

Training Guide:

Health Literacy Study Circle+ Facilitators Training

January 2007



National Center for the Study of Adult Learning and Literacy

Harvard Graduate School of Education
101 Nichols House, Appian Way
Cambridge, MA 02138

NCSALL Training Materials are funded by the Educational Research and Development Centers program, Award Number R309B960002, as administered by the Institute of Education Sciences (formerly Office of Educational Research and Improvement), U.S. Department of Education, through contract to Harvard University. The content of *NCSALL Training Materials* does not necessarily represent the positions or policies of the Institute of Education Sciences, or the U.S. Department of Education, and you should not assume endorsement by the Federal Government.

CONTENTS

About NCSALL Health Literacy Study Circle+ Facilitators Training	1
About the Health Literacy Study Circle+ Facilitators Training Guide	9
To Do Before the Training	15
Steps for Facilitating the Training	31
NCSALL Feedback Form for Training Facilitators	79

ABOUT NCSALL HEALTH LITERACY STUDY CIRCLE+ FACILITATORS TRAINING

Who created this Health Literacy Study Circle+ Facilitators Training?

This training guide was created by the National Center for the Study of Adult Learning and Literacy (NCSALL). The guide is part of NCSALL's effort to help connect research and practice in the field of adult education and family literacy. The *Training Guide: Health Literacy Study Circle+ Facilitators* is one of a series of teaching and training materials that NCSALL has developed.

A Health and Adult Literacy and Learning (HALL)/NCSALL Health Literacy Study Circle+ is a professional development activity for adult basic education (ABE), adult secondary education (ASE), or adult English for Speakers of Other Languages (ESOL) practitioners. The Health Literacy Study Circles+ are designed to bring practitioners together to:

- Develop a deeper understanding of health literacy, health literacy research, and health literacy skills
- Expand their repertoire of cooperative learning tools
- Review, create, and teach health literacy lessons and units
- Develop ideas and activities to improve their students' ability to access and navigate health care systems, to understand chronic disease management, or to use disease prevention and screening systems
- Discuss how to build links between adult education and public health programs

The goal of NCSALL is to improve the quality of practice in adult education through research. We want to ensure that practitioners—teachers, counselors, program administrators, and others—have an opportunity to access, understand, judge, and use research in their work. Therefore, the goal of the NCSALL Health Literacy Study Circle+ Facilitators Training is to train new facilitators. Participants will understand NCSALL efforts to connect

research and practice, understand how study circles support these efforts, and learn how to facilitate a study circle.

Why was this Health Literacy Study Circle+ Facilitators Training created?

HALL/NCSALL Health Literacy Study Circles+ are designed to be facilitated by any experienced adult education practitioner. While facilitator training is not necessary, the training offers practice and support.

The purpose of this guide is to help experienced professional developers and others organize and conduct a one-day session to train and orient those who will serve as facilitators of a HALL/NCSALL Health Literacy Study Circle+. Facilitators of the Health Literacy Study Circle+ Facilitators Training should be experienced trainers. This guide includes the information and materials you will need to conduct the training, but not background information on planning and facilitating training.

What is the Health Literacy Study Circle+ Facilitators Training?

The Health Literacy Study Circle+ Facilitators Training is a professional development activity to train facilitators about the HALL/NCSALL Health Literacy Study Circle+. The facilitators will then facilitate a Health Literacy Study Circle+ for practitioners (teachers, tutors, counselors, support staff, and program administrators) from programs that provide adult students with adult basic education (ABE), adult secondary education (ASE), and English for Speakers of Other Languages (ESOL) education services.

This training prepares participants to facilitate the *Skills for Health Care Access and Navigation Health Literacy Study Circle+*. With modifications this design could be used for other Health Literacy Study Circles+, but since most practitioners will want to begin with the *Skills for Health Care Access and Navigation Study Circle+*, we anticipate that this training will be used initially to orient facilitators. Experienced facilitators should be able to prepare to facilitate the

other two Health Literacy Study Circles+, *Health Literacy Study Circle+ Skills for Chronic Disease Management* and *Skills for Disease Prevention and Screening*, by reading through the facilitators' guides and perhaps consulting with other facilitators.

The Health Literacy Study Circle+ Facilitators Training on the topic of health care access and navigation includes the following activities:

- Build the understanding of health literacy, health literacy research, and health
- Consider roles as facilitators—managing the study circle+ process and supporting teachers in their learning and lesson planning
- Examine the HALL/NCSALL *Health Literacy Study Circle+ Facilitator's Guide: Skills for Health Care Access and Navigation* (or a Health Literacy Study Circle+ Facilitator's Guide on another topic)
- Participate in and talk about typical Health Literacy Study Circle+ activities—introductions, discussion of own experiences, jigsaw, brainstorming, force-field analysis, dance and balcony, planning for next steps, and evaluation
- Consider how to support teachers' learning and planning by modeling participatory adult education principles and looking at a way to give and receive feedback
- Review the next steps and logistics for facilitating a study circle in their programs, regions, and/or states

What should the outcomes of the Health Literacy Study Circle+ Facilitators Training be?

We hope that the participants will understand NCSALL efforts to connect research and practice and how study circles support these efforts. Also, we hope the participants will learn how to facilitate a HALL/NCSALL Health Literacy Study Circle+.

If participants leave the group with a clear plan for facilitating a health literacy study circle+, the study circle+ facilitator training is a success.

Who should participate?

The Health Literacy Study Circle+ Facilitators Training is designed for any practitioner who works in an adult education program: teachers, program directors, counselors, volunteers, or others. It is broad enough to be of interest to ABE, ASE, and ESOL practitioners who work in a variety of delivery settings: community-based organizations, local educational authorities, libraries, correctional facilities, etc. The design of the Health Literacy Study Circle+ Facilitators Training and the readings should be appropriate for both new and experienced practitioners.

The training is designed for approximately 20 participants who will be serving as study circle facilitators.

How long is the Health Literacy Study Circle+ Facilitators Training?

The study circle+ facilitator training is designed for one, six-hour session and includes one hour for lunch.

How do I recruit participants?

NCSALL has produced a sample flyer that provides information about this NCSALL Health Literacy Study Circle+ Facilitators Training, which you can find on p. 7. The flyer presents an overview of the topic and a brief description about what will be covered in the training. It also includes a registration form for practitioners to mail back to you.

You are welcome to use the flyer to send out via mail or on a Web site to let practitioners know when and where the study circle facilitator training will be taking place. Or, you can create your own flyer, using the NCSALL flyer as an example.

How do I organize the training?

When you feel that you have solid commitments from the number of participants you are seeking, contact them to confirm their participation in the Health Literacy Study Circle+ Facilitators Training. At this time, reconfirm the times, date, and location of the Health Literacy Study Circle+ Facilitators Training with the participants.

As mentioned above, this Health Literacy Study Circle+ Facilitators Training has been designed for a group of practitioners to meet for one session that is a day long. Because one session's worth of time is such a limited period for a group to meet, we suggest that several short readings and a brief cover letter with information about the Health Literacy Study Circle+ Facilitators Training be sent to practitioners to read before the session.

After confirming their participation, send each participant the packet of information and materials to read before the session (Pre-Meeting Packet of readings and handouts on pp. 17–30). Participants need to receive this packet at least 10 days before the training.

You, as the facilitator, will also want to review the entire guide and read over the Pre-Meeting Packet so that you are ready for the training and for questions that participants may have. You need to be familiar with all of the readings and with facilitating the Health Literacy Study Circle+.

One of the final activities in this training is a review of the plans for a Health Literacy Study Circle+ in the participants' particular programs, regions, or states. You will need to be certain that you have the planning information or that someone who does participates in the training.

Be sure that you arrive early for the training in order to set up the room; arrange your newsprint; and organize handouts, pens, tapes, etc. It's nice to have some sort of refreshment, such as juice, coffee, or water. Check out where the restrooms are so you can tell participants where they are located, and make sure the heating or cooling in the room is appropriate.

Always bring at least two or three extra copies of the readings for participants who forget to bring their own. You should have (or compile during the training) a list of participants and their telephone numbers or e-mail addresses so participants can contact one another after the training.

What kind of support can I expect?

If you want to discuss the Health Literacy Study Circle+ Facilitators Training beforehand with someone from NCSALL, we'd be happy to do so. We can be reached at:

NCSALL/World Education
44 Farnsworth Street
Boston, MA 02210-1211
(617) 482-9485
ncsall@worlded.org

We'd love to hear how it went so that we can improve this training. We welcome your feedback about how the NCSALL *Training Guide: Health Literacy Study Circle+ Facilitators* worked and how it could be improved. Contact us (telephone, e-mail, or letter) and tell us how it went and what you'd do differently next time.

(SAMPLE FLYER)

**Health
Literacy Study
Circle+
Facilitators
Training**

Interested in facilitating a Health Literacy Study Circle+ on health care access and navigation (or another topic)?

Questions about health literacy, health literacy research, and health literacy skills are particularly relevant as programs and teachers struggle with choosing the most effective ways to develop adults' skills. **[Insert name of your organization]** is sponsoring a Health Literacy Study Circle+ Facilitators Training to train participants to conduct study circles+.

In this Health Literacy Study Circle+ Facilitators Training, you will understand NCSALL's efforts to connect research and practice and how study circles+ support these efforts. You, together with other practitioners, will meet to:

- Build your understanding of health literacy, health literacy research, and health literacy skills
- Consider your role as a facilitator—managing the study circle+ process and supporting teachers in their learning and lesson planning
- Examine NCSALL's *Health Literacy Study Circle+ Facilitator's Guide: Skills for Health Care Access and Navigation* (or a Health Literacy Study Circle+ Facilitator's Guide on another topic)
- Participate in and talk about typical Health Literacy Study Circle+ activities—introductions, discussion of own experiences, jigsaw, brainstorming, force-field analysis, dance and balcony, planning for next steps, and evaluation
- Consider how to support teachers' learning and planning by modeling participatory adult education principles and looking at a way to give and receive feedback
- Review the next steps and logistics for facilitating a study circle in their programs, regions, and/or states

The Health Literacy Study Circle+ Facilitators Training is organized into one, six-hour training. We ask that you attend the entire training.

During the training you will explore the Health Literacy Study Circle+ Facilitator's Guide on skills health care access and navigation, review sample lessons,

brainstorm ways to support teachers in using theme-based instruction, and address some facilitation challenges.

The Health Literacy Study Circle+ Facilitators Training is a staff development activity. Continuing Education Credits (CEUs) or Professional Development Points (PDPs) may be available.

The date and location of the Health Literacy Study Circle+ Facilitators Training is:

If you would like to join the Health Literacy Study Circle+ Facilitators Training, please complete this form and send it to: **[insert facilitator's name]**, **[insert facilitator's address]** by **[insert deadline]**. I can also be reached at **[insert facilitator's telephone number]** and **[insert facilitator's e-mail]**.

Name: _____ Position: _____

Home address: _____

Home telephone: _____ Work telephone: _____ E-mail: _____

ABOUT THE HEALTH LITERACY STUDY CIRCLE+ FACILITATORS TRAINING GUIDE

What is the Health Literacy Study Circle+ Facilitators Training Guide?

This guide includes all of the information and materials you will need to conduct the Health Literacy Study Circle+ Facilitators Training, including:

- A page listing the preparations you need to make before the session. This includes the newsprints to be made, the handouts to photocopy, and the materials to bring.
- A step-by-step guide of the activities for the session and the approximate time for each activity, as well as facilitator notes and other ideas for conducting the activities. Handouts, ready for photocopying, are included at the end of the session.

The study circle guide that participants will need (either HALL/NCSALL *Health Literacy Study Circle+ Facilitator's Guide: Skills for Health Care Access and Navigation* or the guide you have chosen) to read or review is not included in this training guide. Obtain a copy for each participant to use during the session, or ask participants to obtain their own copies by downloading them free from the NCSALL Web site at www.ncsall.net/?id=891.



It is important that discussions and activities meet the needs of all group members. As the facilitator, you need to be flexible and may need to modify some activities to fit the needs and learning styles of participants. This Health Literacy Study Circle+ Facilitators Training Guide should be used as a *guide*, not a rigid script.

How is the guide organized

There are two main sections in this guide:

1. The introduction *About NCSALL Health Literacy Study Circle+ Facilitators Training* and *About the Health Literacy Study Circle+ Facilitators Training Guide* that you are reading now
2. *Steps for Facilitating the Health Literacy Study Circle+ Facilitators Training*, which include:
 - *To Do Before the Training*
 - *Steps for Facilitating the Training and Handouts*

The steps include how-to instructions for conducting all the activities in each session and:

- the newsprints that need to be prepared beforehand, denoted by the icon  and their titles are always indicated in the steps by being underlined
- the handouts that need to be photocopied beforehand, denoted by the icon  and their titles are always indicated in the steps by being *italicized*

The training includes an evaluation activity to conduct at the end to get feedback from the participants about what was useful and what could be improved.

At the end of the steps, there is a “Quick Reference Sheet for Facilitating...” the training, which you can pull out of the notebook and take to the session as an easy reference guide for conducting each activity in that session. It looks like this:

Quick Reference Sheet for Facilitating the Training	
1. Welcome and Introductions	<i>10mins., WHOLE GROUP</i>
<ul style="list-style-type: none"> • Everyone introduces themselves. • Housekeeping and logistics. 	

What if I want to change the activities listed in the guide?

This guide is intended to help first-time training facilitators who want a lot of guidance. It is, however, not intended to be a script that must be followed. If you have a different idea for how to do an activity, you should use it. To help you, throughout the steps, we have included the following features:

Another Idea for several of the activities, which look like the sample at right when you see them in the steps

Another Idea
(sample)

Note to Facilitator, which look like the sample box at right when you see them in the steps

Note to Facilitator
(sample)

Questions to prompt discussion are provided for you throughout the guide, and they look like this when you see them in the steps:

? How would you...?

How is the Health Literacy Study Circle+ Facilitators Training organized?

Participants are introduced to health, experience typical Health Literacy Study Circle+ activities on the topic of skills for health care access and navigation, and plan for facilitating a study circle in their own states, regions, or programs.

The **objectives** state that, by the end of the training, participants will be able to:

- Outline the objectives of the Health Literacy Study Circle+ and the connections between health and literacy

- Explain their roles as facilitators of the health literacy study circle+—managing the process and supporting teachers in their learning and lesson planning
- Use the HALL/NCSALL *Health Literacy Study Circle+ Facilitator’s Guide: Skills for Health Care Access and Navigation* (or the guide you have chosen)
- Prepare, organize, and facilitate a Health Literacy Study Circle+ in their states, regions, or programs

The **main activities** include:

1. Welcome and Introductions
2. Objectives and Agenda
3. Overview of Health Literacy Study Circle+ Objectives
4. Review of Facilitator’s Guide
5. Walk Through/Talk Through* Session One
6. Walk Through/Talk Through* Session Two
7. Walk Through/Talk Through* Sessions Three, Four, and Five
8. Supporting Teachers’ Learning and Planning
9. Dance and Balcony†
10. Planning Next Steps
11. Evaluation

* See p. 37 for an explanation of “Walk Through/Talk Through.”

† See p. 56 for an explanation of “Dance and Balcony.”

**Steps for
Facilitating the
Health Literacy
Study Circle+
Facilitators
Training**

TO DO BEFORE THE TRAINING

Send out the Pre-Meeting Packet to confirmed participants two weeks before the training. It's also a good idea to call participants one week before the training to confirm that they received the packet.

The Pre-Meeting Packet for the Health Literacy Study Circle+ Facilitators Training should include the four items listed below, all of which follow and are ready for photocopying.

We suggest that you organize the handouts and readings for participants in two-sided pocket folders and distribute a folder of materials to each participant.

A reminder about the cover letter: You will need to write into the letter the places, dates, and times of the sessions; information about stipends and travel expenses; and your telephone number and e-mail address and sign it before you make copies.

Contents of Pre-Meeting Packet

- Information About the Health Literacy Study Circle+ Facilitators Training (cover letter)
- Agenda and Objectives
- What is NCSALL?
- A Conversation with *Focus on Basics: Learning How to Teach Health Literacy*

Information About the Health Literacy Study Circle+ Facilitators Training

Date:

Dear Participant:

Thank you for registering to participate in the Health Literacy Study Circle+ Facilitators Training. I really look forward to meeting with you. The Health Literacy Study Circle+ Facilitators Training was developed by the National Center for the Study of Adult Learning and Literacy (NCSALL).

We will have [*insert number*] participants in the training. We will meet at [*insert location*]. The dates and time of the training is:

[*insert date and time*]

This letter will tell you a bit more about what to expect from the training and from study circles, what type of support you will receive, and what to do before the training.

Expectations

As a Health Literacy Study Circle+ facilitator you will be asked to lead a group of adult education practitioners in a professional development process that involves discussing health literacy and developing ideas and activities for improving adult students' ability to access and navigate health care systems. Your role will be to facilitate learning, not to be an expert! You will be facilitating the activities in the health literacy study circle+ sessions *and* supporting teachers as they carry out the various activities in their own classes.

At the training you will be experiencing typical Health Literacy Study Circle+ activities, learning more about facilitation, and planning your Health Literacy Study Circle+ work.

Support for Participants

[*insert information about stipends and expenses*]

Before the training, please read the enclosed materials:

- Agenda and Objectives
- What is NCSALL?
- A Conversation with *Focus on Basics*: Learning How to Teach Health Literacy

Please bring the materials with you to the training. We will discuss the readings at the training.

If you have any questions about the Health Literacy Study Circle+ Facilitators Training in general or about what to do before the training, please call me at [*insert facilitator's telephone number*] or send me an e-mail at [*insert facilitator's e-mail address*].

Thanks for participating. I'm looking forward to a great training.

Sincerely,

[*insert facilitator's name and title*]

Agenda

Welcome and Introductions

Objectives and Agenda

Overview of Health Literacy Study Circle+ Objectives

Review of Facilitator's Guide

Walk Through/Talk Through Session One

Walk Through/Talk Through Session Two

Walk Through/Talk Through Sessions Three, Four, and Five

Supporting Teachers' Learning and Planning

Dance and Balcony

Planning Next Steps

Evaluation

Objectives

By the end of the training, you will be able to:

- Outline the objectives of the Health Literacy Study Circle+ and the connections between health and literacy
- Explain your role as facilitator of the health literacy study circle+—managing the process and supporting teachers' in their learning and lesson planning
- Use the HALL/NCSALL *Health Literacy Study Circle+ Facilitator's Guide: Skills for Health Care Access and Navigation* (or the guide you have chosen)
- Prepare, organize, and facilitate a Health Literacy Study Circle+ in your state, region, or program



National Center for the Study of Adult Learning and Literacy

What is NCSALL?

NCSALL's Mission

NCSALL's purpose is to improve practice in educational programs that serve adults with limited literacy and English language skills, and those without a high school diploma. NCSALL is meeting this purpose through basic and applied research, dissemination of research findings, and leadership within the field of adult learning and literacy. NCSALL is a collaborative effort between the Harvard Graduate School of Education, World Education, The Center for Literacy Studies at The University of Tennessee, Rutgers University, and Portland State University. NCSALL is funded by the U.S. Department of Education through its Institute of Education Sciences (formerly Office of Educational Research and Improvement).

NCSALL's Research Projects

The goal of NCSALL's research is to provide information that is used to improve practice in programs that offer adult basic education, English for Speakers of Other Languages, and adult secondary education services. In pursuit of this goal, NCSALL has undertaken research projects in four areas: (1) learner persistence, (2) instructional practice and the teaching/learning interaction, (3) professional development, and (4) assessment.

NCSALL's DISSEMINATION INITIATIVE

NCSALL's dissemination initiative focuses on ensuring that practitioners, administrators, policymakers, and scholars of adult education can access, understand, judge, and use research findings. NCSALL publishes *Focus on Basics*, a quarterly magazine for practitioners; *Review of Adult Learning and Literacy*, an annual scholarly review of major issues, current research, and best practices; and *NCSALL Reports* and *Occasional Papers*, periodic publications of research reports and articles. For more about NCSALL, or to download free copies of our publications, please visit our Web site at:

www.ncsall.net

A Conversation with *Focus on Basics*: Learning How to Teach Health Literacy

Garner, Barbara (2005). A conversation with *FOB*: Learning how to teach health literacy. *Focus on Basics*, 8: A, 33–36.

The Health Literacy Study Circle+ Facilitator Guides is a new series being published by NCSALL. Each of the three guides provides all the materials and methods needed to facilitate a 15-hour study circle that introduces teachers to a skills-based approach to health literacy. Focus on Basics spoke with NCSALL's Lisa Soricone, one of the Study Circle+'s authors; and New York City Literacy Assistance Center's (LAC) Winston Lawrence, a staff development facilitator who piloted the guides. We talked about what a Study Circle+ is, what a skills-based approach to health literacy is, and why both are valuable to adult basic educators.

FOB: Let's start at the beginning. What is a study circle?

WINSTON: A study circle is a group of anywhere from eight to 12 people who come together to discuss and explore a particular topic of concern. Each person in the group may be given an assignment to investigate some aspect of the topic. Subjects can be anything, from sexuality, to Marx, to issues in the community. NCSALL has study circle guides on a variety of topics including learner persistence and accountability. Study circles have been conducted in many communities to discuss and understand conditions of social life. It's a discussion-oriented structure that enables people to arrive at a better understanding of a topic or issue.

LISA: Sometimes study circles culminate in a series of strategies and next steps that participants can pursue.

FOB: And the "+"?

Winston: While other study circles may end with the generation of ideas for further action, the Study Circle+ is designed to integrate action into the study circle experience. Teachers take the discussion from the group back to the classroom, where they conduct a needs assessment and try out new health literacy lessons. Teachers then return to the study circle and process these experiences with the group.

LISA: The "+" notion is that you don't just read and talk. You use the Study Circle+ discussions to guide new activities in your classroom and then build on that experience within the Study Circle+ sessions.

WINSTON: So the difference is the real practical outcome: the teacher tries out the lesson, returns to the study circle, and shares the results of the classroom experience.

FOB: How did you get involved in the pilot?

WINSTON: The Literacy Assistance Center, which provides professional development opportunities for ABE programs in New York City, was asked by the [New York City] Mayor’s office to assist in developing a framework to inform students in literacy classes about how they could access low-cost health insurance. We are not direct providers of literacy services. We had never had an initiative like this on health literacy. And we certainly couldn’t just go to programs and say “teach health insurance.” So we were interested in finding a model that enabled teachers to bring health literacy into the classroom in a structured and integrated way. We knew that teachers were not very comfortable teaching health content in the classroom. We said, “Let’s try to look for something else that would be more interesting and engaging.” We reviewed literature, we looked at who was doing what. In the course of investigating, we learned that Dr. Rima Rudd [of Harvard School of Public Health and NCSALL] was doing some work in this area and knew that we should talk with her.

FOB: You also needed programs to work with. How did you find them?

WINSTON: We looked at the literacy community [in New York City] and determined that this would be difficult to do across all five boroughs. It was going to be better to start with a few programs. We looked at context and neighborhoods, and also capacities of programs. As we looked for programs, we also thought that we could conduct a pilot with a couple of programs. Within that context we identified four programs. Thirteen teachers and 183 students participated in the project.

FOB: Did they see health as an issue for their learners?

WINSTON: As we raised the question, they all said that this would be interesting for their students. In Sunset Park, where there’s a large Asian and Hispanic community, they agreed that it was an area of concern. The Queens Public Library, which serves the most ethnically diverse community in the city and is reported to have the largest ESOL program in the country, said that health has always been a part of their ESOL curriculum. We also met with the Mid-Manhattan Adult Learning Center, based in Harlem, where ESOL teachers noted that their students were

interested in health. Many of them were interested in pursuing health careers. Carroll Gardens, in Brooklyn, saw this as an opportunity to work with its Arab-speaking women around health issues.

FOB: So there was an opportunity, and a need. What about the approach itself? How did the Study Circle+ approach differ from other staff development approaches you've used in the past?

WINSTON: We've done institutes, one-day workshops, and half-day workshops, but the Study Circle+ approach has some attractive elements that makes it different. First, it did not take teachers away all day. As you know, many adult education teachers teach part time, sometimes in several places. If a teacher is working at different institutions, it's difficult for that person to be in a workshop all day: it creates a gap at the other places they work. So the three-hour sessions seemed a good way to organize staff development.

The five three-hour sessions were really spread out: starting in December and ending in February. Teachers had time to get back to the classroom and test out what they were learning.

The role of the staff developer was that of a facilitator: providing teachers with research-based articles from NCSALL and from the medical community. As teachers read data showing the connections between low literacy and poor health outcomes, I could see them opening up and becoming excited. The model of professional development is useful and valuable.

Finally, the model gives teachers the opportunity to receive feedback from peers. In the evaluation, most of the teachers said that receiving feedback was one of the most important elements of the project. The sharing of experiences was another positive aspect of the Study Circle+ model.

FOB: What about the content?

WINSTON: In the first place, the issue of disparity in health and how the health system treats people seemed to us an attractive proposition, because it gets teachers focused on a social objective. The Study Circle+ provides an organized framework from the point of view of what was to be learned. It organizes health literacy into three areas: health care access and navigation, managing chronic illness, and disease prevention and screening. The framework allowed us to avoid engaging teachers in teaching health content such as cancer or diabetes. Health is the context,

but the teachers focus on teaching language and literacy skills. The ability to instruct therefore doesn't depend on the teacher's interest in or knowledge of health.

FOB: What were the challenges?

WINSTON: One challenge was how to get literacy programs to send several teachers to attend five sessions of professional development. Some programs have to pay substitute teachers while teachers are away. We were fortunate enough to have a grant to provide some monetary assistance to programs. Sometimes such funds are not available to literacy programs.

A related challenge is the time commitment required. The Study Circle+ takes 15 hours of professional development time. Many teachers who participated said they really benefited, but hoped the time could be shortened in future programs.

FOB: Doesn't it take time to learn and implement fully a new practice?

WINSTON: Yes, but as you know, that time is not available in ABE programs. The monetary resources needed to do a 15-hour staff development program on one topic, important though it may be, is a real issue. What incentive do teachers or programs have to make this kind of investment?

FOB: The strength of the model is one reason to run a Study Circle+, but time is an important consideration. What else should staff development programmers consider?

WINSTON: When considering these particular Study Circles+, one important issue for program managers is their own philosophy and whether they see navigating the health care system as a legitimate activity in which their students should be engaged.

A second consideration is the notion that as students engage in contextualized learning, they are more likely to show educational gains. Teachers told us in the ESOL classes that students became quite engaged, they were asking questions, talking, discussing things. This can positively affect the NRS outcomes. [The National Reporting System is a student gain measurement system that programs must report on.] In fact, the preliminary evaluation showed that students who participated in health literacy classes showed early educational gains. Students

become interested in these health issues, so they become engaged and motivated learners.

***FOB:* Let's shift from the model of professional development to the concept of health literacy. What do you mean by a skills-based approach to health literacy?**

LISA: It's an approach that focuses teachers' attention on the reading, writing, math, and communication skills that adults need to carry out the wide range of skills needed to manage their health. It's not a content focus. The skills are the driving force behind the lessons and the units. The health content is limited, although it can be expanded by having, for example, a medical partner or resource person come into the classroom. With this approach, the teacher focuses on the literacy, language, and math skills that students need to carry out health-related tasks.

This approach isn't new; some teachers are already doing this kind of stuff. The Study Circles+ offer a way to make it more consistent, to encourage more teachers to do it, and to help teachers feel more confident doing this kind of work.

***FOB:* Why is a skills-based approach to health literacy important?**

LISA: There are four reasons. First, the degree to which individuals have the capacity to use their skills to make decisions and take action on their health is important. It may involve deciding what foods to eat, habits like smoking, making sense of health information, accessing health care, filling out forms, finding your way physically in the health center. These are demanding tasks for all of us but really hard for folks with low education levels and limited English. This approach helps reduce disparities in the health outcomes of people such as our ABE students.

A second reason for using a skills-based approach to health literacy, if you're interested in health literacy, is that when teachers approach health education via content, they're likely to feel limited. They're not health educators, and some topics, such as cancer, are touchy areas. Teachers are comfortable teaching basic skills, however, and that's the emphasis with this approach.

This leads to the third reason: by approaching health literacy via basic skills, it doesn't increase demands on teachers. Instead, it fits with their goals of building basic skills.

The fourth reason is transferability. The skills we're talking about with health literacy are also transferable to other contexts: advocating for

yourself, asking questions for clarification, reading charts and tables for information, understanding instructions, and finding your way around a new environment. These are skills that people need at work, as parents, and members of their communities.

FOB: What does it involve for teachers?

LISA: The first step is to understand the connections between health-related activities and the reading, writing, math, and communication skills that teachers already work on in their ABE and ESOL classes. Teachers may already have some sense of such connections, such as in making a doctor’s appointment, filling out forms, or reading labels, but there are many more links between health tasks and ABE/ESOL instruction. The Study Circle+ Series is designed to provide teachers with structured opportunities to explore these links with specific emphasis on the areas of health care access and navigation, chronic disease management, and disease prevention and screening. These are the three areas the health field has identified as critical for the populations served by ABE and ESOL programs.

Teachers can also continue teaching skills as they currently do but weave in examples related to health contexts. For example, GED teachers who work on reading tables and charts might use examples that relate to health, such as a health insurance eligibility table or body mass index chart.

WINSTON: As the teachers participated in the project and saw the connections, they became much more enthused and committed to working with students on it. It seemed to renew their commitment to helping students navigate and access the health system.

As part of the study circle, teachers ascertain students’ needs. That’s another important area. The curriculum, in a way, is governed by students’ needs. If the dominant concern in one community is asthma, learning activities can be designed to address that. Somewhere else teachers might focus on obesity. Teachers would then build language and literacy skills on the tasks students need to address these relevant issues. The framework allows for students to inform the process. Ultimately, one of the objectives is that students can advocate for themselves and their families. When they become aware of the issues in their community, they can advocate around those issues.

FOB: Study Circle+ encourages practitioners to partner with local health care providers. What should they be doing together? Why?

WINSTON: At the LAC, when we looked at the model, we thought that if we were going to support teachers they would need a connection with a health care agency to provide access to health facilities and personnel. They need to take students to see the physical layout of health centers and hospitals. Many students have had a bad experience at hospital. It might have been traumatic situation and students might have had some incidental learning in the process. By seeing the system firsthand, students can engage in some deliberate learning.

Another reason to create these partnerships is that while teachers are focusing on language and literacy skills, sometimes students may say, "I need to know more on this topic." We don't want the teacher to be saddled with the responsibility [of being the content expert]. Through the program manager, someone from the hospital will visit the class and do a presentation on the topic in question. The partnering is necessary so that health staff are not being asked on an ad hoc basis but through a continuing, dynamic relationship. We're expecting that the literacy site can be seen as a laboratory for the health agency since the students in the literacy site are probably representative of the patients in that neighborhood. As the health provider talks to the students, he or she gains knowledge that can be taken back to the hospital setting. This includes insights into issues that affect this population and about the barriers put up by the health system. A mutual education process occurs.

In Harlem, students were invited to the Harlem Hospital, where they met with staff from various departments including Maternity and Emergency. The director of the Emergency Department, who had worked all night, was present the next morning to give students a tour of the department. The students seemed so appreciative of that, and of hearing the explanations of what goes on. In presentations in their classrooms, they were able to tell their fellow students what they saw and share their changed views of the hospital. That's what you get in a strong partnership: a feeling of commitment on the part of the health sector to help the students know the system.

Another advantage of partnering is that when a major public health issue gets introduced, you already have this relationship to build on, allowing the health and education sectors to work together. This helps to build community capacity, with the two agencies working together and strengthening each other.

To download the Study Circle+ Facilitator Guides, go to <http://www.ncsall.net/index.php?id=891>.

ABOUT THE PARTICIPANTS

Lisa Soricone is a research associate and former fellow at NCSALL. She has taught adult basic education and English for speakers of other languages and did doctoral research on the labor market outcomes of Spanish GED recipients. Her current work focuses on evidence-based practice in adult education and the development of the Study Circle+ Series.

Winston Lawrence is a senior professional development associate with the Literacy Assistance Center (LAC) in New York City. He is responsible for implementing the LAC's Health Literacy Initiative. Winston has taught with the Department of Education, City University of New York, and in community-based organizations in New York City. He has a doctorate in adult education from Northern Illinois University.


STEPS FOR FACILITATING THE TRAINING

Objectives: By the end of the first session, participants will be able to...

- Outline the objectives of the Health Literacy Study Circle+ and the connections between health and literacy
- Explain their roles as facilitators of the health literacy study circle+—managing the process and supporting teachers’ in their learning and lesson planning
- Use the HALL/NCSALL *Health Literacy Study Circle+ Facilitator’s Guide: Skills for Health Care Access and Navigation* (or the guide you have chosen)
- Prepare, organize, and facilitate a Health Literacy Study Circle+ in their states, regions, or programs

Time: 6 hours

Preparation:

 **NEWSPRINTS** (Prepare ahead of time: Underlined in the steps)

- ___ Access and Navigation HLSC+ Timeline
- ___ Objectives
- ___ Agenda
- ___ Health Literacy Study Circles+
- ___ Anticipated Outcomes
- ___ Facilitator’s Guide
- ___ Our Challenges and Barriers in Health Care Access and Navigation
- ___ Access and Navigation Tasks
- ___ Successful Planning and Implementation of Lessons and Unit

___ Dance and Balcony



HANDOUTS (Prepare ahead of time: *Italicized* in the steps)

___ Shared Goals but Different Roles in Health Literacy

___ Skills for Health Care Access and Navigation: Goals and Objectives

___ Access and Navigation Health Literacy Study Circle+ Timeline

___ Skills for Health Care Access and Navigation: Session One

___ In-Class Needs Assessment Packet

___ Skills for Health Care Access and Navigation: Session Two

___ Table of Access and Navigation Tasks and Underlying Skills

___ Lesson Review Sheet

___ Sample Lessons (one set for whole group)

___ Skills for Health Care Access and Navigation: Session Three

___ Skills for Health Care Access and Navigation: Session Four

___ Skills for Health Care Access and Navigation: Session Five

___ Lesson Plan Template

___ Health Literacy Unit Template

___ Some Principles of Participatory Education

___ Feedback

___ Evaluation Prompts

(Make a few extra copies of the Pre-Meeting Packet materials for participants who forget to bring them.)

MATERIALS

- ___ HALL/NCSALL *Health Literacy Study Circle+ Facilitator's Guide: Skills for Health Care Access and Navigation* [one copy for each participant]
- ___ blank newsprint sheets
- ___ newsprint easel
- ___ markers, pens, tape
- ___ scarf, hat, or other object to signal when an activity is being facilitated

STEPS:

- **Post the newsprint Access and Navigation Health Literacy Study Circle+ Timeline.**

Access and Navigation Health Literacy Study Circle+ Timeline		
	Facilitator	Participating Teachers
Before Session One <ul style="list-style-type: none"> • Read materials and research. 	Read <i>Overview and Preparation for Session One and Session One: Introduction to Health Literacy.</i> Read and copy and mail to participants the <i>Materials in Preparation for Session One.</i> Prepare materials needed for Session One.	Read the <i>Materials in Preparation for Session One.</i> Complete the forms: Participant Expectations and Participant Definition of Health Literacy.
Session One <ul style="list-style-type: none"> • Discuss readings. • Discuss meaning of health literacy for adult education. • Plan needs assessment. 	Use <i>Session One: Introduction to Health Literacy</i> to facilitate Session One.	Participate in Session One.
Between Sessions One and Two <ul style="list-style-type: none"> • Conduct Health Literacy Needs Assessment. 	Be available by telephone or e-mail to answer questions. Prepare for Session Two.	Conduct needs assessment with students.
Session Two <ul style="list-style-type: none"> • Review needs assessment. • Consider skills needed for access and navigation. • Plan to teach sample lesson. 	Use <i>Session Two: Identifying Access and Navigation Tasks and Underlying Skills</i> to facilitate Session Two.	Participate in Session Two.
Between Sessions Two and Three <ul style="list-style-type: none"> • Teach sample lesson. 	Be available by telephone or e-mail to answer questions. Prepare for Session Three.	Teach sample lesson.
Session Three <ul style="list-style-type: none"> • Review sample lesson • Plan own lesson. 	Use <i>Session Three: Integrating Health Literacy Skills into Instruction</i> to facilitate Session Three.	Participate in Session Three.
Between Sessions Three and Four <ul style="list-style-type: none"> • Teach own lesson. 	Be available by telephone or e-mail to answer questions. Prepare for Session Four.	Teach the health literacy lesson you planned.
Session Four <ul style="list-style-type: none"> • Share teaching experiences. • Consider unit plans. • Consider how to measure health literacy skills. 	Use <i>Session Four: Planning Lessons, Units, and Evaluations</i> to facilitate Session Four.	Participate in Session Four.
Between Sessions Four and Five <ul style="list-style-type: none"> • Plan health literacy unit. 	Be available by telephone or e-mail to answer questions. Prepare for Session Five.	Plan health literacy unit.
Session Five <ul style="list-style-type: none"> • Plan how to implement unit. • Plan continuation. 	Use <i>Session Five: Developing Strategies for Success</i> to facilitate Session Five.	Participate in Session Five.

1. WELCOME AND INTRODUCTIONS

(10 MINUTES)


- **Welcome participants** to the Health Literacy Study Circle+ Facilitators Training.
- **Introduce yourself** and state your role as facilitator of the training. Explain how you came to facilitate this training and who is sponsoring it.
- **Ask the participants to introduce themselves briefly** (name, program and location, and role). If participants are from a wide area, you may want to post a map, and ask participants to point out where they live.
- To get a shared sense of the group’s experiences, **ask participants for a show of hands** if they have:
 - Participated in a study circle
 - Facilitated professional development activities
 - Facilitated a study circle
 - Planned theme-based lessons or units
 - Helped others plan theme-based lessons or units
- **Introduce NCSALL and its Connecting Practice, Policy, and Research (CPPR) initiative** by reminding the participants that they received a page on NCSALL in their pre-meeting packet. Tell them that NCSALL has developed Health Literacy Study Circle+ as one way to connect practice and research. Invite them to visit the NCSALL Web site (www.ncsall.net) to find out more about the research NCSALL conducted and to look at the various teaching and training materials developed by NCSALL. They can also find the practitioner newsletter, *Focus on Basics*, on the Web site.
- **Make sure that participants know** where bathrooms are located, when the session will end, when the breaks and lunch will be, and any other “housekeeping” information.

Note to Facilitator

Since time is very tight, it's important to move participants along gently but firmly if they are exceeding their time limit for introductions.

2. OBJECTIVES AND AGENDA

(10 MINUTES)

-  **Refer participants to the *Agenda and Objectives* that was in their Pre-Meeting Packet.**
- **Post the newsprints Objectives and Agenda.**

Objectives

By the end of the session, you will be able to:

- Outline the objectives of the Health Literacy Study Circles+ and the connections between health and literacy
- Explain your role as facilitator of the health literacy study circle+—managing the process and supporting teachers' in their learning and lesson planning
- Use the HALL/NCSALL *Health Literacy Study Circle+ Facilitator's Guide: Skills for Health Care Access and Navigation* (or the guide you have chosen)
- Prepare, organize, and facilitate a Health Literacy Study Circle+ in your state, region, or program

Agenda

1. Welcome and Introductions (Done!)
2. Objectives and Agenda (Doing)
3. Overview of Health Literacy Study Circle+ Objectives
4. Review of Facilitator's Guide
5. Walk Through/Talk Through Session One
6. Walk Through/Talk Through Session Two
7. Walk Through/Talk Through Sessions Three, Four, and Five
8. Supporting Teachers' Learning and Planning
9. Dance and Balcony
10. Planning Next Steps
11. Evaluation

- **Ask participants** to note the objectives. Explain that the training helps prepare them to facilitate a five-session health

literacy study circle+ in which teachers and tutors learn about health literacy and how to integrate health literacy topics into their instruction of reading, writing, and mathematics. They will receive a facilitator’s guide that includes detailed descriptions of the activities they will be facilitating.

- **Review the agenda.** Explain that the participants will begin the day with an overview of health literacy and how it connects to adult education. Next they will learn about the specifics of facilitating HALL/NCSALL Health Literacy Study Circle+ and spend time on facilitation techniques. Finally, they will plan for facilitating health literacy study circles in their states, regions, or programs.
- **Explain to participants that the training includes “talk throughs” and “walk throughs.”** In a “talk through” you will explain how the activity is conducted during the health literacy study circle+. In the “walk through” the participants will take part in the activity as if they were teachers or tutors in a health literacy study circle+. You will facilitate as if you were working with a group of teachers.
- **Invite participants to ask questions** about the training. List other points that they would like to cover on newsprint.

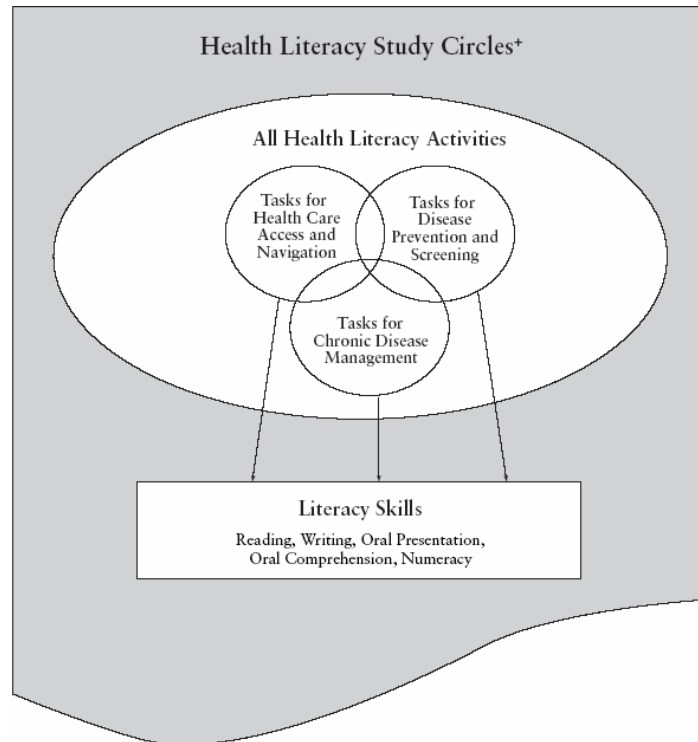
Note to Facilitator

You may want to use a visual indicator—hat, vest, or scarf—to indicate when you are acting as the study circle facilitator (“walk through”) rather than the trainer of facilitators.

3. OVERVIEW OF HEALTH LITERACY STUDY CIRCLE+ OBJECTIVES

(20 MINUTES)

- **Explain to participants that the purpose** of this activity is to provide them with an overview of the Health Literacy Study Circle+. Tell them that the information that you are covering in this activity is in the facilitator’s guide that they will receive later in the training.
- **Post the newsprint Health Literacy Study Circles+.** Use the following information from the first session (pp. 12–13) of the *Health Literacy Study Circle+ Facilitator’s Guide: Skills for Health Care Access and Navigation* to provide participants with an overview of the Health Literacy Study Circle+.





- **All Health Literacy Activities:** Point out that the larger oval represents a broad array of health literacy activities that take place at home, at work, in the community, and in health care settings. These activities include tasks and skills related to health promotion, health protection, disease prevention, health care and maintenance, and health care system navigation.
- **The Health Literacy Study Circles+:** The three smaller circles represent the three areas of critical importance documented in health research.
 1. **Tasks for Health Care Access and Navigation** (with a focus on access to care): Poor people have limited access to health care, and minority population groups are more likely to face bias when trying to “navigate” through the health care system.
 2. **Tasks for Chronic Disease Management** (with a focus on care and maintenance): People without high school diplomas are more likely to die from chronic diseases than those with more education.

3. **Tasks for Disease Prevention and Screening** (with a focus on early detection): Poor people and those from minority groups are less likely to use preventive services and screening programs.

Note that these study circles could have addressed many different groups of health activities. These three areas were chosen because they have been highlighted as areas of the greatest health disparities in the United States.

Improvements in each of these areas can help reduce existing disparities and improve the health of those who are poor, those without high school degrees or GEDs, and those who are from minority populations.

- **Literacy Skills:** Call attention to the literacy skills—reading, writing, oral presentation, oral comprehension, and numeracy. These kinds of skills will be the focus of participants’ work in this and all Health Literacy Study Circles+.
- **Adult Educators’ Contributions:** Point out that, to fully address needed improvements in the areas of navigation, chronic disease management, and prevention requires an effort on the part of both health professionals and educators. The Health Literacy Study Circles+ are aimed at enabling adult educators to make their contribution to this overall endeavor by focusing on skills that fall within the realm of ABE and ESOL and can be transferred to the three critical health areas.
-  **Distribute the handout** *Shared Goals but Different Roles in Health Literacy.* Ask participants to take a few minutes to read the handout. Then ask for a volunteer to summarize the role of the adult educator.
-  **Distribute the handout** *Skills for Health Care Access and Navigation: Goals and Objectives.* Ask participants to briefly review the handout.
- **Tell participants that the Health Literacy Study Circles+** differ from traditional study circles because they go beyond

discussion to include more practical components. Note that the activities in the Health Literacy Study Circles+ are designed to support participants as they explore and develop materials that suit their teaching styles and their students' needs. The role of the facilitator is to facilitate the activities in the Health Literacy Study Circle+ sessions *and* provide support to teachers as they carry out various activities in their own classes between sessions.

- **Explain to participants that they have just “walked through”** part of the first session of the Health Literacy Study Circle+ as it would have been facilitated with teachers and tutors. Now you will continue the overview, but with a focus on orienting them as facilitators.
- **Post the newsprint Anticipated Outcomes.** Review the outcomes, noting that these points provide a summary of what the developers of the Health Literacy Study Circles+ anticipate as outcomes from p. 3 of the **Overview and Preparation** section.

Anticipated Outcomes

Outcomes for adult educators:


- A deeper understanding of health literacy, health literacy research, and health literacy skills
- An expanded repertoire of cooperative learning tools
- Ability to develop ideas and activities to improve adult students' abilities to access and navigate health care systems
- Opportunity to form support groups and networks

Outcomes for the field of adult education

- Opportunities to develop links between adult education and public health programs

Outcomes for adult education students

- Increased ability to interact with health care systems and professionals
- Increased confidence in navigating the health care system

-  **Distribute the handout** *Access and Navigation Health Literacy Study Circle+ Timeline*. Use the newsprint [Access and Navigation Health Literacy Study Circle+ Timeline](#) that you posted before participants arrived to review the timeline.
- **Invite participants** to ask questions or make comments about this overview of the health literacy study circle+.

4. REVIEW OF FACILITATOR'S GUIDE

(20 MINUTES)

- **Explain to participants that the purpose** of this activity is to examine the *Health Literacy Study Circle+ Facilitator's Guide: Skills for Health Care Access and Navigation* (or the guide you have chosen).
- **Distribute the HALL/NCSALL *Health Literacy Study Circle+ Facilitator's Guide: Skills for Health Care Access and Navigation***. Acknowledge the size and complexity of the guide.
- **Post the newsprint [Facilitator's Guide](#)**.

Facilitator's Guide

- Preparation for Session One, pp. 17-19, of Overview and Preparation for Session One, and Materials in Preparation for Session One
- Session One: Introduction to Health Literacy and Session One Materials
- Session Two: Identifying Access and Navigation Tasks and Underlying Skills and Session Two Materials (omit Sample Lesson Packets)
- Session Three: Integrating Health Literacy Skills into Instruction and Session Three Materials
- Session Four: Planning Lessons, Units, and Evaluations; Session Four Materials; and Session Five: Developing Strategies and Success and Session Five Materials
- Overview, Planning, and Facilitation Tips, pp. 5-15, of Overview and Preparation for Session One

- **Ask participants** to form pairs or triads. Assign each pair or triad a section of the guide, using the bullets on the newsprint as a guide.


Note to Facilitator

The last section—Overview, Planning, and Facilitation Tips—is optional. Assign it only if you have enough pairs.

- **Ask the pairs or triads** to take five minutes to review the assigned section and prepare a brief report on the contents of that section.
- **Reconvene the whole group.** Invite the pairs or triads to report on their sections in the order listed on the newsprint. Remind the participants that they can follow along in their own copies of the facilitator’s guide.
- **Point out the sessions** on the posted newsprint [Access and Navigation Health Literacy Study Circle+ Timeline](#) as they are being discussed. When the group is looking at **Session One**, point out the activities on pp. 12–14 and remind them that you facilitated these activities earlier in the training.
- **Tell the participants** that they will play two roles as facilitators—managing the Health Literacy Study Circle+ process and supporting teachers’ learning and planning. Point out that they will have explicit directions and materials for the first role—managing the study circle+ process—these are in the facilitator’s guide. The participants will discuss the other role—supporting teachers’ learning and planning—later in the training.
- **Point out three organizational helps** that are in the facilitator’s guide to the participants:
 - The session overviews in the **Overview and Preparation for Session One** section on p. 6
 - An explanation of the general format on p. 7 of the **Overview and Preparation for Session One** section
 - The Methods Review—Dance and Balcony that is first used in **Session One: Introduction to Health Literacy**, pp. 22–23
- **Invite participants** to suggest ways for making the facilitator’s guide easier to use. Some examples are a map, color coding, tabs, and so on.
- **Invite participants to ask questions** about the guide and the organization of the sessions.

Break (15 minutes)

5. WALK THROUGH/TALK THROUGH SESSION ONE (70 MINUTES)

- **Explain to participants** that in the next series of steps they will “walk through” several activities as if they were participants of a health literacy study circle+. The purposes are to build their understanding of health literacy and to familiarize them with the various activities they will facilitate. Explain that you will also “talk through” the other activities for which there are explicit instructions in the facilitator’s guide.
-  **Distribute the handout** *Skills for Health Care Access and Navigation: Session One*.
- **“Talk through”** the Welcome and Introductions Activity found on p. 11 of the **Introductory Activities**. The facilitator welcomes participants to the study circle+, acknowledges the sponsoring agency, and introduces himself/herself. Participants are invited to introduce themselves.
- **Remind participants** that they’ve already participated in the Overview of the Health Literacy Study Circle+ Activity, pp. 12–14, and that they are currently reviewing the objectives and agenda. Point out that in each session of the Health Literacy Study Circle+ there are four parts:
 1. Introductory Activities
 2. Discussion and Analysis Activities
 3. Planning Activities
 4. Closure Activities
- **Explain to participants** that the purpose of the next activity is to **“walk through”** the Reflection and Discussion of Our Own Experiences Activity on pp. 17–18.
- **Explain to the participants** that they will explore their own experiences with health care systems.
- **Ask participants** to think silently about experiences of their own when they tried to navigate some aspect of the

Note to Facilitator

You may want to use a visual indicator—hat, vest, or scarf—to indicate when you are acting as the study circle facilitator (“walk through”) rather than the trainer of facilitators.

health care system or when they helped a parent or loved one do so.

- **Ask participants to form pairs**, choosing someone with whom they've not yet worked. Ask participants to take two minutes each to share their experiences or stories with their partner.
- **Then ask the pairs** to join another pair to form groups of four. Ask the groups of four to take a few minutes to name and record the navigation issues each person shared (for example: filling out forms, finding a location, choosing a benefit package).
- **Next ask the small groups** to take a few minutes to name the barriers and challenges they faced in accessing and navigating the health care system (for example: making sense of the jargon in a benefit package).
- **Post the newsprint** Our Challenges and Barriers in Health Care Access and Navigation.


Our Challenges and Barriers in Health Care Access and Navigation	
<u>Tasks</u>	<u>Challenges and Barriers Faced</u>

- **Reconvene the whole group.** Invite the small groups to report briefly on their challenges and barriers. Record their responses on newsprint.
- **Invite the participants** to review the posted list and brainstorm additions (call out ideas, but not to comment on those posted). Use the following questions as a guide:
 - ? What other access and navigation tasks could you add to this list?
 - ? What other challenges and barriers could you add?

If no one recalls more than one or two tasks, draw examples from this list:

- Find services

- Obtain health insurance coverage and benefits
- Fill out forms for insurance, Medicare, Medicaid, etc.
- Choose from options in benefit packages or health care plans
- Talk to bureaucrats
- Get an answer by telephone
- Keep and organize your own records
- **Note for participants** that this study circle+ addresses many of these issues. You might also want to acknowledge that the study circle+ has an urban focus and that access to adequate health care may be a larger issue in rural areas.
- **“Talk through”** the Discussion and Analysis Activities in **Session One**, inviting participants to follow along in their own guides:
 - Refer to pp. 15–16. Study circle+ participants reflect on the readings that were sent to them before **Session One**. Small groups discuss the reading and report back to the whole group. The facilitator summarizes the discussions and then leads a whole group discussion.
 - Refer to pp. 16–17. The participants then view a video on literacy-related challenges to accessing and navigating health care. The DVD version is in their guides.
 - The activity they just “walked through,” Reflection and Discussion of Our Own Experiences is on pp. 17–18.
 - This is followed by Planning Activities, pp. 20–21, which they will “walk through” in the next activity.
 - The Closure Activities are found on pp. 22–23. The Content Review is followed by a Methods Review, then the Session Evaluation and Closing Notes.
- **Remind participants** that you have just “talked through” the beginning activities in **Session One** and now you are going to “walk through” an activity.

- **Explain to participants** that the purpose of this “walk through” activity is to prepare them to conduct a needs assessment in their own classrooms.
-  **Distribute the handout** *In-Class Needs Assessment Packet*.
- **Refer participants** to Identifying Student Barriers to Health Care Access and Navigation, p. 3 of the packet. Briefly review the instructions.
- **Explain to participants** that you would like them to use the needs assessment in their classrooms before the second session to learn more about their students’ experiences with the health care system and to identify the challenges and barriers their students encounter.
- **Ask the participants** to take a few minutes to read the story, “A Simple Test,” on p. 13–18 of their packet. Tell participants that they can use this story in their classes as a discussion trigger in the same way that the video was used earlier in the first session.
- After participants have read the story, **pose the following questions:**
 - ? Is this story suited to your students’ reading level?
 - ? If needed, will you be able to adapt this story for your class?
 - ? How might you modify the story for your class?
- **Refer participants** to pp. 7–12 of the packet, *Lesson Companion to “A Simple Test.”* Review the key elements of the lesson.
- **Pose the following questions** to the group:
 - ? Is this activity suited to your students’ reading level, oral language level, or level of comfort?
 - ? Where might your students have trouble?
 - ? If needed, how might you modify the lesson for your class?
 - ? Are there any barriers that would prevent you from trying out this lesson with your students?


If a number of participants anticipate difficulties using this lesson in class, ask group members to offer suggestions for other ways to conduct the needs assessment on this topic.

If some participants feel that the story and lesson will be too difficult for their students, suggest that they use the *Alternate Assessment Activity with Photographs*, pp. 19–30.

- **Refer participants** to the questions on the handout *After Conducting the Needs Assessment*, p. 5. Explain to participants that they should summarize their discussions with students by answering the questions. Remind them that they should be prepared to share their findings and reflect on this assessment during **Session Two**.
- **Ask participants to find a partner** for this assignment—conducting the needs assessment. Invite the pairs to exchange names and telephone numbers so that they can speak with each other before and after completing the needs assessment with their students. Encourage them to:
 - Discuss the assignment and any problems they anticipate
 - Discuss how the assessment went
 - Share their findings and observations
- **Invite participants to ask questions** or make comments about facilitating **Session One**.

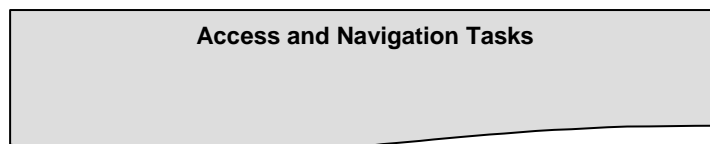
Lunch (60 minutes)

6. WALK THROUGH/TALK THROUGH SESSION TWO (80 MINUTES)

- **Explain to participants** that they will now be “talking through” and “walking through” **Session Two**.
-  **Distribute the handout** *Skills for Health Care Access and Navigation: Session Two*.
- **“Talk through”** the Introductory Activities on p. 9 of **Session Two: Identifying Access and Navigation Tasks and Underlying Skills** in the facilitator’s guide. The facilitator welcomes the


group back, provides an overview of **Session Two**, and reviews the agenda and objectives.

- **Next “talk through”** the Review Results of the Student Needs Assessment Activity, the first part of the Discussion and Analysis Activities, on p. 10 of the **facilitator’s guide for the second session**. The facilitator guides a whole group discussion about the experiences participants had in conducting the needs assessment, and then lists the students’ challenges and barriers on newsprint for further analysis.
- **Explain to participants** that now they will **“walk through,”** with shorter time frames, the other three parts (pp. 11–14) of the Discussion and Analysis Activities:
 - Identify Access and Navigation Tasks
 - Identify Skills Needed for Access and Navigation Tasks
 - Review and Discuss the Tasks and Skills Listed by Each Group
- **Explain to participants** that the purpose of this brainstorm activity is to identify navigation tasks related to the health care system. You might want to remind participants that the purpose of a brainstorm activity is to generate many ideas. Therefore, during a brainstorm, you will ask participants *not* to comment on or evaluate the suggested ideas. All ideas are just listed on the board or on newsprint as they are called out.
- **Post the newsprint** Access and Navigation Tasks



- **Ask participants to think about** and list various tasks involved in navigating within the health care system. Encourage them to draw from the list of student-identified barriers, earlier discussions, and assigned readings. Write all ideas on the newsprint.

If participants are having difficulty generating ideas, suggest some examples from this list:

- Use an automated telephone system
- Find a particular destination in a hospital or clinic
- Ask for directions
- Fill out forms
- Apply for insurance
- Determine eligibility
- Calculate costs of doctor visit vs. emergency room treatment
- Understand patient's rights and responsibilities
- Choose a health plan
- After seven minutes, **ask the group to review** the list and eliminate redundancies. This will make the next activity easier.
- **Explain to participants** that this activity builds on the list of access and navigation tasks generated in the preceding activity. Ask participants to think about the range of skills needed to perform these tasks. Consider language, literacy, and numeracy skills that are taught in ABE or ESOL classes.
- For example, in the story "A Simple Test," Mary was asked to fill out a medical history form. Skills: She needed to read the form and write responses.
-  **Distribute the handout** *Table of Access and Navigation Tasks and Underlying Skills*.
- **Ask participants to form small groups** of three to four people. Each group should choose a recorder for the group—someone to fill in a copy of the table on the handout or on newsprint. Note that participants can use the handouts to make notes as they complete the activity, but only the recorder in each group needs to fill in the table for the group.

Note to Facilitator

You may want to bring copies of your state's adult education curriculum framework for participants to use in this activity.



Note to Facilitator

The facilitator's copy of the Table of Access and Navigation Tasks and Underlying Skills contains examples to help you with this activity.

Table of Access and Navigation Tasks and Underlying Skills

General Tasks with Specific Examples	Materials and Tools Adults Are Expected to Use	Skills Adults Need	Lesson Ideas	Related State Standards/ Curriculum Frameworks
<p>Locate appropriate services</p> <p>e.g., find listings of health centers; find services within a hospital</p>	<p>Telephone book</p> <p>Maps</p>	<p>Use an index</p> <p>Use a map</p> <p>Ask for directions</p> <p>Use a telephone book</p> <p>Recognize names of hospital departments</p>	<p>Groups of students work together with a telephone book to find health centers near their homes</p>	
<p>Apply for health insurance</p> <p>e.g., identify rights and responsibilities; compare health care plans; compare costs and co-pays</p>	<p>Health Insurance booklet</p> <p>Application forms</p>	<p>Complete forms</p> <p>Read for relevant information</p> <p>Read and use tables</p> <p>Calculate and compare costs</p>	<p>Look at and talk about sample insurance forms to discuss common sections and needed information</p> <p>Use simple word problems to practice calculations for co-pay</p>	
<p>Provide information</p> <p>e.g., provide personal health history; describe symptoms</p>	<p>Family history forms</p> <p>Medical history form</p>	<p>Ask health providers for clarity</p> <p>Fill out forms</p> <p>Use descriptive vocabulary</p>	<p>Provide generic family history forms for class to analyze</p> <p>Determine how/why doctors use health history forms</p>	
<p>Make and keep appointments</p> <p>e.g., schedule an appointment; get directions</p>	<p>Telephone book</p> <p>Map</p> <p>Bus schedule</p> <p>Calendar</p>	<p>Plan</p> <p>Record</p> <p>Use reminder cues</p> <p>Use a calendar</p>	<p>Role play a patient making an appointment and getting directions to the facility</p>	


- **Ask the groups to select one task** from the newsprint Access and Navigation Tasks. Ask the groups to take 10 minutes to discuss the task they selected and fill in the rest of the table by answering the following questions. The recorder should write down the groups' ideas.
 - ? What is the task?
 - ? What materials or tools might be used to complete the task?
 - ? What skills (literacy, numeracy, and language) are needed to accomplish the task?
 - ? How can you help your students develop these skills (lesson ideas)?
 - ? How do these skills relate to state standards/curriculum frameworks for ABE/ESOL instruction? Think about how these skills relate to skills or topics that you are already teaching in your classes.
- **Reconvene the group.** Invite the small groups to present their results to the whole group.
- After each group has had an opportunity to share their ideas, **ask the whole group** the following questions:
 - ? How many of the skills are you already teaching in class?
 - ? What skills are not being addressed in your classrooms?
 - ? Given the diverse range and complexity of access and navigation tasks, how will you decide which tasks/skills to focus on in your classroom?
- **Ask participants to save** their completed tables so they can refer to them in **Session Three**. Collect the completed handouts from each group so you can make copies to give to participants during Session Three.
- **Explain to participants** that they will “walk through” the last part of the Discussion and Analysis Activities— Review the Sample Lessons—in a slightly modified activity. The instructions are on pp. 15–16 of the facilitator’s guide for **Session Two**.


- **Explain that the goal** of this activity is to examine one of the lessons in the **Sample Lesson Packet** in depth. By the end of this activity, participants will either have identified a lesson (as is or modified) that they will try out in their own classrooms or participants will generate some other ideas for their own lessons.
-  **Distribute the handout** *Lesson Review Sheet*.
- **Ask the participants to work in pairs** with someone who teaches in the same area (e.g., ESOL, ABE, and GED) or with students at a similar learner level (e.g., beginning English proficiency, advanced GED students). This will enable pairs to discuss the appropriateness and applicability of the various lessons within their own teaching context.
-  **Distribute a Sample Lesson** to each pair, assigning a lesson that is appropriate to their teaching area and/or learner levels, e.g. Examining Language Barriers in Health Care to a pair of ESOL teachers.
- **Ask the pairs** to take 15 minutes to first examine the sample lesson and then to use the questions on the handout *Lesson Review Sheet* as a guide for a short discussion.
- **Reconvene the whole group.** Invite the pairs to identify the lessons they examined. Then use the following questions to facilitate a 15-minute discussion:
 - ? To what extent do various lessons address your students' concerns and issues discovered through the needs assessment activity ("A Simple Test")?
 - ? What other topics or types of skills are not covered in this packet but would be of interest to you and your students?
 - ? Which lessons do you anticipate trying out in your classes? Why?
 - ? To what extent will you need to adapt or alter the lesson plans?

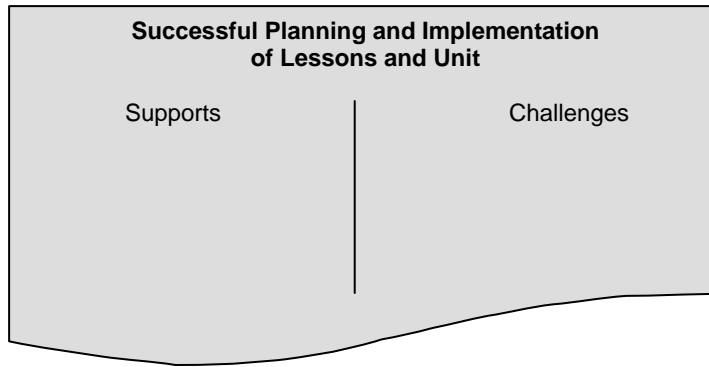
- **“Talk through”** the rest of **Session Two**. In Planning Activities on p. 17 the facilitator reviews the assignments for **Session Three**: teaching a sample lesson and reading about other practitioners’ experiences with health literacy. Study circle+ participants choose a partner to discuss teaching the sample lesson. The Closure Activities are the same: Content Review, Methods Review, Session Evaluation, and Closing Notes.
- **Point out to participants** that they are at “Between Session Two and Three” on the newsprint Access and Navigation HLSC+ Timeline.
- **Invite participants** to ask questions or make comments about **Session Two**.

7. WALK THROUGH/TALK THROUGH SESSIONS THREE, FOUR, AND FIVE

(50 MINUTES)

-  **Distribute the handouts** *Skills for Health Care Access and Navigation: Session Three, Skills for Health Care Access and Navigation: Session Four, and Skills for Health Care Access and Navigation: Session Five.*
- **“Talk through” Sessions Three, Four, and Five**, using the agendas and objectives on the handouts and referring to the posted Access and Navigation HLSC+ Timeline.
 - During the Introductory Activities in each session, the facilitator welcomes the group back, provides an overview of the session, and reviews the agenda and objectives.
 - The participants reflect on their experiences in teaching health literacy lessons in the Discussion and Analysis Activities of **Sessions Three** and **Four**. Brainstorming health literacy unit topics in **Sessions Three** is followed by a discussion of unit planning and its evaluation in **Session Four**. During **Session Five** participants share a plan for a health literacy unit and reflect on their experiences in developing it. Participants also develop

- an action plan for how to continue incorporating health literacy into their classes in **Session Five**.
- During the Planning Activities, participants prepare for the assignment between sessions—teaching their own lesson, planning a unit—in the third and fourth session respectively. In **Session Five**, participants decide how to keep in contact with each other.
 - The Closure Activities are: Content Review, Methods Review, Session Evaluation, and Closing Notes.
 - **Explain to participants** that now they will “walk through” reviewing lesson plans and unit plans. This is a modification of the Planning Activities from **Sessions Three, Four, and Five**. In **Session Two** participants plan to teach a sample lesson. In **Session Three** they begin to plan a lesson of their own. In **Session Four** they begin to plan a unit of lessons. In **Session Five** they plan an implementation strategy.
 -  **Distribute the handouts** *Lesson Plan Template* and *Health Literacy Unit Template*.
 - **Ask the participants** to take 10 minutes to review the handout *Lesson Plan Template* from **Session Three** and the *Health Literacy Unit Template* from **Session Four**. Ask them to reflect on the challenges that they imagine teachers would face in planning health literacy lessons and units and using theme-based instruction. Think also about their conducting of the Needs Assessment after **Session One** and teaching of the sample lesson after **Session Two**.
 - **Reconvene the participants**. Explain to participants that they will be participating in a “force-field” analysis of the challenges and supports teachers may face as they plan for and implement health literacy lessons and units.
 - **Post the newspaper** Successful Planning and Implementation of Lessons and Unit.




- **Ask the group to brainstorm** the challenges (factors that hinder) they think teachers will face in accomplishing the assignments. These may be limited time, problem participants, and lack of support from program director. Write, exactly as said, each challenge mentioned on the right side of the newsprint. Take no more than 10 minutes to list challenges.
- **Then ask the group to brainstorm** all of the supports (factors that help) they think teachers will have as they tackle the assignments. These may be support from colleagues and interest of the participants. Write these on the left side of the newsprint under "Supports."
- **Lead a 20-minute discussion** with the whole group about how the challenges could be reduced and how the supports could be increased. Make sure to include what they as facilitators can do, too.
- **Point out that the teachers** will identify a partner to work with and be in contact with for support. Invite participants to ask questions about facilitating a force field analysis.

Break (15 minutes)

8. SUPPORTING TEACHERS' LEARNING AND PLANNING (20 MINUTES)

- **Explain to participants that the purpose** of this activity is to explore ways they can support teachers' learning and lesson planning. So far in the training the focus has been on facilitating the study circle+ process. The support role is not as structured as the role of managing the process. It

requires responding to individual needs, and providing feedback and support.

- **Tell participants that** we want teachers to use theme-based instruction, integrating health and literacy. Invite participants to brainstorm what might be new for teachers in using theme-based instruction.
-  **Distribute the handouts** *Some Principles of Participatory Education and Feedback*.
- **Ask the participants** to take a few minutes to skim the handouts and to look at the Facilitation Tips on pp. 43–64 of the HALL/NCSALL *Health Literacy Study Circles+ Introduction: Overview, Planning, and Facilitation Tips*. Tell them that these are resources for reading and reference.
- **Invite the participants to ask questions** and/or make comments about their role in supporting teachers' learning and planning.

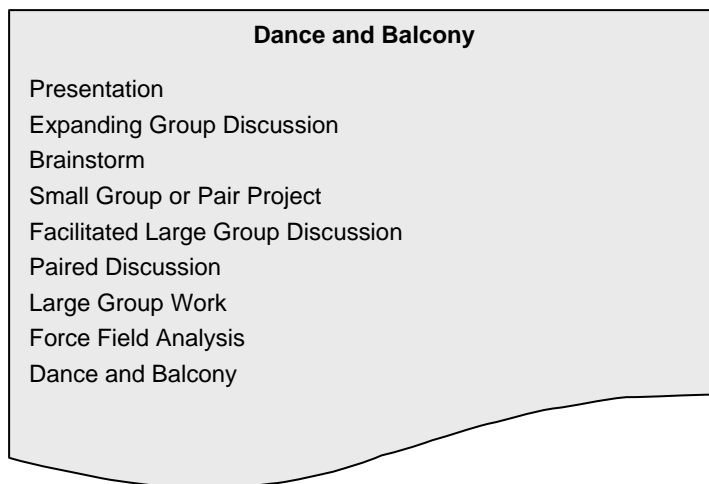
9. DANCE AND BALCONY

(10 MINUTES)

- **Explain to participants** that the purpose of this activity is to familiarize them with a methods review activity named Dance and Balcony that they will be conducting at the end of every session. This activity is a metaphor for analyzing the group discussion methods used during the session. The purpose of this activity is to highlight the different ways you have structured activities and encourage teachers to consider using some of these methods in their own classes.

Participants are asked to think of the activities they just completed as a “dance.” This review activity asks that they stop the dance and move up to the balcony to look down on the dance floor. They stop “dancing” and view the dance from a distance. From the “balcony” participants analyze the dance. They comment on and evaluate the discussion methods.

- **Post the newsprint** Dance and Balcony.




- **Describe the discussion methods** and ask the participants to identify when an activity was used. Use table below to help you facilitate this discussion.
- **Explain to participants** that they will ask the study circle+ participants to identify methods that they think would be effective in their own classrooms.

Session One Discussion Methods	Activity Examples
Presentation	“Talk through” of sessions Review of handouts
Expanding Discussion (two people, then four, then larger group)	Identify our own challenges and barriers with health care access and navigation
Brainstorming	Identify access and navigation tasks
Small Group or Pair Project	Prepare to conduct the in-class needs assessment (“A Simple Test” and the lesson plan) Complete a table to identify skills related to health care access and navigation tasks
Facilitated Large Group Discussion	Discuss why health literacy is important for ABE/ESOL students
Paired Discussion	Review of sample lesson plans
Large Group Discussion	Review results of in-class activity Sample lesson review
The Dance and the Balcony	Reflect on the study circle discussion methods and structured activities

10. PLANNING NEXT STEPS**(30 MINUTES)**

- **Explain to participants that the** purpose of this activity is to address the logistics of sponsoring and facilitating a Health Literacy Study Circle+ in their states, regions, and/or programs.
- **Ask participants** to take 10 minutes to read through Planning to Facilitate a Health Literacy Study Circle + on pp. 27–41 of the *Health Literacy Study Circles+ Introduction: Overview, Planning, and Facilitation Tips*. Invite them to ask questions or make comments about what they just read.
- **The facilitator or someone from the sponsoring organization addresses** the following areas, noting how decisions will be made on the items below:
 - Recruiting for study circles+
 - Support for participants
 - Support available to facilitator
 - Reporting requirements
 - Options for follow-up sessions (within programs and/or across programs)
 - Logistics for setting up and facilitating study circles+
 - Documentation and evaluation (state requirements)
- **Invite participants** to share their plans for facilitating a health literacy study circle+. Encourage the other participants to ask questions and make suggestions.

11. EVALUATION**(15 MINUTES)**

- **Explain to participants** that, in the time left, you would like to get feedback from them about this training.
-  **Distribute the handout** *Evaluation Prompts*. **Ask participants** to write responses to the prompts.

- **Thank everyone** for coming and participating in the training.

Quick Reference Sheet for Facilitating the Training	
1. Welcome and Introductions	<i>10 min., WHOLE GROUP</i>
<ul style="list-style-type: none"> • Everyone introduces themselves. • Show of hands on experiences with study circles and professional development. • Housekeeping and logistics. 	
2. Objectives and Agenda	<i>10 min., WHOLE GROUP</i>
<ul style="list-style-type: none"> • Post newsprints; pass out handout <i>Agenda and Objectives</i>; review. • Introduce “walk throughs” and “talk throughs.” 	
3. Overview of Health Literacy Study Circle+ Objectives	<i>20 min., WHOLE GROUP</i>
<ul style="list-style-type: none"> • Post newsprint; provide overview of the health literacy study circles+. • Pass out handout <i>Shared Goals but Different Roles</i>; ask volunteer to summarize. • Pass out handout <i>Skills for Health Care Access and Navigation: Goals and Objectives</i>; review. • Post newsprint; review the outcomes. • Pass out handout <i>Access and Navigation Health Literacy Study Circle+ Timeline</i>; review the timeline referring to newsprint. 	
4. Review of Facilitator’s Guide	<i>20 min., PAIRS/TRIADS, then WHOLE GROUP</i>
<ul style="list-style-type: none"> • Pass out the <i>Health Literacy Study Circle+ Facilitator’s Guide: Skills for Health Care Access and Navigation</i>; post newsprint; assign pairs/triads sections of guide to review • Reconvene group and ask pairs/triads to report on sections. • Remind participants of two roles as facilitators—managing the study circle+ process and supporting teachers’ learning and planning; invite questions. 	
15–Minute Break	
5. Walk Through/Talk Through Session One	<i>70 min., WHOLE GROUP, then PAIRS, then SMALL GROUPS, then WHOLE GROUP</i>
<ul style="list-style-type: none"> • Pass out handout <i>Skills for Health Care Access and Navigation: Session One</i>; “talk through” Welcome and Introductions. • “Walk through” the Reflection and Discussion of Our Own Experiences activity. • “Talk through” the Discussion and Analysis activities. • “Walk through” the needs assessment activity. • Invite questions about facilitating Session One. 	

Quick Reference Sheet for Facilitating Session One	
60–Minute Lunch	
6. Walk Through/Talk Through Session Two	<i>80 min., WHOLE GROUP, then SMALL GROUPS, then WHOLE GROUP, then PAIRS, then WHOLE GROUP</i>
<ul style="list-style-type: none"> • Pass out handout <i>Skills for Health Care Access and Navigation: Session Two</i>; “talk through” Introductory Activities. • “Talk through” the Review Results of the Student Needs Assessment activity. • “Walk through” the three remaining Discussion and Analysis activities. • “Talk through” the rest of Session Two. • Invite questions about facilitating Session Two. 	
7. Walk Through/Talk Through Sessions Three, Four, and Five	<i>50 min., WHOLE GROUP, then INDIVIDUALS, then WHOLE GROUP</i>
<ul style="list-style-type: none"> • Pass out handouts <i>Skills for Health Care Access and Navigation: Session Three, Skills for Health Care Access and Navigation: Session Four, Skills for Health Care Access and Navigation: Session Five</i>; “talk through” Sessions Three, Four, and Five. • “Walk through” reviewing lesson plans and unit plans. 	
15–Minute Break	
8. Supporting Teachers’ Learning and Planning	<i>20 min., WHOLE GROUP</i>
<ul style="list-style-type: none"> • Pass out the handouts <i>Some Principles of Participatory Education and Feedback</i>; review handouts and Facilitation Tips; invite questions. 	
9. Dance and Balcony	<i>10 min., WHOLE GROUP</i>
<ul style="list-style-type: none"> • Post newsprint; describe discussion methods and ask participants to identify activity. 	
10. Planning Next Steps	<i>30 min., WHOLE GROUP</i>
<ul style="list-style-type: none"> • Ask participants to read <i>Planning to Facilitate a Health Literacy Study Circle+</i>. • Address logistics and reporting; invite participants to share plans. 	
11. Evaluation	<i>15 min., WHOLE GROUP</i>
<ul style="list-style-type: none"> • Pass out <i>Evaluation Prompts</i>; ask participants to respond. • Thank everyone for coming and participating. 	

Materials to Hand Out

Make copies of the following handouts. The table notes where the handouts are found in either this training guide (facilitators) or in *Health Literacy Study Circle+ Facilitator's Guide: Skills for Health Care Access and Navigation* (study circle).

Guide	Section and/or Pages	Handout Title
Step 3: Overview of Health Literacy Study Circle+ Objectives		
study circle	Session One Materials Handout 2	<i>Shared Goals but Different Roles in Health Literacy</i>
study circle	Preparation for Session One Materials Handout 4	<i>Skills for Health Care Access and Navigation: Goals and Objectives</i>
facilitators	p. 65	<i>Access and Navigation Health Literacy Study Circle+ Timeline</i>
Step 5: Walk Through/Talk Through Session One		
study circle	Session One Materials Handout 3	<i>Skills for Health Care Access and Navigation: Session One</i>
study circle	Session One Materials Handout 4	<i>In-Class Needs Assessment Packet</i>
Step 6: Walk Through/Talk Through Session Two		
study circle	Session Two Materials Handout 1	<i>Skills for Health Care Access and Navigation: Session Two</i>
study circle	Session Two Materials Handout 2	<i>Table of Access and Navigation Tasks and Underlying Skills</i>
study circle	Session Two Materials: Handout 6—Sample Lesson Packet Overview p. 3	<i>Lesson Review Sheet</i>
study circle	Sample Lesson Packet	<i>Sample Lessons</i> (one set for whole group)
Step 7: Walk Through/Talk Through Sessions Three, Four, and Five		
study circle	Session Three Materials Handout 1	<i>Skills for Health Care Access and Navigation: Session Three</i>
study circle	Session Four Materials Handout 1	<i>Skills for Health Care Access and Navigation: Session Four</i>

HEALTH LITERACY STUDY CIRCLE+ FACILITATORS

Guide	Section and/or Pages	Handout Title
study circle	Session Five Materials Handout 1	<i>Skills for Health Care Access and Navigation: Session Five</i>
study circle	Session Three Materials Handout 4	<i>Lesson Plan Template</i>
study circle	Session Four Materials: Handout 2—The Unit Plan Packet p. 7	<i>Health Literacy Unit Template</i>
Step 8: Supporting Teachers' Learning and Planning		
Facilitators	p. 67	<i>Some Principles of Participatory Education</i>
Facilitators	p. 73	<i>Feedback</i>
Step 11: Evaluation		
Facilitators	p. 77	<i>Evaluation Prompts</i>

ACCESS AND NAVIGATION HEALTH LITERACY STUDY CIRCLE+ TIMELINE

	Facilitator	Participating Teachers
<p>Before Session One</p> <p>Read materials and research.</p>	<p>Read <i>Overview and Preparation for Session One</i> and <i>Session One: Introduction to Health Literacy</i>.</p> <p>Read and copy and mail to participants the <i>Materials in Preparation for Session One</i>.</p> <p>Prepare materials needed for Session One.</p>	<p>Read the <i>Materials in Preparation for Session One</i>.</p> <p>Complete the forms: Participant Expectations and Participant Definition of Health Literacy.</p>
<p>Session One</p> <p>Discuss readings.</p> <p>Discuss meaning of health literacy for adult education.</p> <p>Plan needs assessment.</p>	<p>Use <i>Session One: Introduction to Health Literacy</i> to facilitate Session One.</p>	<p>Participate in Session One.</p>
<p>Between Sessions One and Two</p> <p>Conduct Health Literacy Needs Assessment.</p>	<p>Be available by telephone or e-mail to answer questions.</p> <p>Prepare for Session Two.</p>	<p>Conduct needs assessment with students.</p>
<p>Session Two</p> <p>Review needs assessment.</p> <p>Consider skills needed for access and navigation.</p> <p>Plan to teach sample lesson.</p>	<p>Use <i>Session Two: Identifying Access and Navigation Tasks and Underlying Skills</i> to facilitate Session Two.</p>	<p>Participate in Session Two.</p>
<p>Between Sessions Two and Three</p> <p>Teach sample lesson.</p>	<p>Be available by telephone or e-mail to answer questions.</p> <p>Prepare for Session Three.</p>	<p>Teach sample lesson.</p>
<p>Session Three</p> <p>Review sample lesson</p> <p>Plan own lesson.</p>	<p>Use <i>Session Three: Integrating Health Literacy Skills into Instruction</i> to facilitate Session Three.</p>	<p>Participate in Session Three.</p>
<p>Between Sessions Three and Four</p> <p>Teach own lesson.</p>	<p>Be available by telephone or e-mail to answer questions.</p> <p>Prepare for Session Four.</p>	<p>Teach the health literacy lesson you planned.</p>

HEALTH LITERACY STUDY CIRCLE+ FACILITATORS

	Facilitator	Participating Teachers
<p>Session Four</p> <p>Share teaching experiences. Consider unit plans. Consider how to measure health literacy skills.</p>	<p>Use <i>Session Four: Planning Lessons, Units, and Evaluations</i> to facilitate Session Four.</p>	<p>Participate in Session Four.</p>
<p>Between Sessions Four and Five</p> <p>Plan health literacy unit.</p>	<p>Be available by telephone or e-mail to answer questions. Prepare for Session Five.</p>	<p>Plan health literacy unit.</p>
<p>Session Five</p> <p>Plan how to implement unit. Plan continuation.</p>	<p>Use <i>Session Five: Developing Strategies for Success</i> to facilitate Session Five.</p>	<p>Participate in Session Five.</p>

SOME PRINCIPLES OF PARTICIPATORY ADULT EDUCATION

The following are some principles of participatory adult education.

Safety

Creating safety is one of the most important responsibilities facilitators have. We know that for new learning to take place, people must take risks. Participants in the study circle will be more willing and more able to take risks if facilitators do all they can to create a safe learning environment.

Facilitators can start to create that feeling of safety from the very beginning through the registration process, which lets the participants know the facilitators care about them as individuals. Preparing name tags for participants ahead of time, sincerely welcoming participants to the study circle, calling people by name, beginning with a warm-up, where they can introduce themselves, reviewing the content and objectives with participants, affirming the participants' contributions, providing timely breaks, keeping to the time frame, and listening carefully to the participants' questions are all ways that facilitators can help to increase safety for the participants.

Subject of Own Learning

Adults are required by daily life to be decision-makers and generally expect to be treated as such. They resist being treated as objects. To be treated as subjects means they will be honored for their years of experience and their ability to make decisions. Treating the participants as subjects of their own learning, and as decision-makers, is a major principle in participatory learning. Adult educator Jane Vella, Ed.D., teaches us that "the learning is in the doing and the deciding. Teachers must be careful not to steal that learning opportunity from the adult learner."

Engagement

People must be engaged in the learning activity—physically, mentally, and emotionally—or they will not learn what the facilitator is trying to teach. Participants will be engaged when, with necessary resources and clear instructions, they are given meaningful, relevant tasks to do. Setting a short, but ample, time frame for the task keeps the energy and engagement level high. Often when people are engaged, there is an audible buzz in the room and it is difficult to pull them away from the task.

Deliberative and Consultative Voices

This study circle is a model of participatory learning. Participatory learning does not mean that everyone together makes all the decisions. There are two voices in participatory learning, the deliberative voice and the consultative voice. The deliberative voice makes decisions; the consultative voice makes suggestions. In this study circle, for example, HALL/NCSALL has had the deliberative voice in setting requirements for facilitators and in carefully designing a curriculum that will teach facilitators the skills, attitudes, and knowledge that the organization has determined are needed. Once the study circle begins, the lead facilitator of the study circle team has the deliberative voice. Participants have a consultative voice and will offer suggestions. Their suggestions will help to *inform* the facilitators, but not *form* the study circle. The lead facilitator, who has the deliberative voice, will make decisions that consider the participants' suggestions in light of the study circle design, the objectives, and the needs of all participants.

At the same time, engaging participants requires a design that invites them to be decision-makers about their *own* learning. Participants need to know that, as much as possible, they will make decisions for themselves about what and how they will learn. Facilitators can keep the system open by asking open questions that invite participants' critical analysis, editing, reflection, choice making, and use of their own experiences.

Open Questions

An open question is a question without a set, "correct" answer. It is a question that invites participants to draw upon their own life experiences and creativity. Open questions invite dialogue and engage participants by requiring reflection and critical thinking. When facilitators ask open questions, they are demonstrating respect and honoring the participants as subjects.

The choice of using an open or closed question depends on one's purpose. If one is seeking a "yes" or "no" answer, or wants specific information, such as an address or the name of someone's favorite basketball team, then a closed question should be used. If one's purpose is to engage someone in dialogue, to invite critical thinking, or to get a personal response by allowing for opinion, creativity, or personal values, then the question should be formed as an open question.

When questions come from the participants during the study circle, rather than always answering them directly, the facilitator can bounce

some questions back to the group as open questions. The tasks in this study circle are open questions put to the participants with the resources and materials they need to respond. Often additional open questions are used to help the participants analyze and apply the new learning.

Dialogue

A *dialogue* is a conversation, an exchange of ideas and opinions, between two or more people. The opposite of a dialogue is a *monologue*. Too often, teachers rely on monologue. They “cover” the material by telling. The monologue is used to *tell* the participants what to know and what to think about it. This study circle uses dialogue rather than monologue. Dialogue is encouraged in this study circle design by using open questions; arranging work to be done in small groups or pairs; and presenting new information and then inviting participants to examine it, add to it, or change it based on their experiences and perspectives. The learning tasks for the participants make teaching a dialogue. Dialogue is an open system that allows both the learners to teach and the teachers to learn.

Analysis, Synthesis, and Application

Research by Malcolm S. Knowles, noted adult educator, indicates that adults learn 80% of what they *do* or discover for themselves. Participants need to *do* something with new information in order to effectively integrate and retain it. The process of taking apart an idea or theory (analysis) and putting it back together (synthesis) to apply it (application) to their situation allows participants to implement and use the new learning.

Praxis

Praxis is a Greek word meaning action with reflection. It means “to do something, reflect on its implications, and change as a result.” When facilitators use materials or questions that invite participants to describe, analyze, apply, and implement the new learning, they are engaging participants in praxis. Praxis is an on-going, never-ending process.

Ideas, Feelings, and Actions

There are three aspects of learning—ideas, feelings, and actions. Too often, formal education tends to focus only on the study of ideas and concepts. But we know that learning requires more than just the study of ideas and concepts. It also involves how we *feel* (emotions) about the concept and what we are going to *do* with the concept or new learning. Noted German-American psychologist and researcher Kurt Lewin taught that effective learning always involves all three aspects—ideas, feelings, and actions.

Affirming

Affirming the participants' contributions and their learning is one of the facilitator's most important tasks. The questions, suggestions, testimony, examples, and expressed doubt that come from the participants are all contributions to the group's learning experience. Facilitators who affirm every contribution from every participant communicate to the participants that their contributions have been heard and noted. This will convey to participants a feeling of safety offered in a nonjudgmental environment. They, in turn, may increase their contributions because they trust that their words will not fall—unnoticed and without recognition—to the floor.

Affirmation is an honest response to learning. Learning requires effort, and that effort deserves affirmation. What we are affirming is not necessarily the product, but the effort the participants are putting forth. Communicating an appreciation for the learning that is taking place enhances the learning process. With affirmations, the facilitator offers recognition and celebration of the learning that is taking place.

Showing Respect

When asking participants to report back from a task, avoid using the round robin approach in which you go from one participant to another around the table or around the room. Adults are respected as decision-makers, Subjects of their own learning. They are capable of deciding for themselves whether they want to speak, and when they want to speak. Facilitators can show respect by allowing participants to decide for themselves by asking, "Who would like to respond first?" Do not call attention to someone who has passed. You can ensure that everyone who wanted to speak had the opportunity by asking. If you do notice a participant passing on several occasions, a private conversation to learn why would be appropriate.

Time for Questions

Time for asking and answering questions was built into the design of this study circle. Most people learn effectively by asking questions. Allow plenty of time for questions to help participants learn what they need to learn.

Sequence and Reinforcement

Sequence of content and reinforcement are critical elements of a study circle design. An effective study circle begins with simple, clear, and relatively easy tasks before advancing to more complex ones. It begins with group work before advancing to solo efforts. Tasks should be

arranged so that each new task builds on the last one and prepares the participants for the next. Complex ideas or issues can be broken into several steps within a task or into several tasks, again always moving from the simple to the more complex. When the sequence is not appropriate for the participants, they may feel a loss of safety, feel confused or show resistance to the tasks. The repetition of facts, skills, and attitudes in engaging and meaningful ways must be designed into a study circle. Learning requires reinforcement.

Time

Participants need time to learn what is being taught. Each facilitator has his or her own style and pace. However, in a study circle that is accountable to the participants, the facilitator's personal pace must accommodate the needs of the participants. A study circle that is rushed and moving quickly in order to cover all the facilitator's material may not provide the reflective quiet time that learning requires. Nor does a harried pace afford time for sufficient reinforcement or the respectful consideration of the participants' questions and concerns. An accountable study circle design uses adequate time as a key standard for selecting the learning objectives and the amount of content. An accountable study circle is carefully examined to make certain there is not too much content for the time frame.

Accountability

Accountability is a critical design element of study circles. The design of the tasks and the sequence and reinforcement of the content must be accountable to the participants. Participants must be aware of what they are to learn and what they are learning, and ultimately be able to *do* what they have learned. An accountable study circle sets forth achievement-based learning objectives that are quantifiable and verifiable. An accountable study circle teaches the proposed knowledge, skills, and attitudes within the proposed time frame.

The facilitator is accountable to the participants for the design and for fulfilling their study circle responsibilities. The facilitator is responsible for adequate preparation and needs assessment, for showing respect to the participants, for timing tasks appropriately, for evaluating the study circle, and for being responsive. The facilitator is responsible *to* the participants. The facilitator is not responsible *for* the participants; they are responsible for themselves.

Adapted from Fessler, C. with Clark, D., Price, P., Renner, E. & Schwein, C. (2000). *Training of Trainers* (pp. H5-1 to H5-5). Syracuse, NY: Literacy Volunteers of America.

FEEDBACK

Feedback is a way of helping another person understand the impact of his or her behavior on others. It is communication to a person (or a group) which gives that person information about how he or she affects others.

Feedback helps an individual keep his or her behavior “on target” and thus better achieve his or her goals. Feedback is more effective when the following criteria are used:

1. It is specific rather than general. To be told that one is talkative will probably not be as useful as to be told that “just now when we were deciding the issue, you talked so much I stopped listening.”
2. It is descriptive rather than judgmental. By describing one’s own reaction to another’s behavior, it leaves the individual free to use it or not to use it, as he or she sees fit. By avoiding judgmental language, it reduces the need for the individual to respond defensively.
3. It takes into account the needs of both the receiver and giver of feedback. Feedback can be destructive when it serves only our needs and fails to consider the needs of the person on the receiving end.
4. It is directed toward behavior which the receiver can do something about. Frustration is only increased when a person is reminded of shortcomings over which he or she has no control.
5. It is solicited rather than imposed. Feedback is most useful when the receiver has formulated the kind of question which those observing can answer.
6. It is well-timed. In general, feedback is most useful at the earliest opportunity after the given behavior. This depends, of course, on the person’s readiness to hear it, support available from others, etc.

7. It is checked to ensure clear communication. One way of doing this is to have the receiver try to rephrase the feedback in order to see if it corresponds to what the sender had in mind.
8. It is checked with others to ensure accuracy. Both the giver and receiver should check with others in the group as to the accuracy of the feedback. Is this one person's impression or an impression shared by others?

By James A. McCaffery. Copyright by Training Resources Group, 1982. Adapted from *Feedback Guidelines* originally published by National Training Labs (NTL).

From Fessler, C. with Clark, D., Price, P., Renner, E. & Schwein, C. (2000). *Training of Trainers* (pp. H12). Syracuse, NY: Literacy Volunteers of America.

HELPING OTHERS GIVE FEEDBACK (BEING A GOOD RECEIVER)

Feedback from another person is one important source of data which helps tell you how your actions are affecting others. Even if you “disagree” with the feedback, it is important for you to hear it clearly and understand it.


Feedback tells you how another person sees your actions and gives you the choice of trying to change your behavior. People act on their perceptions of your actions and you may be coming across in unintended ways.

Giving someone feedback is sometimes difficult; if you keep the following in mind, you will make it easier for someone else to give you feedback that you can use.

1. Ask clarifying questions in order to understand the feedback.
2. Wait until the feedback has been given, then paraphrase the major points. Make it your goal to understand the feedback—asking clarifying questions and paraphrasing are two ways to do this.
3. Help the giver use the criteria for giving useful feedback (for example, if the feedback is too general—“could you give me a specific example of what you mean?”).
4. Avoid making it more difficult for the giver of feedback than it already is (by reacting defensively or angrily, arguing, etc.).
5. Avoid explanations of “why I did that,” **unless** asked.
6. Remember feedback is one person’s perceptions of your actions, not universal truth. Be active in checking out feedback with others—if two or three people give you similar feedback, there may be a pattern reflected which you might want to consider.

By James A. McCaffery. Copyright by Training Resources Group, 1982.

From Fessler, C. with Clark, D., Price, P., Renner, E. & Schwein, C. (2000). *Training of Trainers* (pp. H13). Syracuse, NY: Literacy Volunteers of America.

Handout 

EVALUATION PROMPTS

My new learnings...

My new questions...

I'm ready to...

I'm not sure I' ready to...

I liked...

I wished that...

NCSALL FEEDBACK FORM FOR TRAINING FACILITATORS¹

1. Name of Health Literacy Study Circle+ Facilitators Training conducted: _____
2. Location/site of your Health Literacy Study Circle+ Facilitators Training: _____
3. When did your training meet? Day: _____ Time: _____
4. How many times did your Health Literacy Study Circle+ Facilitators Training meet? _____
5. Generally speaking, how satisfied have you been with your experience as a Health Literacy Study Circle+ Facilitators Training facilitator?
 Very satisfied Somewhat satisfied Not at all satisfied

Why?

6. What was your most satisfying experience as a Health Literacy Study Circle+ Facilitators Training facilitator? Please provide an example:

7. What was your most frustrating experience as a Health Literacy Study Circle+ Facilitators Training facilitator? Please provide an example.

8. In all, how many people participated in your study circle+ facilitators training? _____

9. How satisfied were your participants with the study circle+ facilitators training process?

- Most participants seemed satisfied
- Most participants expressed dissatisfaction
- Most participants expressed both satisfaction and dissatisfaction at various points in the process
- I couldn't judge their levels of satisfaction

Please explain:

¹Adapted from Study Circles Resource Center Feedback Form.

NCSALL Feedback Form for Training Facilitators (continued)

10. Did you have adequate support from the program organizers?

Yes

No

Not sure

Please explain:

11. What additional support would have been helpful?

12. If you were to facilitate another Health Literacy Study Circle+ Facilitators Training, what factors would you change (for example: discussion materials, activities, etc.)?

13. What difference has taking part in this Health Literacy Study Circle+ Facilitators Training program made in you personally?

14. Other impressions, concerns, and comments:

Your name: (optional) _____

Return to:

NCSALL/World Education

44 Farnsworth Street

Boston, MA 02210-1211

Attn: Cristine Smith



National Center for the Study of Adult Learning and Literacy

NCSALL's Mission

NCSALL's purpose is to improve practice in educational programs that serve adults with limited literacy and English language skills, and those without a high school diploma. NCSALL is meeting this purpose through basic and applied research, dissemination of research findings, and leadership within the field of adult learning and literacy.

NCSALL is a collaborative effort between the Harvard Graduate School of Education, World Education, The Center for Literacy Studies at The University of Tennessee, Rutgers University, and Portland State University. NCSALL is funded by the U.S. Department of Education through its Institute of Education Sciences (formerly Office of Educational Research and Improvement).

NCSALL's Research Projects

The goal of NCSALL's research is to provide information that is used to improve practice in programs that offer adult basic education, English for Speakers of Other Languages, and adult secondary education services. In pursuit of this goal, NCSALL has undertaken research projects in four areas: (1) learner persistence, (2) instructional practice and the teaching/learning interaction, (3) professional development, and (4) assessment.

NCSALL's Dissemination Initiative

NCSALL's dissemination initiative focuses on ensuring that practitioners, administrators, policymakers, and scholars of adult education can access, understand, judge, and use research findings. NCSALL publishes *Focus on Basics*, a quarterly magazine for practitioners; *Focus on Policy*, a twice-yearly magazine for policymakers; *Review of Adult Learning and Literacy*, an annual scholarly review of major issues, current research, and best practices; and *NCSALL Reports* and *Occasional Papers*, periodic publications of research reports and articles. In addition, NCSALL sponsors the Connecting Practice, Policy, and Research Initiative, designed to help practitioners and policymakers apply findings from research in their instructional settings and programs.

For more about NCSALL, to download free copies of our publications, or to purchase bound copies, please visit our Web site at:

www.ncsall.net