Beyond the checklist:
Using reflective practice to remove barriers in family and community literacy

by Cheryl Brown and Wendell Dryden

Practitioners and administrators discuss barriers wherever there are adult and family literacy programs. Barriers are factors that make it hard or impossible for learners to start or finish a program or reach their learning goals. Barriers to literacy and learning are sometimes viewed simplistically, as though removing them were a straightforward matter of better planning and logistics. We have learned that many barriers are hidden: like the inner layers of an onion, they appear only after other more obvious barriers have been removed. We believe the key to reducing barriers is a willingness to constantly reflect upon and renegotiate program policies and practices.

Part One: Family Learning And Health

In our family literacy work, we became interested in those barriers particular to learners with young children. We asked the question: "What kind of support do parents need to be able to attend and have success in an education program?"

Our search for an answer began well before we developed our own family literacy program. It started with reading about other successful programs. We learned about reflective practice and qualitative inquiry in formal and informal learning situations. We developed a series of tailored workshops ranging from two to 20 hours for agencies already providing services to families. By the end of this two-year period of reading, testing and reflection, providing barrier-free family literacy programming seemed relatively straightforward.

We came to believe that transportation and child care were the main barriers to adult participation. This was based on our conversations with women in adult literacy or parenting programs, and also on our analysis of program attendance and retention statistics from a local adult literacy organization. We learned, for example, that in 2000, one out of eight adult learners left for reasons related to child care

and transportation with children. This figure represented 100 per cent of the organization's single-parent population (Brown). This was echoed by several studies, including a national study conducted by ABC Canada in 2001, which found that "among those with children, half of the women and a quarter of the men said they would have called earlier if there had been child care on site" (Long p. 82). In response, we organized a four-component family literacy program with on-site child care and flexible transportation support. Transportation and child-care barriers had been overcome—check!

We also knew from talking with parents that family-health issues would be a barrier. When children are sick, parents need to find alternative care. If they cannot, or if they need to take their child to see a doctor, they will lose class time. We knew this and—we thought—we were prepared for it. Children's health was a topic we had already addressed in our workshops, where we had developed presentation material about simple things parents could do to keep children healthier. We called our four-component program Family Learning And Health because we intended to provide our learners with the variety of information available to parents with stronger reading and research skills. We planned to talk about boosting the immune system by eating fruits and vegetables and eliminating sugars and processed foods. We planned to discuss food allergies and sensitivities. We also planned to provide nutritious food at the program, to have alternative ingredients on hand (like rice milk and buckwheat flour) and to prepare recipes with families that they could then use at home.

Barriers beneath: poor health and poor policies

What we were not prepared for were days when the classroom was empty because all of our families were home with sick children. We were not prepared to have learners out for two and three weeks as the

flu or chicken pox moved through a whole family. We were not prepared for the degree of disruption head lice could cause. One parent had poor eyesight and could not see the nits to remove them. Another parent was overwhelmed and (we found out later), having unsuccessfully sought help from two health agencies, was considering calling child protection on herself just to get support. It was only at that time, as we contemplated exiting families with sick children, that we reflected critically on our policies.

Without giving it much thought, we had followed a practice common in local adult literacy programs and required an 80 per cent attendance rate. This policy reached back to a time when our government provided a small training allowance for adult learners. It became a standard policy for the organization with which we worked and, unreflectively, we adopted this policy just as we adopted many other policies and procedures. At the time, the 80 per cent figure seemed to us to be a reasonable requirement. We knew of some programs that required a 90 per cent rate of attendance, and of one program that exited anyone who missed three days total. We had the perception that people unable to meet that requirement were either not motivated or not ready to come to our program.

What challenged this perception was evidence that these parents were indeed motivated to learn and to be part of the program. They called us and wanted us to call them back. They told us they wanted us to visit them. They asked for work they could do at home. They did work at home, and showed it to us when we stopped in to see them. Faced with this, our question became "Why should we tell them to leave this program when they are still motivated to learn, and still hope to return?"

Here, our understanding of William Glasser's choice theory came into play. We had trained, and continued to train, in choice theory and its applications in lead management and reality therapy. One of the tenets of Glasser's theory is that anyone experiencing a mismatch between what they want to happen and what they perceive to be happening faces a choice. They can change what they want, adjusting their goals and expectations to meet their perceptions, or they can do something different in an effort to change the situation. A related tenet is that this "something different" has to apply to themselves: we can only control ourselves, not someone else.

Choice theory reminded us that we could not expect the learners to change. We could not ask the children to not be sick. We could not ask parents to

not want to look after their children. We could not ask families to not be poor, not have weak eyesight, not live in substandard housing. Those things were outside our control. But our attendance policy was well within our control to deal with. We were, after all, running a pilot program specifically tasked with identifying the supports parents of young children need in order to be successful learners. Faced with the realization that, if we stuck to our attendance requirement, we would soon be asking every family to leave, we searched for things we could do differently to support these families.

We gathered our staff together and talked about this. Everyone was invited to contribute ideas, and we capitalized on our status as a pilot project to innovate. We contacted absent learners, shared our thinking and asked them how we might help them. Then, we followed through. In the case of head lice, for example, one family needed help getting the right shampoo, while another asked us to demonstrate how to remove nits. This we did. Meanwhile, parents worked at home and maintained phone contact to avoid feeling isolated.

We decided that no one would be asked to leave our class for poor attendance, even if they did not return before the pilot's end. That decision cost us nothing, but resulted in a feeling of success for one parent, who said she had been asked to leave every other program she had ever attended as a parent:

> I keep attending because I want to be here. And because there were so many times when something would come up and, in the past, the door would close, and I would be told...you have to be more punctual, you have to learn to manage.... I know I'm not ready for the workforce, because I still have a challenging time in the morning, the last-minute things at night. But here, nobody said, 'look, you have to make more of an effort.' The flexibility is important...because you guys were so positive, when I call, I'm not hearing negativity, I'm hearing support. So when I hang up I feel positive and I think to myself, 'That happened this time, next time I get back up and try it again.' (Saint John Learning Exchange, 2002)

Barriers beneath: perceptions and relationships

Once we began to think about overcoming barriers as an ongoing process rather than a matter

of upfront planning, we saw that another barrier had to do with relationship.

When, in our preparation stage, we had asked parents why they had difficulty attending a literacy program, they typically responded "I don't have transportation" or "I can't get anybody to look after my kids." They never gave the whole list. They did not tell us "I don't trust you" or "I'm too hooked on drugs" or "I'm getting beaten up." They did not say, "I'm too poor to eat right" or "I'm scared someone will say I'm a bad parent and I'll lose my kids."

In the initial weeks of the pilot, learners still did not trust us enough to tell us about their worries or their struggles with substance abuse or domestic violence or poverty. To overcome this barrier, we had to get families started in our program, with the transportation and child-care support, and respond to health issues supportively by changing our attendance policies. Only in that way were we able to build trust with the learners. That trust, in turn, helped them reveal other barriers.

We learned that poverty was a major source of barriers. One mom missed time because she would keep her kids home on rainy days as they had no rain boots. One mom missed a day because she chose to take her VCR to the pawnshop, and then use the money to buy groceries. Sometimes parents stayed away because the one presentable outfit they or their child had was in the wash.

Again, for each of these situations, we talked together as staff about how we could respond. We often involved learners in this process. We continued to use our status as a pilot project to try out different ideas. Sometimes we decided to connect a parent to community resources. Sometimes we made a field trip to a free clothing outlet or food bank. Often, parents needed help in the winter transporting food from the food bank to their residence, and we helped them when possible. Always, we were understanding and welcoming of their return.

We learned that some parents in our program suffered from social isolation that left them with few or no other adults they could trust. They lacked nearby friends and family who cared about them. One mother wanted to write the GED test, which was held on a Friday night and Saturday (outside regular day-care hours). Her neighbour and sole babysitter was unreliable. When the first opportunity to write the test came, her neighbour backed out of babysitting at the last minute. The mom had to wait two months for the next write. We used that time to help her create a back-up plan, in case her arrangements fell through again. She told us she trusted only the neighbour and program staff to babysit. When her neighbour backed out before the second GED write, one of us stepped in to care for her child while she took the test, taking her child to her at lunch on Saturday so she could breastfeed. Although we were aware that we were pushing the limits of our program job descriptions, there seemed to be no other effective response. Unwilling to change what we wanted—effective, accessible support for adult learners with young children—we continued to change our own behaviour and policies, things we could control.

Sometimes, we were unable to build the initial relationship required to support families. In the early days of the program, a staff member at another organization gave Cheryl Brown the name of a mom who wanted to be able to read books to her children. Cheryl visited this mother with the referring staff member, and set a date for her to come see the family literacy program in action. Although the program ran only a few hundred meters from her home, she missed the appointment. Another date was set, but the mom missed that appointment as well. When we spoke with the referring staff, we learned that this mother perceived the program location to be unsafe. If she went there with her children, she believed people would talk disparagingly of her. This was just one example of a kind of personal insecurity and lack of social support that created a barrier with no obvious solution.

Working in this community, we met men and women who were recipients of income assistance and parents whose children had caught the eye of state interventionists. They had limited social capital and were often right in assessing their neighbourhood as judgemental and unforgiving. They had good reason to be fearful of many public institutions. They had slender support in terms of friends and family, only intermittent telephone or internet access and limited literacy skills.

Our struggle to support such parents kept us wondering if and how literacy professionals can help our most marginalized citizens overcome their barriers to learning. What changes in perspective and practice would help these learners? What kinds of resources did these learners need in order to be effective? What are the implications for adult literacy policy and for the family literacy field? We were still reflecting on these questions when funding support for Family Learning And Health fell short.

Part Two: Quality Storytents and Bookwagon

Still determined to get programming to those families most isolated by poverty, low literacy skills, poor health and so on, we created a partnership between ourselves, a tenants' association and a public library, and built a new model of an inclusive, learner-centred, community-based family literacy program: the Quality Storytents and Bookwagon program.

Taking pictures is part of our reflection and research processes. This photo shows a typical bookwagon scenario. In good weather, about one third of bookwagon borrowing happens on the sidewalk.

The Quality Storytents program is an outdoor program that provides books for, and reading to, children and families. Although the primary activity is reading—adults read to children or themselves, and children read to children, adults or themselves— other storytent activities include borrowing and returning books, storytelling, letter and/or story writing, drawing and colouring, clapping and singing games, and so on. This program runs for nine to ten weeks through the summer. During the "off-season," the Bookwagon program provides year-round, door-to-door borrowing and adult literacy support for neighbourhood families on Saturday mornings.

The Storytents and Bookwagon programs were designed to overcome some key physical and socio-economic barriers to literacy. These included the location of programs and related transportation challenges, accessibility issues like hours of operation or family-friendliness, costs such as fees and memberships, or exclusion based on age, gender, health or learning goals. We placed these programs and resources in the neighbourhood where families lived, made them free and open to everyone, and had as few rules as possible.

We were also sensitive to socio-cultural and psychological barriers such as unfriendly staff,

perceptions and stigmas, discrimination based on income and socio-economic status and non-inclusive content. We used learner-centred techniques, believing in the potential of the individual and in building relationships through connecting behaviours, and avoiding disconnecting behaviours. We also made sure we had resources appropriate to the linguistic and cultural preferences of our users.

Building an accessible program like Quality Storytents was not easy, though it was made easier by the fact that we began with modest funding and had few models to follow. When questions arose, we answered them as a group, sometimes in the midst of crisis. At times, this process revealed that staff members held sharply different perceptions and expectations. The first heavy rainfall, for example, forced us to clarify, on the spot, what it meant to provide a consistent service—rain or shine—so that each child or family could have maximum access if they chose. An urge to protect books and materials from the wet conflicted with the sight of a mom and two children coming to the tent to read. Here, staff quickly made a group decision to stay, and then revisited that decision later in the day.

When books were borrowed and not returned, staff once again had to reflect on the goals of the program.

In the end, we decided that if we imposed fines or punishments, we would be creating a barrier. We simply told our participants that they could return their books next time and that they were still free to borrow another book. In our view, this policy has proved successful, and we lose fewer than 20 per cent of our books to wear and tear, misadventure and book collecting. However, the merit of this policy was not apparent to all staff at the beginning.

In this environment, program staff have to be able to shape or change policies on the ground. There is no time or reason to wait on some higher authority. That means that staff have to be clear about, and in agreement with, the goals of the program. As well, being able to do reflective practice using a choice theory model is a requirement for working in the program. Daily journaling and discussion are also important components of our job. Each day, we take time to talk, share our notes and try to make the program more accessible and relevant (Brown and Dryden 2004b).

Sometimes we are invited to provide an orientation to others who want to start a storytent in their neighbourhoods. In these orientations we stress that others may end up with a program that looks quite unlike ours. What is important is that people keep talking and reflecting, keep asking themselves what works and what doesn't, and keep working on their relationships with their participants and with each other.

Conclusion: beyond the checklist approach

Several authors have categorized barriers according to three categories: situational, institutional and dispositional (Centre de recherche et de développement en éducation, Faculté des sciences de l'éducation; Centre for Family Literacy Society of Alberta; Skage; Thomas).

Although "situational" is a relatively value-neutral term, the labels "institutional" and "dispositional" imply responsibility for barriers to participation. Institutional barriers, as the name suggests, are barriers created by or within institutions and organizations. Our initial attendance policy was an institutional barrier. Dispositional barriers are related to the attitudes and perceptions that adults bring to the learning environment. They may include negative or limited experience in education or placing a low priority on the program, sometimes described as "low motivation" (Centre for Family Literacy Society of Alberta).

In a New Brunswick study involving 12 family literacy focus groups, administrators and practitioners agreed that dispositional barriers such as "parental attitudes, parents feeling intimidated or afraid to take part in activities and parents' belief that it is up to the schools to teach their children how to read" were predominant barriers to family literacy participation (Centre de recherche et de développement en éducation, Faculté des sciences de l'éducation p. 12). The administrators and practitioners interviewed in this study seemed to focus on what the parents are doing or not doing (dispositional barriers), instead of what their program/program staff is doing or not doing (institutional barriers). By restating the problem of programs not serving learners as learners not attending programs, we practitioners miss the opportunity to reflect on what we are doing well or poorly.

Jenny Horsman cites specific examples demonstrating this confusion between motivation and context. She interviewed Maritime women enrolled in adult literacy programs, as well as referring agents and practitioners. She found that "some social service personnel expected undereducated women to willingly participate in upgrading programs" and "they spoke about the need to 'motivate' them" (Horsman p. 365). Program staff recognized situational barriers to participation, but "they still spoke of women having a poor attitude and lacking motivation" (Horsman p. 366). In this sense, program staff allowed themselves to recognize only those dispositional barriers they themselves had no responsibility for and no control over.

Although we read this while preparing for Family Learning And Health, Horsman's findings did not make sense to us until we faced the prospect of exiting families with sick children. In our reflections, we realized that it was ineffective to blame learners for not being able to attend, and that it was up to us to change what we were doing. In retrospect, this seems obvious to us. However, it was only in the context of a pilot project, freed of the constraints of established program policies and practices, that we recognized our responsibility to innovate. We had the freedom to change things because it was a pilot, and our choice theory training put us in the frame of mind that, if we wanted something to change, it was our responsibility to change it. We continue to innovate with the Storytent and Bookwagon programs because we are still free of established program

policies and funder-imposed constraints and still committed to a choice theory perspective.

We now believe that thinking about ways to get past barriers is part of what it means to facilitate a literacy program or offer literacy resources and supports. We believe that we always need to be ready to reflect critically on our own practices, policies and assumptions. We need to treat every program like a pilot. This presupposes a high level of commitment, a healthy work environment and strong relationships. It also presupposes a freedom to reject poor policies that, unfortunately, few practitioners are granted.

Reflective practice is an effective process for removing institutional barriers and (sometimes) dispositional barriers. However, this is not always enough. Family Learning And Health reached full capacity and, by the pilot's close, had other families on a waiting list. Program evaluations showed it was possible to deliver an effective family literacy program for low-income families facing significant literacy and health challenges (Brown and Dryden 2004a; Brown and Dryden 2002; Saint John Learning Exchange). Families increased their literacy and numeracy skills. They told us they no longer felt like failures. They told us they felt empowered as parents and better able to guard their family's health. They achieved their stated learning goals. Yet there was insufficient funding to turn this pilot into an ongoing program. Continuing space restrictions also signalled a lack of reliable support. Despite earning high praise from the community, the program's doors closed when funding support fell short.

Funding for the Quality Storytent and Bookwagon programs is equally precarious. The programs have won awards and community recognition. Evaluations show that children and adults read more, and their reading levels go up (Saint John Free Public Library 2004; Saint John Free Public Library 2003; Saint John Free Public Library 2007). Participants gain and keep a positive perception of themselves as readers. They find it easier to borrow books or access other kinds of literacy support. Parents tell us they read more to their children and that their own reading skills improve because of this. Yet, these positive outcomes have not changed the fact that, each year, we search for enough funding for delivery, or that almost all of our administrative and adult literacy support work is done on volunteer hours. We persist in this work because we are motivated by our belief in access to community and family literacy support as a social justice issue.

Last spring, in single-digit temperatures, with a falling barometer and rising winds, another dad signalled his appreciation for our work by joking, "What are you guys doing out here on a day like today?" Of the books his child borrowed he said, "Yeah. They're really helping. His reading's getting better. He enjoys them. The main thing. I help with some of them. Read them to him." Then he pulled one of us aside to ask for help with his own literacy. "You know, just to help the kids with their school stuff. Math and whatever. I've just been thinking about it." This is what can happen when reflective practice creates accessible literacy support. ∎

CHERYL BROWN MEd, RTC is a Community Literacy Worker in Saint John, NB. She has worked in literacy for sixteen years as a facilitator, Foundational Family Literacy trainer, administrator, and a Reality Therapy Practitioner.

WENDELL DRYDEN is a Community Literacy Worker in Saint John, NB. He has worked in family and adult literacy for ten years as a facilitator and trainer.

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