an Assistant Professor at the University of Central Missouri. I teach in the Elementary and Early Childhood Department, with a focus on early childhood education. Prior to accepting my current position in the program, I held the position of director of a lab-based pre-school program at the University for eight years while teaching preschool-age children for ten years. My most recent accomplishment has been the collaborative development of the Early Childhood Clinical pathway to teacher education. My research focus is to move field experience forward, encouraging and facilitating conversations related to collaborative relationships in the school and university settings.

Thank you,
Natalie Tye, Ed. D.
Assistant Professor
Elementary and Early Childhood
University of Central Missouri
Lovinger 3300
(660)543-8676
ntye@ucmo.edu
I teach in Early Childhood Education. Previously, I was the director of a lab-based preschool program at the University for eight years while teaching preschool-age children for ten years.
Abstract/Keywords/Essentials

This article is derived from a qualitative study designed to evaluate the traditional PDS and clinical Senior One semester of coursework in relation to teacher education at one university. Qualitative focus groups provided multiple perspectives pertaining to collaboration in the field. Individual perspectives supported and enhanced data collection through thick, rich, descriptions related to the two pathways to teacher education. The conceptual framework includes Bandura’s Social Development Theory enhancing the significance of social interaction. The Constructivist worldview guided research related to the problem, allowing participants to interpret their own understanding and interpretation of their experience through active learning (Bredekamp, 2014; Creswell, 2012; Khalid & Azeem, 2012).

Key Words
Collaboration, time, relationship

NAPDS “essentials”

NAPDS essentials addressed within this manuscript include:

1. A comprehensive mission that is broader in its outreach and scope than the mission of any partner and that furthers the education profession and its responsibility to advance equity within schools and, by potential extension, the broader community;
2. A school–university culture committed to the preparation of future educators that embraces their active engagement in the school community;
4. A shared commitment to innovative and reflective practice by all participants;
5. A structure that allows all participants a forum for ongoing governance, reflection, and collaboration
Introduction

This article sets forth to describe the history of the Professional Development School (PDS) at one university and the movement toward continually innovative practices in the model to enhance teacher candidate learning experiences. Further, the discussion will highlight a new version of the PDS model and the collaborative advancements of teacher candidates in relation to preparedness to student teach.

Professional Development Schools were designed to introduce teacher candidates to a vast array of teaching models and experiences in real world settings with opportunities to engage in conversations with successful educators (Cochran-Smith, 2006; Dolly & Oda, 1997; Garland, 1982). An additional benefit from utilizing the field component has become the collaborative relationship between the university setting and the public school setting (Cochran-Smith, 2006). Further, the PDS model was meant to become the promoter for restructuring and rejuvenating the field of teacher education (Darling-Hammond, 1994).

The PDS model was developed in 1996 as the result of a federally funded Goals 2000 grant through the Department of Elementary and Secondary Education (DESE) and made available by the Central Regional Professional Development Center (Bell & Morrow, 1998). The purpose of the grant was to enhance school partnerships to develop effective teacher candidates, increase student achievement, create collaborative relationships with school districts, and to integrate communication arts across the curriculum (Bell & Morrow, 1998). Further, the purpose of implementing a PDS model was to provide an ideal education program for elementary students, a clinical setting for teacher preparation, continuous professional development experiences for university
faculty and district staff, and research opportunities related to exemplary practice (Bell & Morrow, 1998).

The model was designed for teacher candidates to be assigned to elementary classrooms, assisting the classroom teacher for one to two hours each week (Bell & Morrow, 1998). Four PDS sites were created, developing collaborative relationships with nearby school districts (Bell & Morrow, 1998). Initial results derived from collection methods during the first year of the program concluded the PDS partnership was perceived as increasing learning experiences for students and teacher candidates (Bell & Morrow, 1998). Although many benefits were clearly identified by implementing the PDS model at the university, areas for improvement were also highlighted. Suggestions for improving the model included better communication between the school district and university, as well as increased communication between university faculty and teacher candidates (Bell & Morrow, 1998). Also discussed was a lack of true subject and teaching integration among university faculty. University faculty separated class time by subject and instructor focus, teaching in isolation rather than collaboratively (Bell & Morrow, 1998). The purpose of field-embedded work relevant to teacher education has been to introduce teacher candidates to a vast array of teaching models and experiences in real world settings with opportunities to engage in conversations with successful educators (Dolly & Oda, 1997).

Recent contributions to educational programming have offered new insight related to the traditional PDS model of field integration in traditional course work. Consequently, this first evaluation of the PDS model in 1998 has become the validation for the invention of the clinical pathway at this same university. To date, the PDS model
continues to find success in public schools and university programs near the university (N. Nickens, personal communication, August 24, 2015). However, the PDS model remains as an alternating schedule between one class period on campus and one day in the field placement with lower levels of interaction between faculty, staff, and teacher.

**Conceptual/Theoretical Framework**

The Constructivist worldview will guide research related to the problem, allowing participants to interpret their own understanding and interpretation of their experience through active learning (Bredekamp, 2014; Creswell, 2012; Khalid & Azeem, 2012). Further, Bandura’s Social Development Theory will provide the framework outlining the importance of social interaction. Social Development Theory is the catalyst for social learning and the development of a clinical education program. Learning occurs through collaborative efforts between teacher candidates, cooperating teachers, and university faculty (Atkinson & Pugsley, 2005; McCallister et al., 1997; Rigelman & Ruben, 2012). According to Bandura (1986), social learning attributes affect planning for the future and the acting out of such plans. The knowledge gained from teacher candidate learning experiences and social construct shape understanding of the world surrounding those experiences and contribute to pedagogical knowledge (Bandura, 1986; McKenna, 2009).

**Scholarly Review**

In 2010, the NCATE (2010) report included, “teacher education has too often been segmented with subject-matter preparation, theory, and pedagogy taught in isolated intervals and too far removed from clinical practice” (p. 2). As Darling-Hammond (2006) eludes to a disconnect between gaining formal knowledge in the university classroom and applying that knowledge later in field work, many studies have supported this belief by
finding teacher candidates better prepared to apply theoretical knowledge and implement meaningful learning experiences with students when course work is delivered along with an interwoven field component (Baumgartner, Koerner, & Rust, 2002; Denton, 1982; Denton, Morris, & Tooke, 1982; Henry, 1983).

With the development of new accrediting criteria and a wave of newly hired teachers laying claim to an overall feeling of unpreparedness for teaching upon graduation, educators have adapted the medical clinical model of instruction into teacher education programs (Alba & Pennypacker, 1972; CAEP 2013 Standards, 2013; Goodwin et al., 2014; Green, 2010; Lord, 1997; NCATE, 2010). The basic reasoning behind the medical clinical model is that social life is a meaningful contribution to the application of theory (Atkinson & Pugsley, 2005; Creswell, 2012; Emerson et al., 2011; Merriam, 2009). Educators have chosen to adapt a clinical program with the intent of providing mentor teachers the ability to assist students through problem-based learning opportunities with an emphasis on testing and experimenting with ideas and concepts in a supportive learning environment (Anderson & Scamporlino, 2007; Dee, 2012; Green, 2010; Khalid & Azeem, 2012).

The clinical Senior One semester was first piloted in 2012 at the university (N. Nickens, personal communication, August 24, 2015). The initial intent and vision for the clinical Senior One semester was based on evidence that PDS was a wonderful model, providing enriching experiences to our students, but there is a greater need to integrate core subject area content into instruction and implementation (N. Nickens, personal communication, August 24, 2015). The clinical Senior One semester was not meant to replace PDS, but to provide a different perspective related to meaningful teaching.
experiences (N. Nickens, personal communication, August 24, 2015). In relation to the one Midwestern university where data were collected, the PDS semester is situated during the semester prior to student teaching and allows for one half to one full day of experience in the field each week. The parallel, newly created clinical Senior One semester of course work allows for two full days of experience in the field each week.

**Method**

The research question pertaining to this study is, “To what extent are university educators, principals, and cooperating teachers able to identify differences in relation to collaboration between teacher candidates within the PDS and Senior One pathways prior to the student teaching semester of course work?”

**Qualitative Analysis**

Qualitative data were derived from focus groups with teacher candidates enrolled in course work in each pathway, principals from local school districts, cooperating teachers from the surrounding community, and University faculty charged with mentoring teacher candidates enrolled in each pathway (Krueger & Casey, 2009; Merriam, 2012). Transcripts were coded and reviewed for the purpose of developing themes (Krueger & Casey, 2009; Merriam, 2012). Themes emerged from data collection in the form of consistent patterns in dialogue and specific wording within transcription (Krueger & Casey, 2009; Merriam, 2012).

**Participants**

The semester prior to student teaching, traditional teacher candidates enroll in PDS while clinical teacher candidates enroll in Senior One course work. Using the department database, 36 teacher candidates were enrolled in PDS course work and 31
teacher candidates registered for Senior One clinical course work. These teacher candidates were invited to join separate focus groups in relation to their prospective pathway, where a discussion was facilitated based on focus group criteria.

University faculty members who personally taught courses embedded in either the traditional or clinical pathways, or currently teach in both pathways and have experienced teacher candidates from either the traditional or clinical pathways were invited to join separate focus groups. Focus groups were developed based on experiences with PDS, with Senior One, and with both semesters. University faculty members between the three focus groups equaled 14 participants.

School district principals from three partnering districts who personally experienced teacher candidates from both the traditional PDS semester and the clinical Senior One semester were invited to participate in the study. Eleven principals were included in data collection as their districts had housed teacher candidates enrolled in both the PDS and Senior One pathway over the past three years.

Cooperating teachers from the same three districts were also invited to attend focus groups for the purpose of providing individual experiences and perceptions of teacher candidates from both pathways. These cooperating teachers each had hosted teacher candidates from both pathways over the past three years.

**Results**

As I began the data collection process, I did not foresee specific differences in experiences between the PDS and Senior One semesters in relation to collaboration. Through results and analysis, a theme quickly appeared, shedding light on differences in experience for not only teacher candidates, but also for principals and cooperating
teachers in the field. What finally emerged were connections between cooperating teachers and teacher candidates in relation to either the PDS or Senior One semester pathway.

The theme entitled Relationships emerged from discussion related to collaboration, reflection, and feedback among university faculty, principals, cooperating teachers, and teacher candidates. Collaboration across focus groups and participants became synonymous with reflection. Many shared experiences where collaboration derived from reflection and reflection flourished within collaboration. Senior One participants discussed the two together, as if the two concepts could not be separated. PDS participants found reflection to be focused on feedback and collaboration to be defined as sharing lesson plan concepts.

**University Faculty Traditional PDS**

Collaboration between the cooperating teacher and the teacher candidate within the traditional pathway has been a challenge according to faculty comments. Many of the faculty members have found collaboration in this pathway to resemble scheduling and reviewing lesson plans rather than actual sharing and discussion. When collaboration or discussion has occurred in the traditional pathway, it has taken on different forms. Leslie found the following, “There have been instances, examples of students in the traditional who did form a really tight bond with the teacher. They were e-mailing and continue to e-mail and stay in touch with one another, but I think when you’re only dropping in for a half day a week, it’s difficult. You are focused on the students, and it’s a little bit more difficult. So much of the collaboration is through email, which is not a prime way of doing that. So I think it’s been strictly a function of the amount of time.” Elaine shared,
“My teachers conference with my students, and I don’t mean it’s sit down roundtable. It could be they’re walking to get the children, or they’re taking the children somewhere, or they’re doing it at recess. All of the cooperating teachers conference with my students, so, they’re working with them. They’ve done some co-teaching with the students too. Again, it’s a first step, but they are attempting it.”

**University Faculty Clinical Senior One**

Those faculty members in the clinical pathway focus group were able to provide descriptions of the collaborations taking place between cooperating teachers and the teacher candidates. Further, faculty members who have had experiences with both pathways were able to provide some insight into the experiences, relevance to teacher education, and access to a collaborative environment. The following descriptions of collaboration within the clinical pathway provide insight into the experiences of the clinical pathway teacher candidate.

Sam mentioned, “The majority of teacher candidates talked a lot about working with their grade level teachers and planning together. In the district we are in, that seems to be a really big deal, everyone has grade level meetings at the same time. I think they definitely saw the purpose of collaboration and how beneficial it is.” Sarah was able to contribute by including lesson planning collaboration examples by sharing, “Clinical teacher candidates are able to get into the schools much sooner and many times before student teaching. During these experiences, they are able to collaborate and reflect on their lessons continuously throughout the semester. Since they are able to be in the classrooms two whole days a week, they are able to discuss and collaborate all day long
about the lesson planning process. I know they collaborate during the teacher’s plan
times, before and after school.”

**Principals Traditional PDS**

Principals found it difficult to develop meaningful relationships or provide extensive opportunities for collaboration with the traditional PDS teacher candidates due to time constraints. Traditional teacher candidates are in the field for a much shorter timeframe than clinical teacher candidates and through discussion, the difference appeared to be noticed by administration. Jenna shared, “When they’re only there for a few hours a day, they don’t participate in collaboration. They literally are just watching and taking notes.”

**Principals Clinical Senior One**

When referencing those collaborative efforts with clinical Senior One semester teacher candidates, principals described a very different perspective than observed with the traditional PDS semester teacher candidates. Ava simply stated, “They are a part of our culture in the building. It’s just a fabulous collaboration.” Jenna, shared, “During the school day, there’s collaboration that takes place once or twice a week at minimum with the grade level team, along with before or after school and across grade level committees that the clinical students are able to participate in because they’re there for the full day. They get more comfortable in that environment, they might take more of an active role where they’re not just watching; they are actually participating.” Eric mentioned, “There’s a collegiality piece where they feel like they are part of a team. Their voice is heard as a clinical teacher candidate. The clinical block is innovated to the point where
they’re more confident in their actions when we’re collaborating. They are an equal member rather than a person sitting off to the side watching.”

**Cooperating Teacher Traditional PDS**

Further discussion among cooperating teachers confirmed a lack of connection between the teacher candidates and the cooperating teachers. Melissa was able to share, “We just don’t see them after school, before school, or during plan time. We just don’t have a connection.” Tessa contributed to the conversation by adding her experience as, “The PDS students just had to teach a certain day so I told them what lesson I was going to be doing in reading and then I talked back and forth about what might be a good lesson, or ideas for them. Then, they wrote the lesson plan and emailed it to me. I had to give them ideas and tweaks and then they would just come in and teach it.” Melissa described collaboration as occurring “through emailing and quick conversations, but mostly emails; maybe some afterschool type collaboration if that’s the time that the teacher candidates are there. Sometimes it happens before school if they come early, but it’s not as deep. It’s very minimal.” Ann shared her thoughts on collaboration, “I don’t think it happened with the PDS because I didn’t have the plan time to stop and talk to them and you can’t just stop and talk with kids. The timing and just the way it was set up didn’t allow us to collaborate. I didn’t have a plan time in the morning to talk with them.”

These comments led to weak relationships in field placements.

**Cooperating Teacher Clinical Senior One**

Relationships seemed to form naturally in the clinical pathway. Discussions related to lesson planning and reflection allowed for easy connections to learning. Andrea said, “I think the clinical pathway students, because they’re so comfortable with who
they’re with, we would just converse like two people sitting at a table. We were reflecting constantly throughout the day. It just flowed a lot better with the clinical. It was natural.” Ashley included, “I think also, in reflection, they’re not afraid to tell you if they didn’t think something went well because they get to know us a lot better. They get to know the whole team, the whole school, so much better. It’s so much more fluid.” Jessica mentioned, “When we collaborated, we would do so as a whole team and the teacher candidates were involved in that process. We would also collaborate after a school day to see what worked and what we needed to change.” Maggie included, “They want to be involved as a staff member, not just seeing themselves as visiting the classroom and leaving after a bit.” Alex mentioned her experience with clinical teacher candidates, “I feel more like a team with them, from the very beginning. It’s not like I’m the teacher and you’re the PDS student. I mean, you come in and you’re going to be in the room with us. We are the teachers.”

**Traditional PDS Teacher Candidates**

Traditional teacher candidates described uplifting and supportive discussion with cooperating teachers as collaboration during the PDS semester. Although not as collaborative as the clinical experience, these teacher candidates have come to expect this level of collaboration in the field. Roberta said, “You have to talk to your cooperating teacher that’s in the class. He or she tells you what they want. They tell you that they want your lesson over a certain subject.” Roxanne shared, “I actually lucked out because the teacher I worked with allowed me to sit in on a parent/teacher meeting. She allowed me to view an IEP, and let me get to know the students through their packets. They have packets of information for each student from previous classes. That’s how I got to know
all the student’s names. She wasn’t required to do that. She just offered a lot of information. Rebecca added, “I really liked how the classroom teacher would reflect. She would watch one of my lessons. You’re getting feedback from people who have been in the classroom, and that was probably one of the most beneficial things out of PDS. They build your confidence by telling you the good things that you do; that made me feel more prepared. It made me feel like I have the ability that I didn’t necessarily feel like I did before those conferences.”

**Clinical Senior One Teacher Candidates**

Teacher candidates shared perspectives related to the theme. Cameron said, “The whole structure of the program helps me feel like a peer with the rest of the teachers in my grade level, and they welcome me as such too. It’s been a major help, to feel like a teacher and it gives me the confidence to go forward.” Kari added, “I would definitely agree that this program just gives you confidence. I feel like the teachers in the building with you know that you have those hours behind you and they respect you for that.” Krista shared her experiences with cooperating teachers as, “In the clinical pathway, you just work super closely with your teachers, with your supervising teacher and your cooperating teacher. We would talk about what students were learning. We talked about a lot, what they did in the past in the classroom, and what worked well in their classrooms.” Claire contributed, “I think lessons plans were a lot easier to write and implement because we can go to the teacher and talk about what they’re actually doing in the classroom instead of just doing something random. That was nicer to actually know exactly what they’re doing and it will be on track for them.”
Discussion

As afore mentioned, the research question pertaining to this study is, “To what extent are university educators, principals, and cooperating teachers able to identify differences in relation to collaboration between teacher candidates within the PDS and Senior One pathways prior to the student teaching semester of course work?” The research question is answered through qualitative findings and analysis where perceptions of traditional teacher candidates and clinical teacher candidates were collected and coded for themes. The difference between traditional PDS teacher candidate and clinical Senior One teacher candidate collaboration was noticed by clinical faculty, principals, and cooperating teachers. Differences in experience were more difficult for traditional PDS teacher candidates to identify due to lack of experience as a clinical Senior One teacher candidate. Clinical Senior One teacher candidates were also not likely to compare their experiences to those of the PDS, and therefore could only offer personal experience.

University faculty provided differing perspectives related to collaboration between cooperating teachers and teacher candidates. Overall, university faculty members described more integral collaboration between clinical Senior One teacher candidates and districts due to additional time in the field. Where collaboration appeared to exist in the traditional PDS experience was while involved with and supervising children. Although important, quick collaborative moments cannot easily compare to significant collaboration meetings and sit-down discussions.

Principals shared similar experiences related to the traditional PDS and clinical Senior One teacher candidates and their ability to collaborate. Time continued to be an obstacle for the traditional PDS model, hindering quality discussions and interactions.
between teacher candidates and cooperating teachers. In fact, one principal named Jake spoke so freely as to mention, “I don’t watch the traditional teacher candidates as closely to hire later because they are there so little and they just can’t collaborate to the extent of the clinical. They just don’t have the same opportunities.”

In addition to university faculty members and principals, cooperating teachers provided personal experiences with teacher candidates focusing on collaboration in order to further support the answer to the research question. Conversations revolving around collaboration when discussing the two models clearly identified differences in the collaborative nature of teacher candidates. Traditional PDS teacher candidates were perceived as less collaborative and more difficult to find time for collaboration to occur. Clinical Senior One teacher candidates were identified with being more collaborative through additional time in the field and appearing more connected to the school environment. In summary, cooperating teachers in the field perceived clinical Senior One teacher candidates to be part of the grade level team, considering these teacher candidates to be more collaborative than traditional PDS teacher candidates. Traditional pathway teacher candidate collaboration was found to be difficult to implement and encourage in the schools.

Although it appeared easy to identify differences in perceived collaboration among university faculty members, principals, and cooperating teachers, being able to decipher differences among teacher candidates was more difficult to compare. Teacher candidates were only able to offer one perspective in relation to collaboration: their own personal experience as a teacher candidate. With this knowledge in mind, the research cannot compare based on teacher candidate perspective alone. Therefore, a teacher
candidate’s perspective must be accompanied by the experiences of university faculty, principals, and cooperating teachers.

Traditional PDS teacher candidates have determined their experiences with collaboration to be adequate based on opportunities to share lesson plans, reflect on teaching, and on occasion, receive additional experience with a cooperating teacher. Clinical teacher candidates have determined their experiences with collaboration to be adequate based on opportunities to join in district collaboration, develop lesson plans and have on-going conversations with the cooperating teacher. Results and conclusions to this research are based on the sharing of knowledge from all participants and the personal experiences from teacher candidates in both models.

Conclusion

After revealing experiences related to the traditional PDS and clinical Senior One semesters related to teacher education, a reasonable conclusion was determined. Clear differences in relation to collaboration were recorded as occurring in the separate semester experiences. Through participant responses, clinical Senior One teacher candidates were able to experience more involved collaboration than those teacher candidates enrolled in the traditional PDS coursework.

Since the intent of the clinical Senior One semester was not to replace the PDS semester for traditional teacher candidates, decisions now must be weighed. The traditional PDS semester can no longer be implemented as in past semesters. The university has a commitment to the teacher candidates and local school districts to provide enhanced learning opportunities based in sound theory and supported through scholarly writing. With additional time in the field, professional relationships between
teacher candidates and school districts are able to flourish. Through more involved learning experiences in field placements, teacher candidates will all be exposed to a structure allowing all participants a forum for collaboration, instilling a commitment to future collaborative ventures.

Since the PDS model was meant to become the promoter for restructuring and rejuvenating the field of teacher education, the natural next step for this program is to use current data to adapt for the future of teacher education (Darling-Hammond, 1994). The university teacher education program will benefit from an evolution of the early PDS model from 1996. The initial PDS purpose included opportunities to create collaborative relationships with school districts, and after revealing results of this study, a new purpose has emerged, encouraging the program to enhance collaborative relationships within school districts through increased time in field placements and ongoing facilitated discussion related to the benefits of collaboration (Bell & Morrow, 1998). Therefore, the evolution from traditional PDS will move towards a more clinical endeavor, increasing field time in district placements. The revisions to the original design at the university will provide a fresh experience, utilizing the framework from the traditional PDS and incorporating clinical elements to provide a more profession experience to all teacher candidates.
Journal Article References


Caepnet.org/standards/standards


Goodwin, A. L., Smith, L., Souto-Manning, M., Cheruvu, R., Tan, M. Y., Reed, R., & Taveras, L. (2014). What should teacher educators know and be able to do?


Washington, DC: author.

SECTION SIX

Scholarly Practitioner Reflection
The dissertation process has deeply influenced my practice as an education leader and scholar in ways I could not have previously predicted. Prior to the dissertation process, I was able to experience small-scale research projects as embedded in course content. These early experiences with data collection were practice opportunities to assist with confidence building and understanding of data collection and analysis. Even after two years of coursework focusing on data collection and analysis, I could not have predicted the level of confidence and reliance I have on data and the data collecting process at the completion of my dissertation.

As simply as possible, I will discuss how the dissertation process has affected my practice as an educational leader. At the completion of my dissertation, I have realized through reflection, how my perspective has changed in relation to data collection and analysis from my role as a leader using other’s data to being a leader and using my own data. Early in the dissertation process, I was able to understand how reviewing relevant literature and previous studies can impact decision-making. Further, I was able to use current literature for the purpose of supporting my own ideals and perspectives. Now at the end of the dissertation process, I have come to the realization that my own research can be used for the purpose of decision-making as well. This experience has allowed me to take on a different leadership role and use my own data collection and analysis to make important decisions relevant to teacher education. Through the results of this study, I have been able to capture a glance at the future based on results; this realization is both terrifying and exciting. Being able to collect and analyze data for the purpose of making significant leadership decisions is a powerful concept, and one that cannot be taken lightly.
The dissertation process has also influenced me as a scholar in much the same way as it has affected me as a leader. Prior to collecting data for my dissertation, I understood the importance of scholarship. I was also able to appreciate other’s endeavors and the sharing of that knowledge. My earlier perspective in relationship to scholarship was from the outside looking inward. Through my own dissertation process, I have been able to open the door to scholarly work. I have encountered a higher level of confidence in reading, understanding, and collecting data for a purpose or goal. Through this new level of confidence, I recognize an eagerness to collect data rather than rely solely on other’s contributions. Due to the dissertation process, I have found myself open to new research endeavors through actively seeking opportunities to learn and share knowledge for the purpose of change and understanding.

Through this reflective analysis of my growth as a leader and scholar, it is imperative to recognize how authentic practice has made me accountable for my own learning and understanding of research. Without this dissertation process, I would not have gained confidence in my ability to reveal a deeper understanding on a topic based on personal research. It is this process where results from my study have the potential to create positive change that has enabled a sense of pride and accomplishment affecting positive change.
Appendix A:

Teacher Efficacy Survey, adapted from Woolfolk & Hoy (1990)

Directions: This questionnaire is designed to help us gain a better understanding of the kinds of things that create difficulties for teachers in their school activities. Please indicate your opinion about each of the statements below. Your answers are confidential.

KEY: 1 = Nothing, 2 = Almost Nothing, 3 = Very Little, 4 = Minimal Influence, 5 = Some Influence, 6 = Moderate Influence, 7 = Quite a Bit, 8 = Strong Influence, 9 = A Great Deal

Please Note: The data collected for teachers by the time it is analyzed is in the form of aggregate data and does not identify teachers directly and no responses that a subject makes will be able to be linked to that teacher.

1) How much can you do to get through the most difficult students?
2) How much can you do to help your students think critically?
3) How much can you do to control disruptive behavior in the classroom?
4) How much can you do to motivate students who show low interest in school work?
5) To what extent can you make your expectations clear about student behavior?
6) How much can you do to make students believe that they can do well in school work?
7) How well can you respond to difficult questions from your students?
8) How well can you establish routines to keep activities running smoothly?
9) How much can you do to help your students value learning?
10) How much can you gauge student comprehension of what you have taught?
11) To what extent can you craft good questions for your students?

12) How much can you do to foster student creativity?

13) How much can you do to get children follow classroom rules?

14) How much can you do to improve the understanding of a student who is failing?

15) How much can you do to improve the understanding of student who is disruptive or noisy?

16) How well can you establish a classroom management system with each group of students?

17) How much can you do to adjust your lessons to the proper level for individual students? *

18) How much can you use a variety of assessment strategies?

19) How well can you keep a few problem students from ruining an entire lesson?

20) To what extent can you provide an alternative explanation or example when students are confused?

21) How well can you respond to defiant students?

22) How much can you assist families in helping their children do well in school?

23) How well can you implement alternative strategies in your classroom?

24) How well can you provide appropriate challenges for very capable students?
Appendix B:

Teacher Confidence Scale, adapted from Woolfolk & Hoy (1990)

INSTRUCTIONS: Please indicate your opinion about each statement by circling the appropriate response at the right of the statement for how confident you feel to teach. There are no right or wrong answers. We are interested in your frank opinions. Your responses are confidential.

KEY: 1 = Strongly Disagree, 2 = Moderately Disagree, 3 = Neutral, 4 = Moderately Agree, and 5 = Strongly Agree

- Locate Resources for Preparing Mathematics Lessons
- Teach science as a co-inquirer with students
- Use journals in teaching
- Construct a web
- Integrate language art teaching
- Determine the academic needs of the students
- Select appropriate literature for thematic teaching
- Evaluate students' work
- Teach effectively in an urban school
- Facilitate class discussions
- Establish a feeling community in my classes
- Incorporate different activities and curricula into science teaching
- Develop an assessment rubric
- Create integrated lessons and units
- Construct student-centered activities
. Teach basic concepts of fractions
. Manage classrooms
. Teach algebra
. Use cooperative learning approaches
. Facilitate students' communication about mathematics
. Explain the meaning of standardized test scores to students and parents
. Implement a variety of science teaching strategies that incorporate inquiry-based learning
. Develop number sense in students
. Build learning in science teaching in an objective and ethical manner
. Give students concrete experiences in learning mathematics
. Use media to support teaching and learning
. Understand the impact of cultural diversity on classroom content, context, & instructional strategies
. Define the social in social studies
Appendix C:

Teacher Candidate Disposition Form

TEACHER CANDIDATE DISPOSITIONS ASSESSMENT FORM

Disposition 1: Commits to high expectations for all students, and values the ability/capacity for each student to learn. (INTASC 1,2,3,4,5,6,7; MoSTEP 1,2,3,4,5,6)

Evidenced through behaviors such as: Candidate
- Persists in helping all children become successful
- Listens to students
- Plans to/attempts to differentiate instruction to meet needs of each student
- Shows in lesson planning and execution that he/she is aware of the whole child
- Shows enthusiasm for all subjects/does not convey negative attitudes about any subjects
- Encourages independent learners that have the skills and strategies to learn on their own outside of class
- Scaffolds students as needed
- Allows/encourages/expects student to take more responsibility for his/her own learning
- Uses praise effectively to promote intrinsic motivation in students
- Seeks feedback and input from cooperating teacher to meet individual student needs
- Treats students respectfully (e.g. is patient, considerate, makes eye contact, attentive)

Not observed | Does not meet | Progressing | Meets | Exceeds

Comments:

Disposition 2: Values student ability to apply concepts learned to performance activities. (INTASC 1,2,3,4,5,7; MoSTEP 1,2,3,4,5,6)

Evidenced through behaviors such as: Candidate
- Allows students to explore and engage in learning
- Uses effective communication strategies
- Applies knowledge from various classes as evidenced by planning, instruction, and assessment techniques
- Reflects on teaching and adjusts according to reflection (i.e., keeping a journal, conferencing with cooperating teacher)
- Attempts to plan, teach, and assess students at higher cognitive levels (application and beyond)
- Implements authentic activities and problem-based activities when possible/appropriate

Not observed | Does not meet | Progressing | Meets | Exceeds

Comments:
Disposition 3: Commits to the development of critical thinking skills (e.g., problem solving, analysis, etc.). (INTASC 1,2,3,4,6; MoSTEP 1,2,3,5,7)
Evidenced through behaviors such as: Candidate
- Uses effective questioning strategies
- Reflects on experience and uses reflection to inform practice
- Uses information gathered through assessment to inform practice
- Consistently demonstrates critical thinking and self-directed learning
- Is responsive to evaluative feedback provided by cooperating teacher/University faculty and is able to analyze own effectiveness
- Consistently uses instructional strategies designed to aid development of students’ critical and creative thinking, problem solving, and performance capabilities
- Implements authentic activities and problem-based activities when possible/appropriate
- Uses wait time effectively to allow for student responses
- Uses large- and small-group discussion instead of expository instruction when appropriate
- Answers student questions in various ways (not just with a direct response to question)

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Does not meet</th>
<th>Progressing</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
</table>

Comments:

Disposition 4: Commits to seeking out, developing, and continually refining teaching practices that generate more learning for students. (INTASC 9; MoSTEP 3,6,8)
Evidenced through behaviors such as: Candidate
- Uses informal assessment to adjust and revise lessons
- Recognizes that learning is an ongoing process
- Shows focus on student learning in self-evaluation and in conferencing with cooperating teacher
- Seeks and develops practices that address individual student needs
- Develops activities that encourage students to become engaged (hands-on, minds-on)
- Models and supports appropriate practices
- Discusses with cooperating teacher the practices observed in the classroom
- Is responsive to feedback, constructive criticism, and correction by cooperating teacher and University faculty

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Does not meet</th>
<th>Progressing</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
</table>

Comments:

Disposition 5: Commits to development of lessons that are interesting and engaging through a variety of instructional strategies to accommodate all learners, including those
from diverse backgrounds, experiences, and cultures (e.g., use of technology, grouping, motivating materials). (INTASC 1,2,3,4,5,6; MoSTEP 1,2,3,5,6,7)

Evidenced through behaviors such as: Candidate

- Adjusts & revises lesson plans to meet students’ needs
- Displays through behavior a passion for teaching as a profession
- Demonstrates through behavior a belief that ALL students learn
- Treats all students fairly
- Differentiates instruction appropriately
- Tries new strategies in the classroom when given the opportunity
- Develops activities that encourage students to become engaged (hands-on, minds-on)
- Uses a variety of modalities to teach lessons (e.g. visuals, hands-on, talking, presenting, projects, etc.)
- Discusses with students different ways to learn and understand
- Uses technology to facilitate learning
- Uses effective communication techniques
- Uses collaborative learning
- Consistently adapts and modifies instruction to flexibly respond to student responses, ideas, and needs.
- Considers perspectives different from his/her own
- Explores resources (e.g. professional libraries, educational journals, books, Internet)

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Does not meet</th>
<th>Progressing</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
</table>

Comments:

Disposition 6: Commits to making appropriate adaptations and accommodations for students with diverse needs (e.g., use of technology). (INTASC 1,2,3,5,6,8; MoSTEP 1,2,3,6,7,8)

Evidenced through behaviors such as: Candidates

- Seems comfortable in discussing different kinds of diversity
- Seeks to become acquainted with students as individuals
- Interacts in a respectful and supportive way with students and their families
- Adapts or revises lesson plans in light of student needs and informal evaluations
- Learns about/asks questions about the culture of students in class
- Attends/contributes to meetings about student needs (as appropriate)
- Seeks input from available supporting personnel (e.g. Counselor, Special Educator)
- Uses verbal and nonverbal communication to engage students
- Uses technology appropriately to accommodate student needs
- Analyzes student work and other data to become informed about individual student strengths and needs
- Avoids stereotyping/using broad generalizations
• Addresses the diverse needs of students (e.g. exceptionalities, multiple intelligences, learning styles, English language learners, and gifted and talented students)
• Works equitably to meet students’ needs

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Does not meet</th>
<th>Progressing</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
</table>

Comments:
Disposition 7: Appreciates and promotes acceptance of self-discipline, responsibility, and self-esteem. (INTASC 2,5,6; MoSTEP 2,6,7)
Evidenced through behaviors such as: Candidate
• Shows enthusiasm throughout lessons/teaching
• Demonstrates professional behavior including coming prepared, dressed appropriately, and ready to work.
• Accepts responsibility for his/her actions
• Accepts correction graciously—no excuses
• Demonstrates the qualities of a positive role model
• Demonstrates integrity and honesty in dealing with both children and colleagues
• Keeps all school dealings confidential
• Follows instructions independently
• Shows desire to learn and teach
• Demonstrates flexibility (e.g. responds positively to unexpected changes)
• Exhibits self-confidence in presenting lessons and interacting with students

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Does not meet</th>
<th>Progressing</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
</table>

Comments:
Disposition 8: Commits to a positive and enthusiastic attitude for teaching and learning to inspire self and others. (INTASC 9; MoSTEP 9)
Evidenced through behaviors such as: Candidate
• Shows enthusiasm throughout lessons/teaching
• Appears to be involved throughout class period (discussions & activities)
• Meets deadlines
• Accepts responsibility for own actions
• Demonstrates respect for professor, cooperating teacher, and peers
• Demonstrates a commitment to the profession
• Provides feedback that creates a positive atmosphere
• Is actively involved with all students when teaching, interacting positively and encouraging participation
• Joins professional organizations and or attends professional meeting(s)
• Willingly participates in committees at the school when asked to attend
• Participates with students in extracurricular activities
• Asks for and implements suggestions/advice from cooperating teacher, liaison/university faculty and/or UCM faculty
- Accepts constructive criticism with a positive attitude (without becoming defensive)
- Exhibits needed changes or an effort to make changes
- Engages positively with students, using a sense of humor as appropriate
- Talks individually with students when appropriate
- Provides constructive feedback to students
- Exhibits positive demeanor; avoids gossip in school and university settings
- Attends to the task(s) at hand; avoids side conversations
- Demonstrates enthusiasm, stamina, perseverance, self-confidence and a positive demeanor

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Does not meet</th>
<th>Progressing</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
</table>

**Comments:**

**Disposition 9:** Believes students and colleagues should be treated and should treat other with kindness, fairness, patience, dignity, and respect. (INTASC 5,6,9,10; MoSTEP 6,7,9,10)

**Evidenced through behaviors such as: Candidate**
- Maintains standards of confidentiality
- Acts as an appropriate representative of school
- Interacts appropriately with students and peers
- Treats students fairly
- Treats all members of the staff with respect—paras, custodians, cooks, principal, other teachers
- Addresses colleagues, parents of students, peers, and University faculty respectfully
- Encourages and supports others with words and actions

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Does not meet</th>
<th>Progressing</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
</table>

**Comments:**

**Disposition 10:** Commits to relationships with school colleagues, parents, and educational partners in the larger community to support student learning and well being. (INTASC 10; MoSTEP 10)

**Evidenced through behaviors such as: Candidate**
- Maintains standards of confidentiality
- Demonstrates professional behaviors at all times
- Works toward creating a community of learners
- Works toward creating a team (parents, teachers, students)
- Understands that the school is part of a larger district and asks questions to understand policies of the district
- Recognizes that teachers must cooperate with teachers at other grade levels
- Promotes and requests parental involvement and input
- Attends activities/workshops or other meetings to hear various perspectives
• Seeks the advice of cooperating teacher, liaison/university faculty, and veteran teachers
• Asks questions and contributes positively to course discussions
• Introduces self to school faculty and staff
• Attends faculty and staff/team/department meetings and provides input when appropriate
• Participates in parent-teacher conferences, school events, and field trips as appropriate
• Collaborates with school personnel who impact student learning (e.g. special educators, ESL teachers, etc)
• Plans jointly with cooperating teacher
• Evaluates, plans, and discusses ways to improve teaching with others in the field

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Does not meet</th>
<th>Progressing</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
</table>

Comments:

**Disposition 11:** Assesses the effects of choices and actions on others and actively seeks out opportunities to grow professionally in order to promote learner outcomes. (CF)

**Evidenced through behaviors such as: Candidate**

• Shows positive attitude toward learning (self & others)
• Recognizes the value of intrinsic motivation in helping students become lifelong learners.
• Reads and is aware of books that the children are reading in class
• Demonstrates a positive attitude toward learning (self & others)
• Identifies personal strengths and weaknesses (e.g. a professional growth plan)
• Demonstrates deliberate and consistent effort toward improvement
• Reflects with cooperating teacher/university faculty/university professor on lesson planning and execution, and/or other classroom activities
• Exhibits needed changes
• Plans jointly with cooperating teacher
• Explores resources (e.g. professional libraries, educational journals, books, Internet)

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Does not meet</th>
<th>Progressing</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
</table>

Comments

**Disposition 12:** Fulfills professional responsibilities consistent with building and district expectations and policies concerning appearance, punctuality, attendance, and timely and accurate paperwork completion.

**Evidenced through behaviors such as: Candidate**

• Arrives at school promptly
• Is prepared and organized for lessons and responsibilities
• Manages time & materials
- Avoids mannerisms that detract (such as gum chewing, twisting hair, sniffing, eating in front of students)
- Maintains professional appearance and dress
- Follows safety policy and procedural rules of the school
- Represents the school professionally during school hours, during school events, and in the wider community
- Demonstrates ethical behavior toward teaching and the teaching profession
- Demonstrates standard English in oral and written communication when teaching and when interacting with cooperating teacher, liaison/university faculty, and other professionals
- Submits assignments on time
- Follows through with commitments to colleagues and faculty
- Comes to meetings prepared to contribute (e.g. with written ideas and suggestions)
- Takes responsibility for meeting program, degree and certification requirements
- When changes in schedule arise, communicates circumstances with cooperating teacher, liaison/university faculty and/or UCM faculty as soon as possible via telephone/email
- Follows established school and UCM policies and procedures - including attendance

<table>
<thead>
<tr>
<th>Not observed</th>
<th>Does not meet</th>
<th>Progressing</th>
<th>Meets</th>
<th>Exceeds</th>
</tr>
</thead>
</table>

**Comments**

Reviewed ___________________________ ___________________________ ___________________________

(Candidate signature) (Faculty/Faculty signature) (Date reviewed)
Appendix D:

Focus group questions and format

Focus group 1: Clinical teacher candidates

Focus group 2: Traditional teacher candidates

Focus group 3: University clinical faculty

Focus group 4: University traditional faculty

Focus group 5: University faculty who teach in both pathways

Focus group 6: Principals who have experienced teacher candidates in both pathways

Focus group 7: Cooperating teachers who have experienced teacher candidates in both pathways

Questions for each focus group are provided below:
Clinical Teacher candidates

Opening question:

How did you decide to enroll in the clinical pathway?

Introductory questions:

What do you think of when you hear the word, “Clinical?”

Transition questions:

Describe the UCM clinical experience as if you were explaining it to a friend

Key questions:

Please share your process for writing lesson plans.

What part of lesson planning do you feel most comfortable with?

What part of lesson planning are you least confident in?

Please share your experience with implementing lesson plans in your clinical classes.

How do you reflect on your teaching?

What do you gain through reflection?

What makes a teacher candidate “ready” to student teach?

Ending questions:

How has the clinical pathway prepared you to student teach?

If you were given the chance to choose your pathway again, what would you choose?

If you had a chance to give advice to the clinical faculty, what would you suggest?
Traditional Teacher Candidates

Opening question:
How did you decide to enroll in the traditional pathway?

Introductory questions:
What do you think of when you hear the word, “Traditional?”

Transition questions:
Describe the UCM clinical experience as if you were explaining it to a friend

Key questions:
Please share your process for writing lesson plans
What part of lesson planning do you feel most comfortable with?
What part of lesson planning are you least confident in?
Please share your experience with implementing lesson plans in your traditional classes.
How do you reflect on your teaching?
What do you gain through reflection?
What makes a teacher candidate “ready” to student teach?

Ending questions:
How has the traditional pathway prepared you to student teach?
If you were given the chance to choose your pathway again, what would you choose?
If you had a chance to give advice to the traditional faculty, what would you suggest?
University clinical faculty

**Opening question:**
What are you most drawn to in the clinical pathway?

**Introductory questions:**
What is the first thing that comes to mind when you hear “clinical?”

**Transition questions:**
If you were describing our program and two pathways to a prospective student, what would you tell them about the clinical pathway?

**Key questions:**
Please share how your teacher candidates plan lessons.
Please describe how your teacher candidates implement their planned lessons.
How do your teacher candidates reflect on their lesson implementation?
Describe how collaborative learning occurs in the clinical pathway.
What makes a teacher candidate “ready” to student teach?
How prepared do you feel your teacher candidates are to student teach next semester?

**Ending questions:**
If you had a chance to change one aspect of the clinical pathway, what would you suggest?
University traditional faculty

**Opening question:**

What does traditional pathway mean to you?

**Introductory questions:**

**Transition questions:**

If you were describing our program to a prospective student, what would you tell them about the traditional pathway?

**Key questions:**

Please share how your teacher candidates plan lessons.

Please describe how your teacher candidates implement their planned lessons.

How do your teacher candidates reflect on their lesson implementation?

Describe how collaborative learning occurs in the traditional pathway.

What makes a teacher candidate “ready” to student teach?

How prepared do you feel your teacher candidates are to student teach next semester?

**Ending questions:**

If you had a chance to change one aspect of the traditional pathway, what would you suggest?
University faculty within both pathways

Opening question:
What is the greatest benefit for having two pathways to teacher education at UCM?

Introductory questions:
Do you see any differences in how our teacher candidates are learning in one pathway versus being in a different pathway?

Key questions:
Please share how teacher candidates are lesson planning in both pathways.
How do teacher candidates implement planned lessons in both pathways?
How do teacher candidates reflect on their lesson planning and implementation of lessons?
Describe how collaborative learning occurs in both pathways
How collaborative are teacher candidates in the traditional and clinical pathways?
How prepared are our teacher candidates in each pathway to student teach at the end of the Senior one/PDS semester?
What differences do you see between teacher candidates in both pathways prior to student teaching?
What makes a teacher candidate “ready” to student teach?

Ending questions:
If you were describing our teacher education program to a potential student, what would you say about each pathway?
Principals

**Opening question:**
What do you feel is the greatest benefit to having UCM teacher candidates in your schools?

**Introductory questions:**
Do you see any major differences in how teacher candidates in either the clinical or traditional pathway interact and engage in your classroom?

**Transition question:**
How collaborative are teacher candidates in the traditional and as compared to the clinical pathway?

Comparing the traditional and clinical pathways, how prepared do you feel our teacher candidates are to develop appropriate lesson plans prior to student teaching? And provide reasoning for responses

Do you feel the two pathways equally prepare our teacher candidates to student teach? Please provide some examples for your answer.

What differences do you see between teacher candidates in both pathways prior to student teaching?

What are our teacher candidates lacking in preparation?

What makes a teacher candidate “ready” to student teach?

Are our teacher candidates all ready to student teach by the end of the Senior one/PDS semester?

**Ending questions:**
What advice would you like to give Elementary and Early Childhood faculty about the two pathways?
Cooperating teachers

**Opening question:**

What do you feel is the greatest benefit to having UCM teacher candidates in your classroom?

**Introductory questions:**

Do you see any major differences in how teacher candidates in either pathway interact and engage in your classroom?

**Transition questions:**

Do you see any major differences in how teacher candidates in either the clinical or traditional pathway interact and engage in your classroom?

**Key questions:**

Share your experiences with teacher candidate lesson planning.

Provide some insight into how teacher candidates in each pathway implement lesson plans.

How reflective have the teacher candidates been from each pathway?

How collaborative are teacher candidates in the traditional and as compared to the clinical pathway?

Comparing the traditional and clinical pathways, how prepared do you feel our teacher candidates are to develop appropriate lesson plans prior to student teaching? And provide reasoning for responses

Do you feel the two pathways equally prepare our teacher candidates to student teach?

Please provide some examples for your answer.
What differences do you see between teacher candidates in both pathways prior to student teaching?

What makes a teacher candidate “ready” to student teach?

**Ending questions:**

What advice would you like to give Elementary and Early Childhood faculty about the two pathways?
Appendix E:

Goals 2000: PDS Partnership, a Collaborative Effort of the
Warrensburg School District
Clinton School District
Central Missouri State University
Central Regional Professional Development Center

An Evaluation Report of Year 1 of the PDS Partnership Implementation
June 10, 1998

Submitted to the Executive Committee of the PDS Partnership by
Dr. Bill Bell and
Dr. Jean Morrow
INTRODUCTION

In 1996, the Warrensburg School District, the Clinton School District, Central Missouri State University, and the Central Regional Professional Development Center received a federally funded Goals 2000 grant through the Department of Elementary and Secondary Education in Jefferson City to initiate and develop collaborative Professional Development School (PDS) partnerships. The 1996-97 year was designated as a planning year. 1997-1999 are implementation years. PDS sites have been established at the Warrensburg Middle School and Sterling Elementary School in the Warrensburg School District and at Southeast Elementary School and Clinton High School in the Clinton School District.

Table 1 shows the number of university students and public school faculty participating in the PDS during the 1997-98 school year.

<table>
<thead>
<tr>
<th>School / District</th>
<th>First Semester</th>
<th>Second Semester</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Teachers</td>
<td>Interns</td>
</tr>
<tr>
<td>Warrensburg Sterling Elementary School</td>
<td>9</td>
<td>13</td>
</tr>
<tr>
<td>Warrensburg Middle School</td>
<td>9</td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>+1 Libr.</td>
<td></td>
</tr>
<tr>
<td>Clinton High School</td>
<td>4</td>
<td>15</td>
</tr>
<tr>
<td>Clinton Elementary</td>
<td>5</td>
<td>15</td>
</tr>
</tbody>
</table>

Table 1. First year participants

A concept paper, "Professional Development Schools: A Strategy for Educational Reform in Missouri," describes the four purposes of PDSs:
1. to offer an exemplary education for K-12 students
2. to offer a clinical setting for the preparation of educators
3. to offer continuous professional development for school and university educators, both teachers and administrators
4. to conduct and share research on exemplary practice in teaching, learning, and school leadership. (p. 2)

The grant for this program has four goals:
1. The development of effective preservice teachers
2. Increased student achievement in communication arts, as determined by
   a. Classroom performance data
   b. Standardized test data
   c. Missouri Show Me Standards Assessment
3. The development of strong collaborative relationships to foster support, reflective thinking, and continuous learning and
4. To integrate Communication Arts across the curriculum.
One other expressed outcome was increased computer competence for the participants in the grant.

The first purpose of a PDS, "to offer an exemplary education for K-12 students," is addressed by the second and fourth goals of the grant. The second purpose of a PDS, "to offer a clinical setting for the preparation of educators," is addressed by the first goal of the grant. The third and fourth purposes of a PDS, "to offer continuous professional development for school and university educators, both teachers and administrators" and "to conduct and share research on exemplary practice in teaching, learning, and school leadership" are both addressed by the third goal of the grant. We will look at each of these purposes in turn to determine how well the PDS partnership has succeeded to this point and what changes or refinements might enhance the quality of the partnership in the years to come.

**EXEMPLARY EDUCATION FOR K-12 STUDENTS**

In looking at evidence of accomplishment for the first purpose of a PDS, we must rely upon anecdotal evidence for the most part. This is true for a number of reasons. First, it is unrealistic to expect that the presence of interns (pre-student teaching students) for an hour or two once a week will make a difference that could be measured on standardized, state, or district assessments in a statistically measurable, significant way. Secondly, there is no baseline established for the state assessment in communication arts as this instrument is being piloted this year. Thirdly, there was not a clear understanding, or acceptance, of the requirement for action research. At least one site did attempt a pre-/posttest measuring communication arts improvement as indicated by essay writing. Essays responding to the prompt, "How do you see ____ (Math, Social Studies, Science, Language, etc.) being used in everyday life?" Students in classes with a PDS student teacher and similar classes without PDS student teachers wrote these essays at the beginning of the second semester and again towards the end of the semester. The results are shown in Table 2.

<table>
<thead>
<tr>
<th></th>
<th>Pretest</th>
<th>Posttest</th>
</tr>
</thead>
<tbody>
<tr>
<td>PDS1</td>
<td>83.60</td>
<td>85.22</td>
</tr>
<tr>
<td>PDS2</td>
<td>68.00</td>
<td>89.00</td>
</tr>
<tr>
<td>PDS3</td>
<td>76.14</td>
<td>81.72</td>
</tr>
<tr>
<td>PDS4</td>
<td>70.47</td>
<td>72.88</td>
</tr>
<tr>
<td>C1</td>
<td>88.00</td>
<td>74.00</td>
</tr>
<tr>
<td>C2</td>
<td>79.80</td>
<td>80.43</td>
</tr>
<tr>
<td>C3</td>
<td>66.88</td>
<td>64.94</td>
</tr>
</tbody>
</table>

Table 2. Class averages on essay.

Class averages as reported by the student teachers. The number of students writing the essay were not the same in most of the classes, nor were the numbers the same from the pretest to the posttest.
The results are promising but inconclusive. It is not certain that the pre- and posttest conditions were the same in each classroom. It is also quite possible that the "Hawthorne effect" is evident here. Finally, this assessment took place in only one of the four PDS sites.

Two activities related to the integration of communication arts across the curriculum are worth noting here. At Clinton High School, the freshmen mathematics students wrote "story problems" which were edited by the senior English class. There were editing conferences and rewriting. At Clinton Elementary School, Ms. Susan Elkins' second graders performed in plays that were related to their social studies lessons. The students so enjoyed the experience that they then wrote and staged their own plays. In each of these classrooms, PDS interns and/or student teachers were involved in planning and implementing these integrated communication arts activities.

Comments from midyear and end of year surveys, as well as personal interviews in April and May, indicate that those involved in the PDS partnership believe that the public school students were helped by the "extra hands" and "extra eyes," "the additional adults" that the PDS interns and student teachers provided. Most of the comments are summarized in the following two statements. "Yes, I believe the students benefit directly from the extra adult in the classroom, indirectly from the collaboration and reflection that should occur between the teacher and preservice teacher." "When I know PDS are coming (or University staff) I am sharper, and my students benefit." However, one teacher did voice the concern that her students were reaching the "point where they just want one teacher and it becomes a problem for them." One item on the spring survey addressed this area. The average of the responses from the mentor teachers to the question "Do you feel public school students benefit from having this program in their school?" were 8, 8.8, 8, and 4.3 respectively for Sterling Elementary, Warrensburg Middle School, Clinton Elementary, and Clinton High School. A Likert-like scale of 1 (little evidence) - 10 (high satisfaction) was used for this survey.

Recommendation:
During the August workshop, collaboratively design and agree upon the implementation of assessment measures related to communication arts. These can be a combination of local, district, and state assessments.

CLINICAL SETTING FOR EDUCATION STUDENTS

The second purpose of a PDS, a clinical experience for preservice teachers, was certainly achieved this year. What is of most interest here is the quality of that clinical experience and recommendations for improving and enhancing that experience. Interviews with mentor teachers, site coordinators, and two of the PDS student teachers indicate a high degree of commitment to the goals and purposes of this grant and the PDS partnership. Survey responses from both the first and second semester indicate a high level of satisfaction with an awareness that some fine-tuning is possible. Responses of the teachers to questions on a survey administered in March are given in Table 3.
Likert-like Scale: 1 (little evidence) - 10 (high satisfaction)  

<table>
<thead>
<tr>
<th>Question</th>
<th>S.E.</th>
<th>WMS</th>
<th>C.E.</th>
<th>C.H.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the PDS give a more realistic view of teaching than the traditional program?</td>
<td>9.4</td>
<td>9.2</td>
<td>8.8</td>
<td>9.3</td>
</tr>
<tr>
<td>2. Is the PDS experience rich and meaningful for preservice teachers?</td>
<td>9.2</td>
<td>8.5</td>
<td>9.0</td>
<td>9.3</td>
</tr>
<tr>
<td>3. Do preservice teachers profit from more courses being taught on site rather than on campus?</td>
<td>8.4</td>
<td>8.3</td>
<td>9.0</td>
<td>8.0</td>
</tr>
<tr>
<td>4. Do preservice teachers profit more from being placed with teachers with a common understanding of their roles and the PDS program rather than the traditional program?</td>
<td>9.0</td>
<td>9.5</td>
<td>8.5</td>
<td>8.6</td>
</tr>
<tr>
<td>7. Have teachers and university faculty had an adequate opportunity to exchange roles with one another?</td>
<td>8.4</td>
<td>5.3</td>
<td>6.8</td>
<td>1.6</td>
</tr>
<tr>
<td>9. Are there management and system glitches that detract from the effectiveness of the program?</td>
<td>6.8</td>
<td>7.2</td>
<td>6.0</td>
<td>4.5</td>
</tr>
<tr>
<td>13. Is the program worthwhile and do you want to continue?</td>
<td>8.6</td>
<td>9.5</td>
<td>9.6</td>
<td>9.0</td>
</tr>
</tbody>
</table>

Table 3. Spring 1998 Survey Results - Average of teachers’ ratings

Comments from the teachers highlighted the benefits to the interns of additional time, in a structured setting, in a classroom before actual student teaching. Many teachers rearranged their schedules to provide observation and experience in the language arts classes. Concerns that were voiced included the short amount of time interns were actually in the classroom and the frustration of working with an intern for a semester and then not having the intern return the following semester for student teaching. There was also a concern about the number of interns placed in a classroom, particularly if there was also a student teacher in that classroom. Finally, several teachers expressed a concern about what the interns were, or more accurately were not, observing about classroom management. These teachers described the problem as, “The interns are so focused on the individual student with whom they are doing their reading practicum that they miss the big picture of the entire class.” Areas of the program identified for fine-tuning included:

- communication (among all the parties),
- the conflicting expectations about what the interns were to do during their observation time,
- a fairer exchange of roles between university and public school teachers,
- an adjustment of time and work expected of the interns for the amount of credit they were receiving,
- more emphasis on classroom management techniques,
- time to conference with the interns each week.

The interns also expressed their satisfaction and dissatisfaction with various aspects of the program. The majority of them found the weekly time spent in the classroom, with
the opportunity to teach a lesson and to work with small groups of children, one of the most rewarding aspects of the program. The averages of the ratings on the Likert-like instrument are shown in Table 4. A note of caution about these results: The rating in column two (Warrensburg Middle School) reflects the thinking of just one student. The rating in column 4 (Clinton High School) is based on two responses and these were often nearly polar opposites (question 3, for instance, was rated a 9 by one student and a 3 by the other).

<table>
<thead>
<tr>
<th>Likert-like Scale: 1 (little evidence) - 10 (high satisfaction)</th>
<th>S.E. (7)</th>
<th>WMS (1)</th>
<th>C.E. (12)</th>
<th>C.H.S. (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Does the PDS give a more realistic view of teaching than the traditional program?</td>
<td>8.6</td>
<td>8</td>
<td>8.7</td>
<td>8.8</td>
</tr>
<tr>
<td>2. Is the PDS experience rich and meaningful for preservice teachers?</td>
<td>7.4</td>
<td>6</td>
<td>7.7</td>
<td>7</td>
</tr>
<tr>
<td>3. Do preservice teachers profit from more courses being taught on site rather than on campus?</td>
<td>8.7</td>
<td>9</td>
<td>7.6</td>
<td>7.8</td>
</tr>
<tr>
<td>4. Do preservice teachers profit more from being placed with teachers with a common understanding of their roles and the PDS program rather than the traditional program?</td>
<td>8.9</td>
<td>8</td>
<td>7.4</td>
<td>7.5</td>
</tr>
</tbody>
</table>

Table 4. Averages of intern/PDS student teacher responses, Spring 1998.

The students voiced many of the concerns mentioned by the teachers as well as some others:
- the need for clearer and more consistent communication,
- more classroom management issues and techniques addressed,
- integrating the "Integrated Block" in a meaningful way,
- the stress of travel and scheduling observations around work and other classes,
- time to conference with their mentor teachers.

There were two perceptions among the people interviewed that I will mention here for you to address as you see fit. The first was that many of the interns had "no clue" about the PDS before finding out that they were in it. The second was that the "Integrated Block" was integrated in name only, that university professors simply divided up the time (with someone always being shortchanged) and lectured about their area in isolation.

It is not surprising that "rough edges" become apparent as a new program is implemented. Some adjustments were made at the start of the second semester that were well received by the teachers in the field. Additional adjustments can be discussed and planned for this summer.

Recommendations:
1. Provide informational meetings about the PDS for all education students once or twice each semester, prior to the time that students would be signing up for the PDS.
2. Encourage, if you are not yet ready to mandate, students in the PDS to return to that site the following semester for student teaching ... make it a yearlong experience.
3. Use the August workshop time to refine lines of communication and clarify expectations/criteria of intern assignments in the PDS setting.
4. Attend to the interns’ and teachers’ concerns about classroom management.
5. Consider lab credit for the PDS interns.
6. Have students apply to be a part of the PDS, rather than be in it by virtue of the section of a class they sign up for.
7. Have interns spend two full days in the school setting during the course of the semester. This would provide a broader picture of the “real world” of schools.
8. Examine ways that conference time for the mentor and intern can occur on a regular basis. Simply mandating an extra 15 minutes of observation time will not solve the problem since many teachers have no “free” time around the time that the interns are observing.

**PROFESSIONAL DEVELOPMENT AND ACTION RESEARCH**

With regard to the third and fourth purposes of a PDS, which are addressed by the third goal of the grant, the evidence of attainment is mixed. For the most part, the teachers found the inservice provided to be most beneficial. The collaborative relationships are stronger in some sites than others. There was little action research carried out at any of the sites. Table 5 gives the averages of the ratings by the teachers to items on the spring survey that related to this goal.

<table>
<thead>
<tr>
<th>Likert-like Scale: 1 (little evidence) - 10 (high satisfaction)</th>
<th>S.E.</th>
<th>WMS</th>
<th>C.E.</th>
<th>C.H.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. Are you treated as an equal in terms of professional respect and knowledge of teaching?</td>
<td>9.6</td>
<td>7.3</td>
<td>7.8</td>
<td>8.3</td>
</tr>
<tr>
<td>6. Do you feel all parties are equally interested in learning more about teaching and the learning process?</td>
<td>9.5</td>
<td>7.5</td>
<td>8.0</td>
<td>8.3</td>
</tr>
<tr>
<td>8. Have you grown professionally as a result of this experience?</td>
<td>8.8</td>
<td>9.2</td>
<td>8.0</td>
<td>4.3</td>
</tr>
<tr>
<td>11. Has the program provided you an opportunity for formal and informal research?</td>
<td>7.6</td>
<td>7.5</td>
<td>6.5</td>
<td>3.3</td>
</tr>
<tr>
<td>13. Should more staff development activities be provided on the integration of communication arts across the curriculum?</td>
<td>8.1</td>
<td>7.6</td>
<td>5.8</td>
<td>9.0</td>
</tr>
<tr>
<td>16. Is the common knowledge institute an important component?</td>
<td>6.4</td>
<td>7.3</td>
<td>7.0</td>
<td>8.0</td>
</tr>
<tr>
<td>10. Do you feel adequately compensated for your time and effort?</td>
<td>9.6</td>
<td>8.8</td>
<td>7.8</td>
<td>4.3</td>
</tr>
<tr>
<td>14. Should the program be expanded even if it means less compensation for you personally due to budget constraints?</td>
<td>8.4</td>
<td>6.2</td>
<td>6.5</td>
<td>7.0</td>
</tr>
</tbody>
</table>

Table 5. Average of mentor teacher ratings, Spring 1998.
The teachers repeatedly expressed their appreciation of the opportunity to be "guest lecturers" in the college classes. Most teachers expressed satisfaction with their regularly scheduled PDS meetings. They felt this was an important channel for communication. Although many of the teachers expressed their professional and personal satisfaction with their participation in the PDS program, there was some concern about the possibility of a reduced or eliminated stipend. Teachers want to contribute to the preparation of preservice teachers but they are also feeling stretched too thin without some compensation. This is an area that is a difficult one for universities and public schools reliant upon public funding for their budgets.

**Recommendations:**
1. Continue to work to build collaborative relationships within the PDS partnership. This may call for some creative problem solving to provide the extra time for university faculty to make the classroom exchange a two-way street.
2. Pursue grants, university and district commitment to the PDS as a line item in the budget.
3. Spend time during the August workshop discussing action research, or inquiry-based teaching, and practical ways of engaging in it for next year.
4. Continue with the professional development activities for university and public school faculty.
5. Consider sending a team to the Baltimore and/or Louisville PDS conferences (October and March respectively). You have done much to proud of and should be sharing your work with others engaged in PDS activities.

**CONCLUSION**

If you have not already done so, schedule a part of your August workshop as a celebration time. You have accomplished much this year and have a program to be proud of. Develop your evaluation plan for the next year -- both with regards to the PreK-12 students and the university students. Establish a timeline and areas of responsibility. This is an area that calls for great collaboration and cannot be dismissed as "unimportant" in light of the funding issue.

The National Council for the Accreditation of Teacher Education (NCATE) has adopted draft standards for the accreditation of PDSs. The draft document identifies five Threshold Conditions and five Critical Attributes. I would encourage you to study these draft standards and consider how you might use them to help you in your program evaluation -- whether or not you decide to seek NCATE accreditation of your PDS sometime in the future. Briefly, the Threshold Conditions are:
1. an agreement which commits school, school district, union/professional organization, and the university to the basic mission of a PDS;
2. a commitment by the partners to the critical attributes of a PDS;
3. a positive working relationship and a basis for trust between partners;
4. the achievement of quality standards by partner institutions as evidenced by regional, state, national, or other review;
5. an institutional commitment of resources to the PDS from school and university.

The five Critical Attributes are:
I. Learning Community
II. Collaboration
III. Accountability and Quality Assurance
IV. Organization, Roles, and Structure
V. Equity

When, if, you have the opportunity to study these standards, I believe you will find that you meet the Threshold Conditions that provide the support or foundation for the PDS to develop those critical attributes identified in the next stage. You will also find that you meet many of the indicators for the each of the five Critical Attributes.

Once again, and finally, celebrate your success; collaboratively plan your next steps in advancing that success to a new level.
ADDENDA

A questionnaire about the teaching and learning of writing, developed by the National Center for Research on Teaching and Learning at Michigan State University, was administered to sixteen student teachers -- eight PDS student teachers and 8 "traditional" student teachers. These pairs were matched on the basis of GPA, teaching field, gender, and age. This is an admittedly small sample and caution must be exercised in interpreting any results. The instrument was chosen in light of the communication arts focus of the PDS grant.

Table 6 gives the data for the matched pairs' GPA and NTE score. T-tests indicated no significant differences between the pairs. Only five matched pairs were used in NTE statistics since three of the Non-PDS students just took the exam in May and their results are not yet available.

<table>
<thead>
<tr>
<th></th>
<th>Mean GPA</th>
<th>ST DEV</th>
<th>Mean NTE</th>
<th>ST DEV</th>
</tr>
</thead>
<tbody>
<tr>
<td>PDS-Student Teachers</td>
<td>3.44</td>
<td>0.47</td>
<td>650</td>
<td>28.47</td>
</tr>
<tr>
<td>Non-PDS Student Teachers</td>
<td>3.42</td>
<td>0.45</td>
<td>637.2</td>
<td>34.42</td>
</tr>
</tbody>
</table>

Table 6. Descriptive Statistics for Matched Pairs Sample

Table 7 lists the items on the questionnaire for which significant differences at the .01 level were found. Students responded to the statement using a Likert-scale ranging from 1 (Strongly Agree) to 7 (Strongly Disagree). There are a total of 131 items on the survey.

<table>
<thead>
<tr>
<th>Item</th>
<th>PDS Mean</th>
<th>N-PDS Mean</th>
<th>PDS STDEV</th>
<th>N-PDS STDEV</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. Most people don't really need highly developed writing skills.</td>
<td>6.63</td>
<td>5</td>
<td>0.52</td>
<td>2.27</td>
</tr>
<tr>
<td>43. All students have something important to write about.</td>
<td>2.71</td>
<td>1.38</td>
<td>2.06</td>
<td>0.52</td>
</tr>
<tr>
<td>86. Paragraphs should always begin with a topic sentence.</td>
<td>3.88</td>
<td>2.75</td>
<td>2.36</td>
<td>0.71</td>
</tr>
<tr>
<td>88. You should avoid using the first person (&quot;I&quot;) when writing formal reports.</td>
<td>1.88</td>
<td>2.63</td>
<td>0.64</td>
<td>1.92</td>
</tr>
</tbody>
</table>

Table 7. Beliefs and Knowledge about the Teaching and Learning of Writing

Three of the items (14, 86, and 88) fall in the "Beliefs and Knowledge" about subject matter category. The fourth item (43) is in the "Beliefs and Knowledge" about learners category. Although both the PDS and Non-PDS student teachers believe that "all students have something important to write about," it would appear that this belief is
more strongly held by the non-PDS student teachers. In light of the focus on communication arts in the PDS grant, this result is somewhat unexpected. A copy of this part of the questionnaire is available in Dr. Bell's office. The full instrument includes a section on the teaching and learning of mathematics and a section on teaching and learning in general. You may or may not find this a useful tool for pre- and posttest surveys of all your student teachers. But until such time as the intern student teaching in a PDS is a continuous experience, there may be results much like those found this year -- not much significantly different because the overall training and experiences are not significantly different.

Recommendation:
Establish an evaluation plan during the August workshop that includes instruments, a timeline for carrying out various components, and the areas to be evaluated.
Appendix F: PDS Questionnaire

Professional Development School Collaborative
Clinton School District - Central Missouri State University
Warrensburg School District

Student PDS Questionnaire

Please respond to the following questions on a 1 to 10 scale. A one response would indicate little evidence of this statement actually occurring while a 10 would indicate complete satisfaction in that area.

Please elaborate on your numerical rating.

Development of Preservice Teachers:

1. Does PDS give the preservice teacher a more realistic view of teaching than the traditional program?

2. Is the PDS experience rich and meaningful for the preservice teacher?

3. Is taking course work on site vs. on campus more beneficial for preservice teachers?

4. Is placing preservice teachers with selected classroom teachers with a common understanding of the PDS program more beneficial to the preservice teacher than the traditional program?
REFERENCES


http://www.cabells.com.proxy.mul.missouri.edu/directory-search


Caepnet.org/standards/standards


Washington, DC: author.


http://centralmissouri.stateuniversity.com


University of Central Missouri (2015). Undergraduate catalog.

http://www.ucmo.edu/catalogs


http://www.ucmo.edu/ir/documents/factbook.pdf


University of Central Missouri (2015). Name change guidelines.

https://www.ucmo.edu/about/cmsu/guidelines.cfm
University of Central Missouri (2015). UCM College High.

https://www.ucmo.edu/alumni/events/CollegeHighHistory.cfm


*Teacher Education, 74* (2), The National Society for the Study of Education

Zelezak, J. (2016). Teacher Education Assessment Committee: Annual report to the
teacher education council. University of Central Missouri
Ms. Tye was born in the rural town of Sedalia, in Pettis County, Missouri, on November 8th, 1980. She grew up with a strong influence in education through countless examples from family members. It was probably these close and admired family members who led Ms. Tye to her love for teaching and learning.

Ms. Tye’s grandmother, Dorris Willard, received her teaching certificate at age 20 and began her teaching experience at the Weaver, one room schoolhouse in rural Warrensburg, Missouri. Ms. Willard adapted to the changing times and eventually retired from the Grain Valley School District before her death at age 62. Although Ms. Tye was very young at the time of her grandmother’s death, her love of learning carried forward into Ms. Tye’s youth. Ms. Willard’s teaching experience provided a hint of wonder to Ms. Tye and possibly planted a seed for later teaching curiosity.

During Ms. Tye’s early adolescence, her mother chose to complete her bachelor’s degree in Art Education. This choice led to her mother’s countless hours studying at night and additional sacrifices from the whole family. Her mother was a non-traditional student, balancing motherhood, school work, and substitute teaching jobs to assist with paying for the degree. This was Ms. Tye’s first experience with University coursework and her mother’s experience became the model for what college should look like; hard work, sacrifices, and the drive to pursue higher expectations.

Ms. Tye graduated from high school in 1999 and immediately began the college experience, graduating in 2003 with a bachelor’s degree in Child and Family Development. She accepted a position as an instructor of college students and teacher of preschool age children, at the University of Central Missouri, teaching in the Child
Development Lab. Shortly after, she married her now husband of twelve years and pursued her master’s degree in Educational Technology. Ms. Tye completed this second degree in 2005, and also taking on the role of director, while still instructing college students and teaching preschool at the Child Development Lab.

Ms. Tye took advantage of the time between her master’s degree and later doctoral coursework to begin a family. She and her husband have four wonderful, energetic boys and live just outside the Warrensburg area on a small acreage. The family enjoys the quiet contentment of the country, as well as the close proximity to family, friends, and the local community. The family attends a local non-denominational church and the boys are involved in the local 4-H.

Through life experiences, Ms. Tye has found her own passion for teaching and learning. Early experiences and family history have influenced Ms. Tye in her teaching career and strive for higher education. Further, her family’s support and encouragement have allowed Ms. Tye to continue to create and attain goals for a brighter future.