



# **Adult Literacy for Life Research Project**

Exploring perceptions and experience of unmet literacy needs among staff providing services to the public.

Kilkenny and Carlow Regional Adult Literacy Coalition

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## Kilkenny and Carlow Regional Adult Literacy Coalition

The Regional Literacy Coalition supports the implementation of the Adult Literacy for Life Strategy by:

- raising awareness of literacy, using literacy friendly approaches and promoting literacy opportunities and supports locally;
- agreeing a cross-stakeholder Regional Literacy Action Plan;
- facilitating cross-society and cross-economy collaboration at local level;
   and
- addressing regional and local literacy, numeracy, and digital literacy needs.

The Kilkenny and Carlow Regional Adult Literacy Coalition consists of a broad mix of representatives and organisations within the region.

The following were members in 2024:

- Aileen Scott, Health Service Executive (HSE)
- Áine Monahan, Coláiste Mhuire Home School Community Liaison
- Alison Iremonger, Kilkenny Leader Partnership (KLP)
- Bernadette O Rourke, Adult Education Service KCETB
- Carmel Bryan, Kilkenny Adult Learning Service KCETB
- Danielle Dunne, Family Carers Ireland
- Dylan Thomas, County Carlow Development Partnership (CCDP)
- Fergal Blanchfield, Department of Social Protection
- Helen Walsh, KCETB/ALL Regional Literacy Coordinator
- Liz Doran Integrated Care Programme for Older Persons (ICPOP)
- Mary O Hanlon, Kilkenny Age Friendly, Older Persons Council

- Nickie Egan, Tusla Education Support Service (TESS)
- Stephanie McDermott, Kilkenny Traveller Community Movement (KTCM)
- Tara Kelly, Carlow Adult Learning Service, KCETB

#### The following are members in 2025:

- Angela McCullagh, National Learning Network (NLN)
- Aileen Scott, Health Service Executive (HSE)
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- Barbara Behan, Kilkenny Adult Learning Service KCETB
- Bernadette O Rourke, Adult Education Service KCETB
- Beth Cooney, CBS Carlow Home School Community Liaison
- Danielle Dunne, Family Carers Ireland
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- 6 Kilkenny and Carlow Regional Adult Literacy Coalition

## **Key Learning Points from this Research**

#### Address stigma in workplaces.

Most people meet and know adults with unmet literacy needs through their work, family and friends. Investing to address stigma in the workplace will have a positive spillover effect into the family and community lives of staff and volunteers. This will have a positive impact on many more adults with unmet literacy needs.

 Address stigma around unmet literacy needs by telling a new story that communicates a fuller understanding.

This must include an explanation of the stigma and where it comes from, as well as information

- » on the extent and impact of unmet literacy needs,
- » about who may have an unmet literacy need,
- » on what has got in the way of adults developing literacy skills, and
- » that challenges the negative beliefs that some people hold about adults with unmet literacy needs.
- Work with all staff and volunteers in all types of organisations, and all sectors, to address stigma.

Tailor efforts to specific contexts and roles as each provides unique challenges and opportunities to address stigma. This includes the Education and Training sector and Adult Literacy services.

Deliver training that develops a trauma informed approach, communication skills and empathy as well as knowledge and awareness of unmet literacy needs.

This requires interactive learning, role modelling, coaching and mentoring approaches.

• An organisation-wide approach is needed to create a culture and environment that supports staff and volunteers providing services to the public, and adults with unmet literacy needs accessing these services.

There is a need to review

- » service models to make sure their design and delivery is appropriate for adults with unmet literacy needs.
- » the focus and effectiveness of current approaches including policies, Unconscious Bias training, and the role of Literacy Champion.

Now is the time to align this work with Equality, Diversity and Inclusion practice.

# Introduction

In 2021, the Irish Government published Adult Literacy for Life, a 10-year Adult Literacy, Numeracy and Digital Literacy Strategy (Government of Ireland, 2021).

Literacy is essential for daily living. This includes being able to "figure out how much medicine to give your child, understand safety signs in a hazardous workplace, sign up online for unemployment benefit after a sudden job loss, apply for a driving license or figure out how to juggle a tight household budget.

It involves listening and speaking, reading, writing, being able to complete mathematical tasks and using everyday technology to communicate, access services, and make informed choices. Literacy is not just about the ability to read and write" (Government of Ireland, 2021, p15).

#### Having an unmet literacy need remains widespread in Ireland

The most recent international research has confirmed that

- one in five Irish adults are at level 1 or below in literacy in 2023. This is an increase from the previous survey carried out in 2012 (Adult Literacy for Life (ALL), 2024).
- one in four Irish adults are at level 1 or below in numeracy.
- On 70% of Irish adults in 2021 had at least the basic digital skills to operate effectively online according to the European Commission Digital Economy and Society Index (DESI) (European Commission, 2022 p7).

# Stigma is a key barrier to adults accessing support for an unmet literacy need

Having an unmet literacy need has a significant negative impact on daily living. Stigma is a key barrier to adults accessing support for an unmet literacy need (SOLAS, 2021).

Stigma includes stereotypes, prejudice and discrimination (Goffman, 1963, Hartog et al., 2020).

#### Addressing stigma - what we know from existing research

To date, little work has been progressed to address the stigma associated with unmet literacy needs in Ireland. This is also true for other countries.

Research tells us that efforts to address stigma have focused mainly on mental health and infectious diseases and, to a lesser extent, on poverty (Hartog et al., 2020; Gronholm et al., 2017).

The body of available research is based on challenging inaccurate beliefs, negative assumptions and misconceptions that people hold about other people in stigmatised groups (Wear, and Kuczewski, 2008; Clapp et al., 2023).

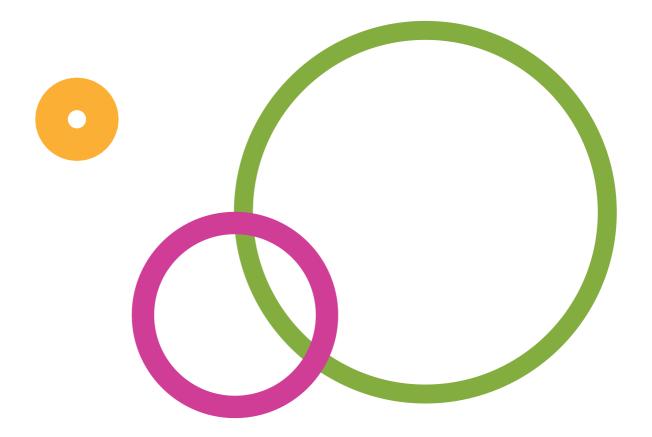
# Research project exploring perceptions and experience of unmet literacy needs among staff providing services to the public

This research is the first of its kind in Ireland. In addition to engaging 283 staff and volunteers providing services to the public, it has also sought the experience and perspective of 19 adults with unmet literacy needs using those services.

This research has confirmed that adults with unmet literacy needs have most likely experienced significant trauma when growing up that got in the way of their learning. This may include poverty, racism, poor mental health, homelessness, war and persecution, disability, and violence and abuse. They also experience stigma around their unmet literacy need and this gets in the way of them seeking help.

The findings and learning provide a solid evidence base on which to develop further work to address provider-based stigma around unmet literacy needs. This includes important learning for:

- How we understand and communicate the concept of unmet literacy needs, for telling a new and fuller story of unmet literacy needs, that challenges perceptions, myths and stereotypes.
- The development and delivery of training to meet the identified and expressed needs of staff and volunteers. This includes training to build knowledge and awareness. It also includes training in trauma informed practice to foster empathy and the skills to identify, respond and support adults with unmet literacy needs.
- Embedding this work within an organisation-wide approach, aligned to Equality, Diversity and Inclusion. This will help create a supportive environment to enable staff and volunteers to support adults with unmet literacy needs accessing their services.



# **Background and Rationale**

#### A 10-year whole of government and society strategy

In 2021, the Irish Government published Adult Literacy for Life, a 10-year Adult Literacy, Numeracy and Digital Literacy Strategy (Government of Ireland, 2021). In in this strategy, they set out a vision to achieve "an Ireland where every adult has the necessary literacy, numeracy and digital literacy to fully engage in society and realise their potential" (Government of Ireland, 2021, p10). To achieve this, the strategy is cross-departmental. Inputs and actions are needed from all government departments and sectors to create a supportive landscape for addressing unmet literacy needs.

In addition, this strategy is complemented by the actions outlined in the National Digital Strategy, 'Harnessing Digital – The Digital Ireland Framework (Government of Ireland, 2022). This includes a commitment to improving digital literacy by 2030 so that 80% of adults will have at least basic digital skills and that 90% of public services will be accessed online.

#### Defining literacy - not just about the ability to read and write

The strategy defines literacy in the following way:

Literacy is essential for daily living and tasks including being able to "figure out how much medicine to give your child, understand safety signs in a hazardous workplace, sign up online for unemployment benefit after a sudden job loss, apply for a driving license or figure out how to juggle a tight household budget".

"It involves listening and speaking, reading, writing, being able to complete mathematical tasks and using everyday technology to communicate, access services, and make informed choices. Literacy is not just about the ability to read and write" (Government of Ireland, 2021, p15).

In the absence of skills to complete these tasks, adults have an unmet literacy need.

This definition and understanding have been informed by the consultation carried out to develop the strategy. More than 2,000 individuals and organisations took part in this consultation process and shared their perceptions and experiences (Government of Ireland, 2021).

#### One in six Irish adults with level 1 or below literacy in 2023, an increase on 2012

Three thousand, eight hundred and twenty Irish adults aged between 16 and 65 years took part in the most recent survey research on unmet literacy needs in 2023. The results of this Programme for the International Assessment of Adult Competencies (PIAAC)<sup>1</sup> survey showed that

- 21% of adults surveyed are at level 1 or below in literacy. This means around 700,000 people may find it difficult to read instructions and follow them.
- 25% of adults surveyed are at level 1 or below in numeracy. This means around 835,000 people may struggle with working out a percentage or discount.
- 28% of adults surveyed are at level 1 or below in adaptive problem solving. This means around 935,000 people may struggle with working out how to get from A to B in the fastest time" (Adult Literacy for Life (ALL), 2024, p3).

When compared with available PIAAC data from 2012, these results highlight an increase of three percent in the proportion of Irish adults at level 1 or below in literacy. They also rank Ireland 13<sup>th</sup> out of 31 countries, behind the United Kingdom and above the Organisation for Economic Co-operation and Development (OECD) average of 26%.

The results for numeracy show no change from 2012. These results also show that the percentage of Irish adults at level 1 or below in numeracy is the same as the OECD average of 25%. The OECD average has increased from 20.2% in 2012 (Central Statistics Office (CSO), 2013).

<sup>&</sup>quot;The Central Statistics Office (CSO) carried out a nationally representative survey of adults aged 16 to 65 between September 2022 and June 2023. Adults completed the survey on a tablet in their homes. They did an assessment of three information-processing skills in: - literacy (reading and understanding written texts), - numeracy (understanding and using numerical information), and - adaptive problem solving" (ALL, 2024, p3).

Adaptive problem solving was not assessed in 2012. No data is available for comparison. Digital literacy was assessed in the PIAAC 2012 but not in 2023.

In 2012, 47% of Irish adults were assessed to be at level 1 or below on digital literacy.<sup>2</sup> However, the European Commission Digital Economy and Society Index (DESI) has collected data in this area since 2014.

- In 2021, 70% of adults had at least the basic digital skills to operate effectively online. Forty per cent had above basic digital skills (European Commission, 2022 p7).
- This places Ireland above the European Union (EU) averages for basic digital skills (54%) and above basic digital skills (26%).
- This is an improvement on 2016 when 44% of Irish adults had basic digital skills.
- This was below the EU average of 55% (European Commission, 2016 p4).

# Having an unmet literacy need has a significant negative impact on daily living

Responses submitted to the consultation to develop the Adult Literacy for Life Strategy (SOLAS, 2021) describe the broad and severe impact on adults' ability to undertake daily living tasks. This impact is felt across all areas of people's lives and is described in the following ways:

- **Functional tasks** "managing personal finances and taxes and banking, reading medicine bottles, filling out forms, shopping, reading bus timetables, and reading safety signs being secure online" (SOLAS, 2021 p23).
- Accessing and interpreting information "ability to get a hold of and accurately interpret important information such as news, public policy, public health messages" (SOLAS, 2021 p23).

This was assessed as problem solving in technology-rich environments and measured by their ability to use a number of common computer applications (e.g. email, spreadsheets, word processing, internet browser) to complete tasks on the laptop computer (Central Statistics Office, (CSO), 2013 p5).

- Communication and social connection "ability to communicate with others, through spoken and written language, letters, online social networks, email, mobile phone (including instant messaging), developing and maintaining social connections" (SOLAS, 2021 p23).
- Citizenship and participation in society "ability to participate in wider society/ community rather than direct communication with friends and relatives, [and] to specific activities required for democratic participation such as voting" (SOLAS, 2021 p23).
- Parenting and supporting children "helping children with homework, engaging with children's school" (SOLAS, 2021 p23).
- Work, business and education activities "required for participating in the labour force, do a job effectively, run a business, engage in business dealings, and participate in formal education or learning, working or learning remotely" (SOLAS, 2021 p23).
- Mental health, wellbeing and life satisfaction "internal growth, confidence building, independence, self-efficacy, mental health and wellbeing, which empowers people to manage a wide range of daily tasks effectively. Access to activities that enhance life quality, such as culture or cultural activities, literature" (SOLAS, 2021 p23).
- Accessing services, rights and entitlements "accessing public or private services, particularly with many now online, such as social welfare applications and allowances, disability related supports, applying for education courses, tax refunds" (SOLAS, 2021 p23).

Having an unmet literacy need impacts adults in these ways, right across the world. This is consistently reported in international research evidence.

The term 'literacies' is used in this research evidence to acknowledge the impact on various areas of people's lives. This includes functional literacy, health literacy, financial literacy, digital literacy and consumer literacy (Stewart and Yap, 2019).

The following outcomes are described in the research evidence:

- Poorer health status and outcomes. This arises from not having the ability to read instructions and advice, poorer adherence to effective medication and treatment, limited knowledge of health and healthcare issues and poorer self- management of health conditions (Easton, Entwistle and Williams, 2010).
- Health service users' limited ability to provide written feedback on their experience or on outcomes (Long et al., 2022).
- Poorer consumer behaviour. This arises from misinterpreting labels, misusing products and buying the wrong items. This causes adults to have feelings of embarrassment, frustration, and powerlessness. They are also reluctant to complain and make sure their consumer rights are upheld (Stewart and Yap, 2019).
- Humanitarian migrants face barriers in communicating their needs and accessing information and re-settlement services (Abood et al., 2022). This is deepened by the fact that migrants may spend years in a refugee camp without accessing formal education and without engaging in an active society.
- Poorer participation in community and social activities.
- Poorer employment opportunities and earning potential. Poorer numeracy contributes to intergenerational cycles of poverty, disadvantage and inequality in families and communities (O'Meara et al., 2024).
- Challenges at work with increasing work on computers. Adults with an unmet literacy need often rely on colleagues in the workplace to complete literacy related tasks. This may create a strain on workplace relationships (Lalor et al., 2009).

Despite experiencing this impact and negative outcomes, adults with unmet literacy needs may not seek support to address it.

Flynn et al. (2011) interviewed 10 adults in Canada who had not sought help for their literacy need and identified the following types of barriers that get in the way of seeking help.

- Situational barriers poverty, violence, lack of familial support, family responsibilities, negative attitudes to education.
- Dispositional or motivational barriers negative past experiences of education, community perceptions, negative attitudes to education
- Institutional barriers teachers, relevance of programme and curriculum, criminality, cultural alignment, government policy and funding (p 44-46).

In addition, the research confirms that adults with an unmet literacy need are not a homogeneous group. They experience these barriers differently, and many experience a number of these barriers (Stewart and Yap, 2022; Hayes 1988).

# Stigma is a key barrier to adults accessing support for an unmet literacy need

The report of the consultation to develop the Adult Literacy for Life Strategy noted that "chief among the barriers to addressing literacy, numeracy and digital literacy identified was low confidence, stigma, fear, and a sense of shame" (SOLAS 2021 p15).

Research has consistently found that stigma drives many adults to hide an unmet literacy need, and to find alternative ways of coping. This is due to fear of negative judgement by others (Stewart and Yap, 2022; Lalor et al., 2009). This puts some adults off seeking help (Martini and Page, 1996).

Martini and Page (1996 p128) carried out research with adults with unmet literacy needs engaged in adult learning programmes in Ontario, Canada.

"Many adult learners indicated that, while keeping reading difficulties secret was not desirable in theory, more than half of this group acknowledged that in practice they guarded the secret .... very carefully".

Lalor at al., (2009) reported that Irish males experienced ridicule about their unmet literacy need from colleagues and management in the workplace. "Often referred to as invisible members of society, those of low or limited literacy background commonly opt to fall under radar so-to-speak, avoiding any potential feelings of embarrassment or shame.

Skills of low literacy are often hidden in full camouflage, as individuals avoid making known, any deficiencies for fear of being harshly labeled, isolated, or traumatized.

Falling victim to marginalisation and others' active prejudice, many persons incur low literacy as life's outcome, not of their own choosing."

(Baugher and Singleton, 2021 p2).

#### Stigma includes stereotypes, prejudice and discrimination

When writing about stigma, Goffman (1963) defined it as "a mark or attribute that reduces an individual from a whole and usual person to a tainted, discounted one (cited in Corrigan and Shapiro, 2010 p909). Hartog and colleagues (2020) describe it as a "social process of labelling, stereotyping and prejudice causing separation, devaluation and discrimination" (p247). Stigma includes the following:

- **stereotypes** "general beliefs about the characteristics, attributes and behaviours of people who are categorisable as a member of a particular social group what we think members of a particular group are like.
- prejudice a generalised attitude towards members of a social group
   how someone feels about a group.
- discrimination behaviour directed towards a group based on prejudice" (p 909).

Stigma is experienced and viewed in many ways (Stewart and Yap, 2022; Gronholm et al., 2017). This includes from the perspective of those experiencing stigma and from the perspective of who or what gives or receives the stigma.

Table 1 below includes more information (Pescosolido and Martin, 2015 cited in Gronholm et al., 2017 p249-250).

Table 1: Understanding the concept of stigma

| Experiential view: focus on how stigma is experienced                             | Action oriented view: focus on who (or what) gives or receives the stigma  |  |
|---|--|--|
| <b>Perceived stigma</b> - a belief "most people" are considered to hold           | <b>Public stigma</b> - stereotypes, prejudice and discrimination as endorsed by the general population   |  |
| Endorsed stigma - expressing agreement with stereotypes/prejudice/ discrimination | <b>Structural stigma</b> - prejudice and discrimination through laws, policies, and constitutional practices   |  |
| Anticipated stigma - expecting an experience of prejudice/discrimination          | <b>Courtesy stigma</b> - stereotypes, prejudice and discrimination acquired through a connection with a stigmatised group/person   |  |
| <b>Received stigma</b> - overt experiences of rejection or devaluation            | <b>Provider-based stigma</b> - prejudice and discrimination by occupational groups designated to provide assistance to stigmatised groups                                  |  |
| <b>Enacted stigma</b> - exhibiting discriminatory behaviours                      | <b>Self-stigma</b> - when people who belong to a stigmatised group legitimise publicly held stereotypes and prejudice and internalise these by applying them to themselves |  |

#### Stigma arises from an element or multiple elements of an adult's identity

Hartog et al., (2020 p247) state that "stigmatisation can occur when a person or group has an identity that is perceived to deviate from locally accepted norms".

The research evidence presents many examples. These include the following groups:

- adults with mental health difficulties (Clapp et al., 2023; Corrigan and Shapiro, 2010),
- adults from minority ethnic communities including the Traveller and Roma communities (Lalor et al., 2009),
- adults who have experienced trauma through experience of sexual abuse and violence (Clapp et al, 2023),
- adults who are socially excluded who experience addiction, homelessness, criminality (Baugher and Singleton, 2021; Flynn et al, 2011),
- adults living in poverty (Flynn et al, 2011, Wear and Kuczewski, 2008),
- adults with disabilities and additional learning needs (Baugher and Singleton, 2021).

The research also highlights that stigma can be intersectional. This is informed by Crenshaw's (1989) theory and suggests that "multiple stigmatising identities converge within individuals or groups" (Kemp et al., 2019 p2).

According to this theory, an adult with unmet literacy needs may have "overlapping and interconnected aspects of their identity" (Baugher and Singleton, 2021 p2) that are stigmatising. This might include their education, age, class, socioeconomic status, disability, family support, and their experience of substance use, mental health, foster care.

Baugher and Singleton (2021 p2) highlight that "intersectional theory is not just about personal identity in a vacuum, but the ways in which it is affected and, to some extent, defined by systems of oppression, discrimination, and privilege" (Wear and Kuczewski, 2008).

#### Efforts to address stigma have focused on health, not literacy

To date, no work has been progressed to address the stigma associated with unmet literacy needs in Ireland. This is also true for other countries.

Relatively little research has been carried out on addressing stigma around unmet literacy needs.

Most research concerned with addressing stigma has focused on other issues including:

- mental health (Gronholm et al., 2017; Finkelstein, Lapshin and Wasserman, 2008),
- poverty (Lee and Priester, 2016; Motley and Sturgill, 2014),
- o infectious disease (Hartog et al., 2020; Kemp et al., 2019; Rao et al., 2019; Heijnders and Van Der Meij, 2006),
- care experience (Gerstein Pineau, O'Neil and Hyatt, 2020; Gerstein Pineau and Busso), substance abuse (Bielenberg et al., 2021) and
- ageing (Hestres et al., 2022).

Investment in literacy has focused on the provision of Adult Literacy programmes to support adults with unmet literacy needs and on promoting literacy friendly practices and organisations (Government of Ireland, 2021).

 This includes Literacy Awareness training and Literacy Ambassadors and Champions (National Adult Literacy Agency, 2023; Carlow County Council, 2023).

#### Addressing stigma – what we know from existing research

Review of the research evidence has confirmed that more is known about the nature and the impact of stigma and less about how to address it effectively. Gronholm et al., (2017, p249) consider that "applying this knowledge to deliver and evaluate interventions to reduce discrimination and stigma in a lasting way is a complex and long-term challenge".

This body of available research is based on challenging inaccurate beliefs, negative assumptions and misconceptions that people hold about other people in stigmatised groups (Wear, and Kuczewski, 2008; Clapp et al., 2023).

When writing about medical professionals' perceptions of the poor, Wear and Kuczewski (2008) highlight that "stereotypes, the generalisations or assumptions that people make about the traits and qualities of members of a group (such as poor people or wealthy people), give providers confidence in their capacity to understand members of that group and to predict how they will act.

In many cases, two distinct groups are at play - for instance, black/ white, male/ female, wealthy/poor, doctors/laity. Individuals most often put themselves into one of these dualistic social categories and upon social categorisation . . . into in groups and out-groups, people spontaneously experience more positive feelings toward the in-group . . . in-group membership increases the psychological bond and feelings of 'oneness' that facilitate the arousal of empathy in response to others' needs or problems." (Smedley, Stith and Nelson, 2003 p170 cited in Wear, and Kuczewski, 2008 p644)".

In their research on <u>beliefs about trauma and its consequences</u>, Clapp et al. (2023<sup>3</sup> p12) found that "members of the general public do endorse a range of stereotyped beliefs involving the chronicity of post-trauma responses; the inherent dangerousness of survivors; lowered expectations in employment settings; assumed impairment in social domains; blame and suspicion of those demonstrating post-trauma reactions....".

Almost a quarter of those who completed their survey agreed with the following statements "'People exposed to serious trauma often become dangerous', and 'It is difficult to work with someone who has experienced serious trauma'" (Clapp et al. (2023 p12).

The Frameworks Institute in the United States and Frameworks UK have completed a number of recent evidence-based projects that seek to address stigma in areas outside of traditional healthcare.

<sup>3</sup> Sample of 1,270 undergraduate and post graduate students.

These include projects on attitudes to care experienced people in Scotland (Gerstein Pineau, O'Neil and Hyatt, 2020; Gerstein Pineau and Busso; 2020) and how older people are presented in the media (Hestres et al., 2022).

Key learning from these projects that is transferable to addressing stigma around unmet literacy needs includes:

- To address stigma and promote positive attitudes, there is a need to first include a full explanation of where stigma originates and how it works.
  - "Findings .... suggest that use of the term stigma is counterproductive to communications about children's care unless the process by which stigma occurs is clearly explained first" (Gerstein Pineau and Busso; 2020 p9).
- Images, when carefully selected, can be used to reframe ageing in a positive light, moving away from negative stereotypes (Hestres et al., 2022).

In addition, Table 2 presents the most robust existing research about what works in addressing stigma. This research identifies the following key learning for addressing stigma about unmet literacy needs.

- Addressing stigma is a priority. It has a severe and negative impact (Heijnders and Van Der Meij, 2006; Gronholm et al., 2017; Rao et al., 2019; Hartog et al., 2020; Bielenberg et al., 2021).
- Efforts to address stigma should be based on understanding and evidence of stigma; where it comes from, beliefs, attitudes, behaviours (Gronholm et al., 2017; Gerstein Pineau and Busso; 2020; Hestres et al., 2022).
- A multi-level approach is needed to address stigma (Heijnders and Van Der Meij, 2006; Kemp et al., 2019; Rao et al., 2019; Hartog et al., 2020). We know that stigma is complex and has many layers.

A multi-layered approach may involve actions targeted at interpersonal, community and organisational levels to address provider-based stigma around unmet literacy needs.

• The most effective practice in addressing stigma combined education, training, and in-person /video contact⁴ with people from the stigmatised group.

This contact with people with lived experience is a key element of provider-based stigma interventions that have longer term impact.

• Greater focus is needed on measuring if efforts to address stigma work (Heijnders and Van Der Meij, 2006). Robust evaluation should be used and should follow up to assess longer term effectiveness (Gronholm et al., 2017; Rao et al., 2019).

Evaluation should use validated instruments (Hartog et al., 2020) and should include learning about implementation, sustainability and cost-effectiveness (Kemp et al., 2019; Bielenberg et al., 2021).

<sup>4 &#</sup>x27;Contact' refers to all interactions between the public and persons affected, with the specific objective to reduce stigmatising attitudes. Contact can either be direct and face-to-face, or indirect (e.g. through the media) Pescosolido and Martin, 2015 cited in Gronholm et al., 2017 p250).

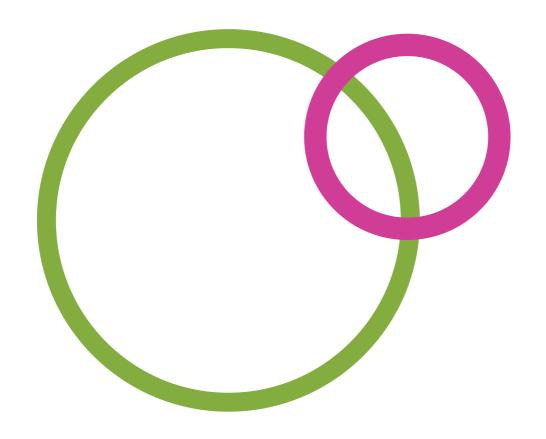




Table 2 Key learning from existing research about what works in addressing stigma

| Study/project                        | Context  | Stigma  | Professionals                                       |
|--------------------------------------|--|---|---|
| Heijnders and Van<br>Der Meij (2006) | Literature review of stigma reduction strategies and interventions | HIV/AIDS,mental illness, leprosy, TB and epilepsy | General narrative review                            |
| Gronholm et al. (2017)               | Narrative review of systematic reviews published from 2012         | Focus on mental health                            | Healthcare professionals, police officers, students |

#### Learning for addressing stigma around unmet literacy needs

- Experience of stigma worsens the impact of issue or disease.
- Stigma is complex with many sides. A multi-layered approach at different levels is needed to address it.
- Approaches at 5 levels:
  - 1. Intrapersonal level to support adult experiencing stigma (counselling, advocacy & support groups).
  - 2. Interpersonal level to improve the local environment for adults experiencing stigma (care and support).
  - 3. Community level to reduce stigmatising attitudes/ behaviours in communities (education, contact, advocacy for service access, support networks).
  - 4. Organisational/institutional to reduce stigma in the organisation (training, policies).
  - 5. Governmental/structural to enforce legal, policy, and rights-based structures and processes (e.g. Public Sector Equality and Human Rights Duty).
- Work has been progressed on stigma and its reduction, less on measuring effectiveness of stigma reduction strategies.
- Approaches focused on a single level and single target group are inadequate.

  Multi-level approaches are needed.
- Understanding stigma is important to inform approaches to address it.
- Stigma has a severe impact across all areas of adults' lives: health, employment, education, criminal justice, homelessness, life expectancy.
- Education and contact are the most commonly used strategies.
- Evidence of small-moderate impact of campaigns/ interventions to increase knowledge, change attitudes and intended behaviour about desire for contact.
- Evaluation methods used to date, are not robust.
- Lack of follow up research makes it unclear if short term anti- stigma interventions work.

| Study/project      | Context  | Stigma                                      | Professionals  |
|--------------------|--|---|--|
| Kemp et al. (2019) | Systematic review 35 studies aimed at reducing health related stigma published from 2003-2017      | HIV Aids, mental health Leprosy             | Healthcare workers, caregivers, family members                 |
| Rao et al. (2019)  | Systematic review of<br>24 studies multilevel<br>interventions<br>published by 30<br>November 2017 | Focus on infectious diseases, mental health | Healthcare workers, police officers, family, community members |

#### Learning for addressing stigma around unmet literacy needs

- Need multilevel intervention approaches to address stigma.
- Most, 83% of studies reported a pilot or one-off intervention.
- Most used education or contact for individual or interpersonal level interventions.
- Most were not multi-level interventions.
- Institutional or structural level interventions are more challenging and require more time and money.
- None reported using implementation science theory or frameworks to aid implementation of interventions in practice. Potential exists in this area.
- Future research to consider costs, sustainability and implementation processes.
- Negative consequences of stigma aggravates issue/disease.
- Stigma operates at multiple levels. Approaches need to target multiple levels including individual, interpersonal, community and structural.
  - 1. Half, 50% reported community-level alongside interpersonal and/or intrapersonal level interventions.
  - 2. 29% examined one stigma reduction strategy across more than one level.
  - 3. Only 4% combined a structural-level intervention with another level.
  - 4. Most, 67% used an education strategy.
  - Evaluation methods lack robustness. Future research should report on properties of scales/measures used and analysis and use of robust designs to test effectiveness.

| Study/project             | Context  | Stigma  | Professionals   |
|---------------------------|--|---|---|
| Hartog at al. (2020)      | Systematic review of 61 studies 2002-2018 describing 21 interventions, 10 for children & adolescents | Health related stigma (93%) HIV/ AIDS, mental illness                       | Public provider (10%) organisational (54%)  |
| Bielenber g et al. (2021) | Systematic review of<br>15 studies between<br>2011 and 2019  | interventions for providers who treat patients with substance use disorders | Doctors, psychologists, nurses, social workers, counsellors, primary care providers, pharmacists, community health workers, psychiatric staff |

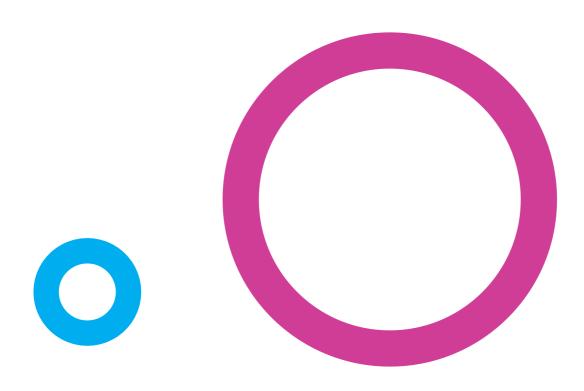
#### Learning for addressing stigma around unmet literacy needs

- Stigma has a negative impact on health and quality of life.
  - )> Categories of stigma:
  - 1. action-oriented stigma: self-stigma, provider-based stigma, courtesy stigma, public stigma, structural stigma.
  - 2. experiential stigma; anticipated, received, endorsed, enacted and perceived stigma.
- There are more interventions to address stigma but still a lack of evidenced interventions.
- Need to use validated, cross-culturally tested instruments based on theory to measure stigma.
- Interventions are siloed and isolated, focus on a single stigmatised group and use a disease-specific approach.
- Most interventions were reported for adults (77%), action- oriented stigma (93%): 40% public stigma, 35% provider- based stigma, 33% self-stigma.
- Most interventions are implemented at one level for short duration.
- Strategies targeting adults include staff training programmes (20%), lived experience social contact and policies. Training is frequently interactive with role play, dialogue and discussion groups.
- Stigma has a strong, negative impact on adults with addiction issues.
- Professionals can hold negative attitudes towards patients with addiction problems. This has a negative impact on service access and use.
- Oldentified six types of provider-based stigma interventions that included online education, in-person education, in-person contact with adults in recovery.
- Higher quality studies included motivational interviewing or communication training interventions with in-person mentorship/ contact with adults in recovery (in video or in- person format).
- Interventions that combined education, training, and in-person/video contact with people in recovery maintained improved attitudes, communication skills and interaction after 6-12 months.
- Contact with individuals in recovery is a key element of provider-based stigma interventions with longer term impact.
- Important to include implementation outcomes (sustainability and costeffectiveness).

#### **Objectives of this research**

The key objectives of this research were to:

- 1. Review current national and international research to identify learning about activities and solutions which have been found to work well in addressing stigma around unmet literacy needs.
- 2. Consult staff and volunteers of Coalition partners and other organisations who work with the public in Counties Carlow and Kilkenny. This will focus on exploring their understanding, experience and perceptions of stigma around unmet literacy need.
- 3. Consult adults with an unmet literacy need about their lived experience of stigma when accessing services as a member of the public. This should include adults who are currently seeking support through Adult Literacy services.



# **Research Methods**

This research engaged 283 staff and volunteers who provide services to the public in Counties Carlow and Kilkenny in an online survey and focus groups. These methods were used to explore their perceptions and experiences of adults with unmet literacy needs. In addition, 19 adults with unmet literacy needs shared their views and lived experience of accessing public services through focus groups and case studies.

## **Design and methods**

Three research methods were used and triangulated to provide a fuller exploration and picture of participants' experience of unmet literacy needs. These were an online survey, focus groups and workshops and a lived experience case study.

The online survey was anonymous to investigate the personal beliefs and perceptions held by staff and volunteers while the lived experience case study method was trauma- aware and appropriate to facilitate adults with an unmet literacy need to share their personal journey and story. The research was completed between November 2024 and February 2025.

This research was supported by a Research Advisory Group that included members of the Kilkenny and Carlow Regional Adult Literacy Coalition. The group provided advice throughout the research process.

### **Participants**

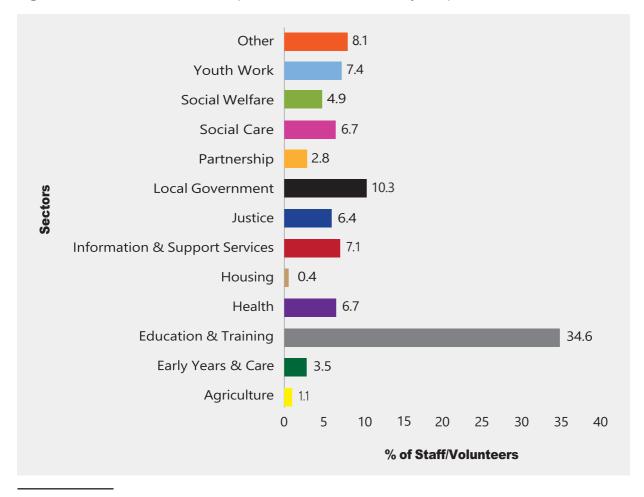
In total, 283 staff and volunteers completed an online survey, 60 staff and volunteers took part in focus groups or workshops. Nineteen adults with an unmet literacy need either took part in a focus group or contributed a lived experience case study.

**Staff and volunteers:** A systematic approach was used to identify potential participants across organisations who provide services to the public in Counties Carlow and Kilkenny.

This included the following actions:

- The KCETB Director of Further Education and Training issued a letter of invitation to directors in other statutory partner organisations.
- The Kilkenny and Carlow Regional Literacy Co-ordinator sent an email invitation to all Coalition partner organisations and agencies who work with the Co-ordinator.
- Posters with a QR code with an embedded link to the survey were printed and distributed locally.
- A dedicated email signature for the research was created with a QR code to the survey. This was used by the researcher and members of KCETB managing and supporting the research process.

Figure 1: What sectors are represented in the survey responses?<sup>5</sup>



<sup>5</sup> Other included community and voluntary groups, tourism and political organisations.

Figure 1 and Table 3 below shows that the survey was completed by staff and volunteers who worked across a range of sectors and held varied roles within their organisation.

- More than half, 56.5% worked in a statutory organisation, 43.5% in a community and voluntary organisation.
- Most, 95% held a paid role, 5% worked in a voluntary role.

Almost two in five, 39.2% identified that they had worked in Adult Literacy supporting adults with unmet literacy needs.

Table 3: What type of role do the survey respondents hold in their organisation?

| Organisational Role                         | Respondents<br>(Number) | Respondents<br>(%) |
|---|-------------------------|--------------------|
| Administration - reception                  | 10                      | 3.5                |
| Administration - support                    | 20                      | 7.1                |
| Front line practice with clients/ customers | 149                     | 52.7               |
| Leadership team                             | 12                      | 4.2                |
| Manager/co-ordinator                        | 45                      | 15.9               |
| Senior Manager                              | 16                      | 5.6                |
| Supervisor                                  | 7                       | 2.5                |
| Other                                       | 24                      | 8.5                |

Forty-eight staff and volunteers took part in seven focus groups.

- Five of these were hosted online.
- Two focus groups with managers were hosted in-person.

These included representatives from 39 statutory and community and voluntary organisations.

Two workshops were facilitated with members of the Kilkenny and Carlow Regional Adult Literacy Coalition.

 Twelve members of the Coalition attended the first workshop in November. The second workshop took place in February and was also attended by 12 Coalition members.

### Adults with an unmet literacy need:

- Thirteen adults attending Adult Learning services took part in two inperson focus groups.
- Six lived experience case studies were completed by adults engaged with support services. These adults are not currently accessing support for their literacy need.

### **Data collection procedures**

### Online survey for staff and volunteers

Review of the existing research confirmed that few anti-stigma interventions have focused on unmet literacy needs. No validated measures of beliefs, attitudes and behaviour have been developed for this issue.

Questions for the online survey were informed by a review of existing stigma measures developed for other areas (Clapp et al., 2023; Wei et al., 2018; Lee and Priester, 2016; Motley and Sturgill, 2014; Buck et al., 2005; Addy et al., 2004) as well as existing descriptive research on adults' experience of unmet literacy need (SOLAS, 2021; Lalor et al., 2009).

The online survey had 56 closed, multiple-choice questions.<sup>6</sup> These asked about the following five areas:

- Awareness and understanding of unmet literacy needs.
- Perceptions about adults with unmet literacy needs.
- Providing services to adults with unmet literacy needs.
- Training and support to provide services to adults with unmet literacy needs.
- Professional role and sector.

The survey was piloted with 10 KCETB staff and members of the Kilkenny and Carlow Regional Adult Literacy Coalition.

Answer format: Yes – No - I am not sure or Strongly disagree – Disagree - Neither agree or disagree – Agree - Strongly agree. The responses for Disagree and Strongly Disagree were collapsed to give a total for disagreement. The responses for Agree and Strongly Agree were collapsed together to give a total for agreement.

The focus groups and workshops lasted up to 1 hour. Those taking part were asked about:

- Their perceptions, awareness and experience of adults with unmet literacy needs while providing services to the public.
- Their service response to adults with unmet literacy needs.
- Their workplace, as a supportive inclusive environment for colleagues and service users with unmet literacy needs.

### **Adults with unmet literacy needs**

The focus groups with adults attending Adult Learning services lasted 40 minutes. The learners were asked about the following:

- Recent positive and negative experiences of using public services to complete everyday tasks.
- Their experience of stigma and its impact.
- Their thoughts on perceptions, myths and stereotypes of adults with unmet literacy needs held by those providing public services.
- Ways to improve service delivery to enhance the experience of adults with unmet literacy needs.

The lived experience case study engaged adults with unmet literacy needs who have not sought help and support through available education programmes.

These adults were engaged in this research by other organisations in the community, from whom they are accessing services and support. This method provided the adult with control over what they wished to contribute to the research and how they wished to do so.

- The researcher worked with staff across participating organisations to co-produce a guideline for staff. This included information on the rationale for the research, prompts (Tell me about your reading and writing. What got in the way of your learning? Tell me about your experience of finding information about services you need.) as well as data protection and management.
- One adult audio recorded their story while the other five adults worked with their case/support/project worker to draft and submit a written case study.

### **Ethics and data protection**

The methods used to collect the data were chosen to suit the sensitive nature of the research and to ensure the research was carried out in an ethical way.

- Anonymous online survey: This did not collect any personal or other information that would make it possible to identify participants. This provided anonymity to those answering sensitive questions about their beliefs about adults with unmet literacy needs.
- Trauma aware approach: The lived experience case study was designed to be trauma aware (Macdonald et al., 2024). This allowed those taking part to have control over decisions about how much of their story they wished to share and in what format. This data was collected with the support of a case worker, with whom they had an existing trusted relationship.
- Valid informed consent: Taking part was voluntary and based on informed consent. Participants received an information letter that explained why the research was taking place, as well as how the information would be collected, used and reported. Participants were made aware that they could change their mind about taking part. The case study could be withdrawn at any point up to the report being finalised.

- Follow up support: Participants were made aware of support available locally that they could access if the research triggered difficult memories.
- **Complaints procedure:** Participants were made aware of how to make a complaint if they wanted to complain about how they were treated while taking part in the research.
- Compliant with General Data Protection Regulation (GDPR): The research processes and procedures complied with GDPR. The data was stored securely on a password protected computer, accessed only by the researcher. All data will be deleted on completion of the project.

### Strengths and limitations of the research

This research explored perceptions and beliefs held by staff and volunteers providing services to the public about adults with unmet literacy needs.

Perceptions and beliefs contribute to stigma, and this is the first research in Ireland to explore this sensitive issue.

**Strengths:** This includes using three different data collection methods to provide a full picture of the issue. Using a trauma aware approach was also a key strength in engaging adults with unmet literacy needs in this sensitive research as well as professionals.

We know from practice and research elsewhere that adults with unmet literacy needs have most likely experienced significant trauma when growing up that got in the way of their learning. This may include poverty, racism, poor mental health, war and persecution, disability, homelessness and violence and abuse.

**Limitations:** A systematic approach was used to recruit professionals to take part in the research. Yet not all professional groups or organisations engaged. The findings may not represent the perspective and experience of all organisations providing services to the public in Counties Carlow and Kilkenny. This should be acknowledged as a limitation of the research.

In addition, the adults with unmet literacy needs who took part, do not represent all groups of adults with unmet literacy needs.

Adults recovering from addiction, older adults and incarcerated adults and ex-offenders are not represented in this part of the research.

### **Findings**

The key findings from this research are:

- 1. Experiencing unmet literacy needs is widespread in Counties Carlow and Kilkenny.
- 2. Having unmet literacy needs has a negative impact on daily living and self-worth.
- 3. Gaps exist in staff and volunteers' understanding of unmet literacy needs.
- 4. Unmet literacy needs is complex. Adults often experienced trauma that got in the way of their learning.
- 5. Adults with unmet literacy needs continue to experience shame and stigma.
- 6. Support for and awareness of unmet literacy needs among providers has improved.
- 7. Not all staff view supporting clients with unmet literacy needs as part of their professional role at work.
- 8. There is an expressed need for training.
- 9. Training should build confidence and skills to identify, respond and support adults with unmet literacy needs, as well as knowledge and awareness.
- 10. An organisation-wide approach is needed to provide a supportive environment for staff, volunteers and adults with unmet literacy needs.

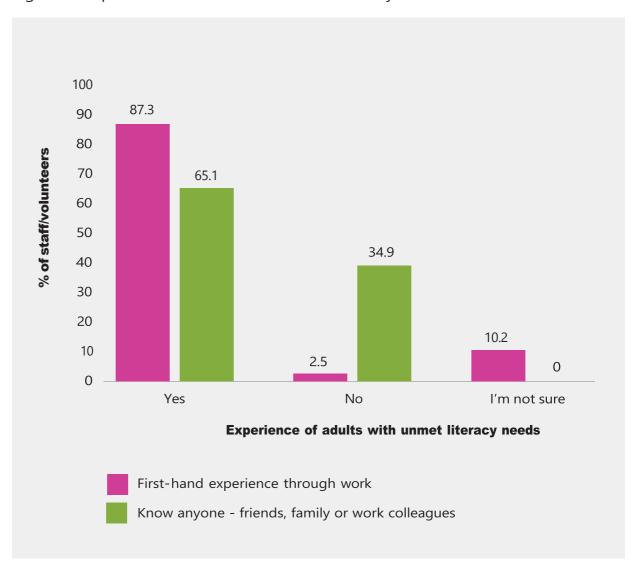
# Finding 1 - Experiencing Unmet Literacy Needs is widespread in Counties Carlow and Kilkenny

# Most people who completed the survey know someone with an unmet literacy need.

The majority of staff and volunteers who filled out the anonymous survey reported that they come in contact, through their work, or that they know someone among their friends, family or work colleagues who struggles with literacy, numeracy or using technology.

Figure 2 below shows that more than four in five who filled out the survey had firsthand experience of an adult with unmet literacy needs through their work.

Figure 2: Experience of adults with unmet literacy needs



- Most of these worked in paid roles (95.6%) across the statutory (55.9%) and community and voluntary sectors (44.1%).
- A small number worked as unpaid volunteers (5%).
- These staff and volunteers work across a range of areas. This includes agriculture, early years education and care, education and training, health, housing, information and support services, justice, local government, partnership, social care, social welfare and youth work.
- More than half (54.7%) work in front line practice with clients and customers. Three percent work in reception (3%) while 19% work in managerial/co-ordinator/supervisory roles. One in 10 hold leadership or senior management roles in their organisation.

Figure 2 also shows that two in three (65.1%) who filled out the survey knew someone with unmet literacy needs among their friends, family or work colleagues.

# Most of the staff and volunteers who took part in a focus group frequently encounter adults with unmet literacy needs in their work.

The widespread nature of unmet literacy needs was also raised consistently in the focus groups with staff across sectors and agencies. These included staff working in probation, education and training, as well as services providing support to the elderly and around substance misuse, disability and domestic abuse.

"I could give you.. I could probably give you 10 examples every week, probably two a day in relation to the people that we encounter regularly ... who have literacy needs and the practical effect it has on their lives. Whether it be that they are not aware of entitlements ... they've been refused entitlements and aren't sure about how they can appeal ..."

(Focus Group: Information and Support Services Sector staff member)

"We would deal with so many people across the board, anywhere from one to two years unemployed up to even 10, some 10 plus and a lot of those people like that until you come to the questionnaire that you, you wouldn't know. And even at that, they might not tell the truth at that point ... and eventually they might say it or admit it when they come more comfortable with you."

(Focus Group: Education and Training Sector staff member)

"We perform what we call a comprehensive geriatric assessment. So we ask a lot of questions, and we go into not just their medical side, their social sides, you know.

People are very slow to tell you for starters, and they could have been seen by three or four professionals and then our community connector might go out and sit in their house with them and it might only arise then that they can't read ...

What we're finding is that people are embarrassed as a general rule to say it and it really takes time before somebody will actually admit to the fact that they can't read and write.

We don't have huge numbers. But there certainly there."

(Focus Group: Health Sector staff member)

Unmet digital literacy needs also emerged frequently in the focus group discussions and workshops and in the lived experience case studies.

"The older generation, I suppose, are a little bit concerned about everything going online and being able to access information online as well. They also want to have the option of lifting the phone or coming into reception here to speak to a staff member."

(Focus Group: Local Government Sector staff member)

"All the system is online, so they [parents] have to apply online and then when they find a service, they get a number and bring that to the service and the service registers the number and it goes back online for them to accept it.

And do you know, there's an awful lot of being online and applying and it's just, it's presumed that everyone knows how to do that ... it's a massive system that they have to navigate through.

They don't have the time and ... to be going in and being able to understand things and an awful lot of phrases and terminology that's used so easily within the department and within the public and within the agencies. It's not the language they use every day."

(Focus Group: Early Years Care and Education Sector staff member)

# Adults with unmet literacy needs who took part varied in age, cultural background and life experience.

The widespread nature of unmet literacy needs was also confirmed by the profile of the adults with unmet literacy needs who took part in the focus groups and those who contributed lived experience case studies.

These adults varied in age. They were from a range of cultural backgrounds and reported varied life experiences. These included the following groups of adults.

- Parents of young children and older families including adults parenting alone
- Adults from the Traveller and Roma communities
- Adults engaged with domestic abuse services
- Adults engaged with Home School Community Liaison support services
- Adults with experience of International Protection processes
- Adults with physical and learning disabilities
- Adults with experience of war and persecution
- Adults with experience of homelessness
- Migrants

# Finding 2 - Having Unmet Literacy Needs has a negative impact on daily living and self-worth

### Negative and far-reaching impact including mental health

The focus groups with adults and the lived experience case studies provide strong impactful accounts of the negative and far-reaching impact of having an unmet literacy need on adults' lives.

This is clear in the following excerpts from two of the lived experience case studies.

Figure 3: Case study - how does having an unmet literacy need affect your life?

### How does it affect your life?

I'm at the back of the queue for everything. People will be talking about did you hear about this or that and I haven't, and I don't know how to find out about it, except I hope I can find someone who can tell me.

I have missed out on so much. I would love to be able to sit down with a magazine or a paper, it looks wonderful. I can't help my children with homework which makes me sad. I love to hear my children reading and I am so proud of them when I hear them reading but I should be able to help them more.

I can't open a bank account because I don't understand how they work, and I would be afraid that I would make a mistake.

My Mammy and Daddy can't read or write, and I always hoped to learn so that I could help them, that was mine and my brothers and sister's biggest wish. I feel like I've let them down because of this.

If I get a letter, it might be a private letter that I don't want someone else to read, but I have no choice and have to go to a friend or relation who can read, and they will read it for me. Everyone knows about your business, even your most private business, I have no choice but to do this.

These case studies also highlight the negative impact on mental health.

Figure 4: Case study - how does having an unmet literacy need affect your life?

I have a difficulty when writing in Romanian more than reading. I read very slow, but I do. Writing is very difficult as I can't imagine the word how to write it. In English language I do not know how to read or write.

#### How does it affect your life?

Mostly I think financially, as I can't find a job. I feel that I don't belong to society. Especially in Ireland as everything here is in English.

This negative impact on mental health also emerged very strongly and clearly in the focus group discussions with adults engaged with Adult Learning services. Two of the 13 adults that took part in the focus groups became emotional and distressed when describing their memories and their experiences of accessing services.

### Impact on daily living activities and participation in society.

Participants shared multiple examples of how their unmet literacy need had inhibited their ability to access public services.

These examples also highlight the wider impact on self-esteem, confidence and participation in everyday activities.

#### This included:

- Being unable to read a letter about medical appointments and having to bring these to a neighbour to read and explain.
- Being told to fill out a social welfare form online, after disclosing that they couldn't do this due to an unmet literacy need and being sent away to do their best to fill out the form.
- Being consistently told by their partner that they just needed to try harder to learn to read.

- Being unable to read labels when shopping.
- Being unable to read texts from friends.
- Losing welfare payments due to being unable to understand instructions around requirements.
- Not being able to help with children's homework.
- Not being able to read road signs if going on a long journey.
- Not being able to tax the car.

This was reinforced in the focus groups discussions with staff and volunteers working directly with adults with unmet literacy needs.

Numerous examples were shared including the following:

"Travellers missing appointments ... health appointments because of literacy issues that they see I know a very detailed letter which probably has jargon, medical jargon in it. It's frightening. And they put it away because they can't read it. And then they're missing the appointments. And then we have health issues, and I suppose that is a huge barrier and it's not helping. I suppose access and services."

(Focus Group: Health Sector staff member)

"It affects her mental health as well because she you know, she's very. "I don't want to go there. I don't want to go to that meeting or to that group because ... read or write or write or speak."

(Focus Group: Health Sector staff member)

The intergenerational and intersectional dimensions of having an unmet literacy need also emerged in each of the focus group discussions with staff and volunteers.

"Some of the parents I deal with would have significant literacy difficulties and that in turn then you know, has a knock-on effect on how they help and support their children in school, their children's views of literacy."

(Focus Group: Education and Training Sector staff member)

Staff who have experience of working with the Traveller Community described how children are acutely aware of making less progress than their peers at reading and don't want to be left behind.

The impact of having an unmet literacy need is compounded by being part of a minority ethnic group and experience of racism, poverty and trauma.

"Some people assume that everybody has the chance in Ireland to go to school - that everyone gets the same chance. And so if, if I can read, why can't you? You know, and that there's loads of supports and... but we all know that you know the cards are stacked from a very, from even before conception, I would say so ...

I think there needs to be a lot more awareness around the complexity and I just put it in there and [xxxx] said it. Trauma or person centeredtrauma informed. We all need to have a little bit of training in how we work with people who have been through trauma in their lives."

(Focus Group: Education and Training Sector staff member)

# Finding 3 - Gaps exist in staff and volunteers' understanding of Unmet Literacy Needs

This research has highlighted the following gaps in the way some staff and volunteers conceptualise and understand unmet literacy needs.

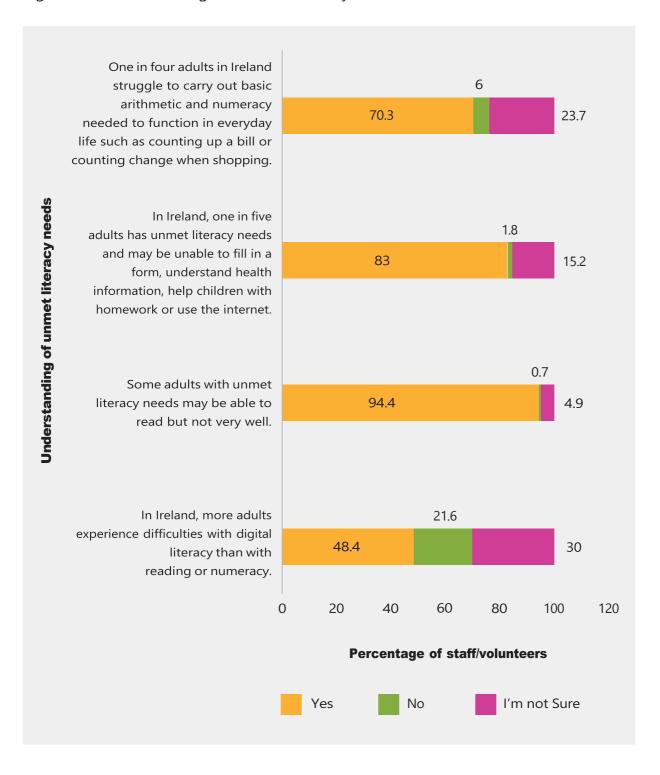
- Some have a limited understanding of the extent of unmet literacy needs e.g., numeracy, digital literacy and impact on adults' ability to undertake daily living tasks and activities.
- Some have a limited understanding of who may have unmet literacy needs e.g., undiagnosed special learning needs, adults for whom English is not their first language.
- Some have a limited understanding of what has got in the way of adults developing literacy skills e.g., caring responsibility, special education needs, poverty, racism, lack of parental support.
- Negative beliefs about adults with unmet literacy needs are part of their understanding e.g., lack intelligence, lazy.

Some have a limited understanding of the extent of unmet literacy needs and the impact on adults' ability to undertake daily living tasks and activities.

As Figure 5 below shows, the majority of staff and volunteers have an accurate understanding of the current extent of unmet literacy needs in Ireland.

This is more than four in five respondents who understand the extent in relation to literacy skills. More than two in three respondents understand the extent in relation to numeracy skills.

Figure 5: Understanding of Unmet Literacy Need



However, these results also show that at least one in five of these staff or volunteers either hold inaccurate information or are unsure of the extent of unmet literacy needs.

There is a gap in their understanding about unmet need around numeracy and digital literacy.

There is also a gap about how unmet literacy needs impact all areas of adult's lives and their everyday functioning and living.

- One in three don't know or are unsure that one in four adults in Ireland struggle to carry out basic arithmetic and numeracy needed to function in everyday life such as counting up a bill or counting change when shopping.
- One in six don't know or are unsure that one in five adults in Ireland, has unmet literacy needs and may be unable to fill in a form, understand health information, help children with homework or use the internet.
- One in 20 don't know or are unsure that adults with unmet literacy needs may be able to read but not very well.
- Almost one in two don't know or are unsure that more adults experience difficulties with digital literacy than reading or numeracy.

A closer look at these results also shows that these responses were provided by those working and volunteering in a variety of administration, front line practice and management roles in statutory, and community and voluntary organisations.

This included roles across 10 sectors, for example, health, education and training, justice, social welfare, early years care and education.

It is important to note that more than three in four of these staff and volunteers<sup>7</sup> reported that they had firsthand experience, through their work, of adults with unmet literacy needs. They encounter adults with unmet literacy needs through their work.

# Some have a limited understanding of who my have unmet literacy needs.

Other results presented in Figures 6 and 7 below also show that many staff and volunteers hold a narrow and limited understanding of who may have unmet literacy needs.

The results suggest that this may not include adults with special educational needs or adults for whom English in not their first language.

Average of 78% had firsthand experience through their work of adults who struggle with literacy, numeracy or using technology.

Figure 6: Some adults with unmet literacy needs have undiagnosed special learning needs/difficulties

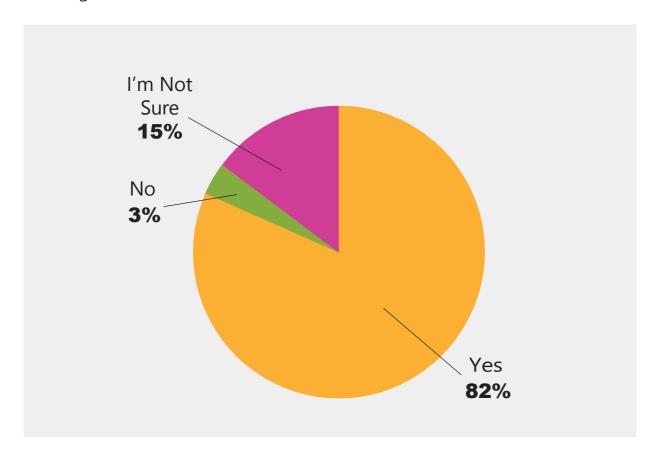
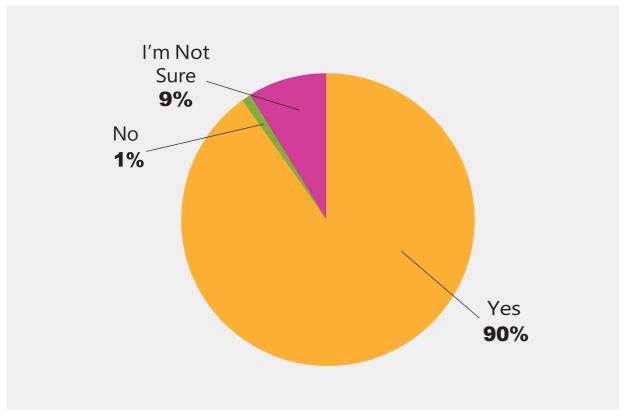


Figure 7: Adults for whom English is not their first language may also experience a literacy difficulty in their first language



#### The results indicate that

- 29% of staff and volunteers, many in front line practice and leadership roles, don't know or are unsure about whether adults with unmet literacy needs are able to hold down a job.
- one in 12 don't know or are unsure about whether adults with unmet literacy needs can learn other important skills such as memory skills or how to operate technical machinery.

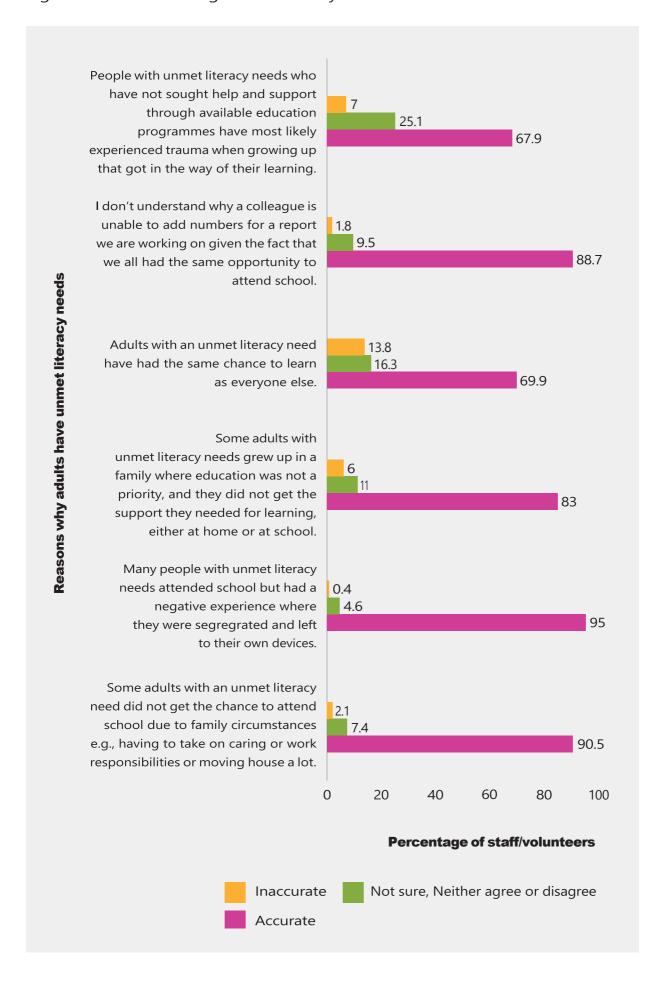
These staff and volunteers work across sectors including in education and training, local partnerships, and social welfare, all sectors that focus on promoting training and employment opportunities.

### Some have a limited understanding of what got in the way of adults developing their literacy skills.

The lived experience case studies and focus groups with adults with unmet literacy needs confirmed that there are many reasons why adults experience unmet literacy needs.

The survey results, presented in Figure 8 below, show that the majority of staff and volunteers understand that family and social circumstances influence the opportunities and support available when learning at school.

Figure 8: Understanding unmet literacy needs - reasons



However, this survey has also found that up to 30% of staff and volunteers do not know or are unsure about how experience of trauma can get in the way of learning.

This group do not have an accurate understanding that not all adults have had access to the education, opportunities and support they needed to learn, when at school.

- One in three don't know or are unsure if adults with an unmet literacy need have had the same chance to learn as everyone else.
- One in 10 don't know or are unsure that some adults with an unmet literacy need did not get the chance to attend school due to family circumstances e.g., having to take on caring or work responsibilities or moving house a lot.
- One in three don't know or are unsure that people with unmet literacy needs who have not sought help and support through available education programmes have most likely experienced trauma when growing up that got in the way of their learning.
- One in 11 don't know or are unsure about why a colleague is unable to add numbers for a report we are working on given the fact that we all had the same opportunity to attend school.
- One in 20 don't know or are unsure that many people with unmet literacy needs attended school but had a negative experience where they were segregated and left to their own devices.
- One in six don't know or are unsure that some adults with unmet literacy needs grew up in a family where education was not a priority, and they did not get the support they needed for learning, either at home or at school.

A closer examination of the survey results found that more than two in three<sup>8</sup> of these staff and volunteers have firsthand experience, and encounter adults with unmet literacy needs through their work.

Their survey responses indicate that this work includes paid and voluntary roles in administration, front line practice, middle and senior management and leadership in statutory, and community and voluntary organisations.

<sup>8</sup> Average of 72.9% across questions.

This group of staff and volunteers work across a range of sectors that include agriculture, health, information and support services, education and training, justice, social care, social welfare, early years care and education and youthwork.

It is also important that, on average, 1 in 3<sup>9</sup> of these staff and volunteers reported that they had worked in Adult Literacy, supporting adults with unmet literacy needs.

# Negative beliefs about adults with unmet literacy needs are part of their understanding

This research has also found that some staff and volunteers' understanding of unmet literacy needs includes negative beliefs and perceptions about adults who struggle with reading, writing and using technology.

This is a small minority of staff and volunteers and no more than nine percent.

These negative beliefs are evident in the responses to the anonymous survey where more sensitive questions about beliefs and perceptions were asked. They also emerged in the focus group discussions and the case studies where adults with unmet literacy needs described their experience of accessing services.

The survey results presented in Figure 9 show that:

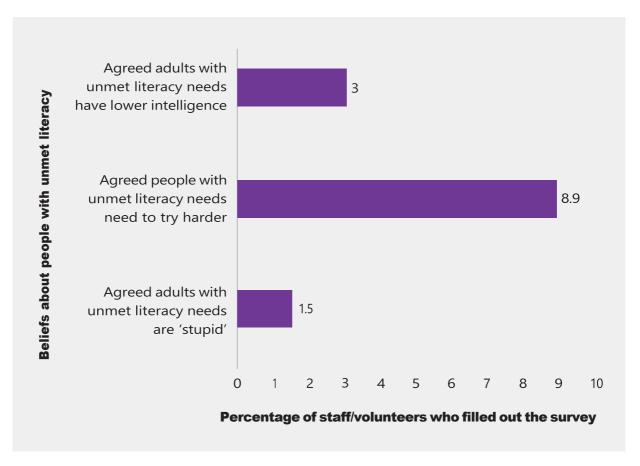
- One in 66 agree that adults with unmet literacy needs are 'stupid' while one in 250 neither agree nor disagree.
- One in 11 agree that people with 'unmet literacy needs' need to try harder while one in eight neither agree nor disagree.
- One in 33 agree that adults with unmet literacy needs have lower intelligence while one in 100 neither agree nor disagree.

Analysis of the survey responses also found that one in 100 staff and volunteers neither agree nor disagree that adults with unmet literacy needs who need help to fill out a form are lazy.

58

<sup>9</sup> Average of 30.9% across questions.

Figure 9: Understanding unmet literacy needs - negative perceptions & beliefs



Closer examination of the results shows that these staff and volunteers who hold negative perceptions and beliefs work in front line, administrative, middle and senior managerial and leadership roles in statutory as well as community and voluntary organisations.

- These roles include paid and voluntary and are in health, information and support services, justice, education and training, local government, social welfare, agriculture, local partnerships, social care and youth work.
- In most cases, these staff and volunteers have firsthand experience of and contact with adults with unmet literacy needs, through their work.

# Finding 4 - Unmet literacy needs is complex. Adults often experienced trauma that got in the way of their learning

The complexity and multifaceted nature of unmet literacy needs was clearly apparent in the focus group discussions with adults who experience unmet literacy needs. This was also evident in the lived experience case studies.

It also emerged strongly in the focus groups with staff and volunteers who work directly with these adults.

 Their roles involve providing support and advocating for these adults through a range of services that include substance misuse, disability support, domestic abuse support, health, probation, youth, integration and education and training.

Staff and volunteers spoke with conviction and concern when sharing examples of the complex challenges faced by the adults they work with.

"A lot of our clients ... when you're trying to navigate the legal system, it's really difficult anyway but if you have unmet literacy needs...the legal Aid application ...

All these things require literacy, on top of already having trauma from the domestic abuse they've suffered. They then have the shame of not being able to kind of help themselves."

(Focus Group: Social Care Sector staff member)

"I think a lot of people with disabilities are actually put in a kind of boxes from the start and they didn't have a chance to actually learn how to read and write properly from the elementary school starting ... Really, be honest.

And I find them, the guys, even the simple task like, learn how to write your name, they're so excited. Really excited. Like, you know, or even when I organise literacy ... they were very stressed and very anxious and after first session they actually put their names on themselves for next session because they felt worth it. They felt someone actually gave time for them. Did something with them."

(Focus Group: Social Care Sector staff member)

"We have a guy, and he is [xxxxx] and he's come over. We have a translation App, so we have all of the things we can use with him, but he actually can't read or write in his own language either, so we're really stuck.

You know, like we're having to do kind of everything verbally, but to progress them in anyway is very, very hard."

(Focus Group: Education and Training Sector staff member)

Adults who contributed lived experience case studies also highlighted how lack of parental support, caring responsibilities and having a learning disability had got in the way of developing their literacy and numeracy skills.

Figure 10: Case study – what got in the way of your learning?

#### What got in the way of your learning?

I had to stay home with my four siblings. Basically, I had to raise them. For this reason, I couldn't go to school. We were very poor, and my parents had to work very hard. Also, my brothers and sisters did not go to school so they would have same issue.

# Finding 5 - Adults with unmet literacy needs continue to experience shame and stigma

#### Stigma surrounds the issue of unmet literacy needs

This emerged clearly in the data collected through the survey, the focus groups and workshops, and the case studies.

Adults with unmet literacy needs described some positive, but mainly negative experiences, of accessing public services. Figure 11 below presents one example.

Figure 11: Case study – how have you been treated when using services because of your reading or writing?

"[xxx] is awful to deal with, you could tell them a hundred times you can't read or write but they will say do your best or get someone to help you. I had an experience with the [xxx] last year and they treated me so badly that I had to get strong medication from my doctor to deal with the anxiety and palpitations. They treat you like dirt when you can't read or write. They don't listen to you, and they have no hearts.

I hear people in queues who are talking to someone behind the desk, and they're delighted to hear that person can go online, but when I tell them I need help, they haven't a clue how to give".

In the focus groups, adults with unmet literacy needs talked about negative experiences that led them to hide their unmet literacy need from others including family and friends.

- One participant in her mid-forties shared that she had just recently disclosed to her childhood friend that she couldn't read. She had managed to mask this by using two mobile phones, one to read aloud the messages received on the other.
- An older male spoke of walking up and down the road past the Adult Literacy service many times before picking up the courage to enter the building and ask for support.

One staff member working in substance misuse services described how a client in their early thirties had chosen to become homeless rather than navigate the processes of seeking entitlements as an adult with unmet literacy needs. The stigma and literacy requirements of the processes presented too much of a barrier.

### Stigma leads adults to hide their unmet literacy needs in society and in the workplace

Analysis of survey responses confirm that stigma continues to exist around unmet literacy needs. As set out in Figure 12 below, only 44.9% of staff and volunteers believed there was no reason to hide an unmet literacy need.

Figure 12: Staff and volunteer beliefs about the need to hide an unmet literacy need



The majority did not share this view. One in three, 34.6%, disagreed and the remaining 20.5% neither agreed nor disagreed.

The staff and volunteers who disagreed

- work in paid and volunteer frontline, management and leadership roles across 11 different sectors in statutory and community and voluntary organisations.
- Nine in 10 have firsthand experience of adults with unmet literacy needs through their work and seven in 10 know someone among their family, friends or work colleagues who struggles with literacy, reading and using technology.

Overall, staff and volunteers who completed the survey identified 207 of these individual cases among their friends, family and work colleagues, and reported that only one in three have sought help to address their unmet literacy needs.

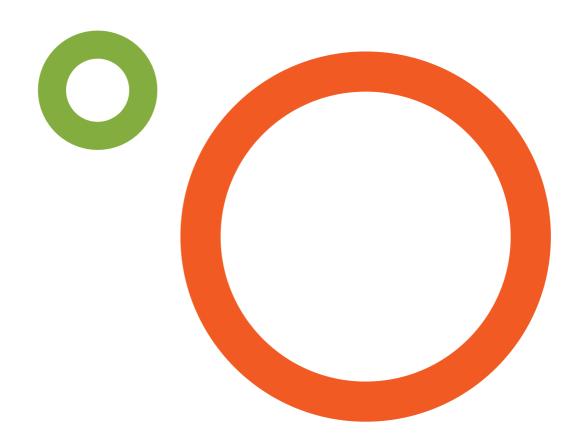
The survey data presented in Figure 13 also highlights that this stigma exists in the workplace.

Figure 13:Staff and volunteer beliefs about disclosing an unmet literacy need at work



These respondents hold paid and voluntary roles, in both statutory and community and voluntary organisations.

- They work in administration, frontline practice, as well as management and leadership roles across 12 sectors.
- These include housing, agriculture, education and training, partnerships, early years care and education, social care, social welfare, health, youthwork, information and support services, local government and justice.



# Finding 6 - Support of and awareness of unmet literacy need among service providers has improved

Discussions within the focus groups with adults, as well as managers and their staff and volunteers, identified an improving situation in the support available. Adults with unmet literacy needs are experiencing more positive treatment when accessing services.

Responses to the survey also show that the majority of staff and volunteers are aware of how adults with unmet literacy needs present, when accessing services.

### Examples suggest emerging good practice across organisations and sectors

The following examples of good practice were highlighted.

- 1. Completed sample forms
- 2. Training on awareness/signposting
- 3. Visual poster with instructions
- 4. Always offer help with forms
- 5. Pilot projects e.g., MyGov ID
- 6. Traveller and Roma Support workers
- 7. Availability of interpreters and translation App

Staff working across statutory agencies identified that the roll out of Plain English and other relevant training may have helped improve awareness and practice.

"Most people now have done literacy awareness training and then some of the modules on Plain English. We did a bit of a Literacy Ambassador course a couple of years ago."

(Focus Group: Information and Support Services Sector staff member)

The lived experience case studies presented in Figures 14 and 15 below describe some positive experiences. These include the value of Roma and Traveller Inclusion Support Workers in advocating for and supporting adults with unmet literacy needs.

Figure 14: Case study – how have you have been treated when using services because of your reading and writing?

# Tell me about your experience of finding information about services you need

Up until now was very difficult as I couldn't express myself. Now since you started to work here, finally there is somebody who understands me, but more importantly you can understand what I need, and you can act on my behalf.

# How have you been treated when using services because of your reading and writing?

Very bad, [xxx] would not talk to me. They always acted rude and asking to bring someone who can speak or write on my behalf. Whenever I was getting a letter (in English) had to find someone who can translate that for me. Sometimes, the time to reply to that letter has gone, so everything was closed.

Figure 15: Case study – how have you have been treated when using services because of your reading and writing?

People are helpful when I ask for help. A friend helped me to find a domestic abuse service when I explained what was happening. She rang and spoke to them, and I went to meet with the staff to get help. I went to court and afterwards the domestic abuse service staff sat down with me in a cafe near the court and she explained all the court documents to me, so I understand.

I went to the citizen's information after my child's father died to get information, they did not understand what I was asking when I went there. They got a translator on the phone to help me. The research identified some areas requiring further improvement. These included:

- referral processes and pathways into adult learning.
- availability of 1-1 adult learning support rather than group support.
- need for all organisations and staff to adopt a trauma informed approach.

The value of, and need for trauma informed approaches based on establishing a relationship of trust, was raised consistently across the focus groups with staff and volunteers.

The following example of good practice shared within a focus group discussion is an excellent example of this type of approach in practice.

"I have a grandmother who, just through conversation it came out that she said I can't read. I can't write. It's embarrassing at this age in my life. I just don't know what I'm going to do about it.

So I kind of made contact with through the ETB and they provided a tutor and she's been attending since last year and initially a little bit kind of reticent.

But now she's just so delighted. She comes in every week and it's simple stuff they've started with, like on a form, being able to identify where it's asking you to write your name, where it's asking you to put in date of birth, you know, and being able to fill that in herself independently was really emotional for her.

So yeah, it's great.

It came out through something to do with her grandchild, and I was kind of saying to her something about yeah, you know, he finds reading hard and she just looked at me.

She says, "well, don't be asking me to help because I can't read". And I said, "oh", I said, "would you like to learn to read?"

And she just looked at me and she said, "of course, I'd like to learn to read. But when is that ever going to happen for me?" So, it was kind of that route."

(Focus Group: Education and Training Sector staff member)

Some staff lack awareness of how adults with unmet literacy needs present when accessing services and may be unable to identify when support is needed

Figure 16 below presents the results of the survey.

This shows that the majority of staff and volunteers are aware of how adults with unmet literacy need present when they are accessing services.

The majority are aware of the behaviours that adults may engage in to hide the fact that they struggle with reading, writing and using technology.

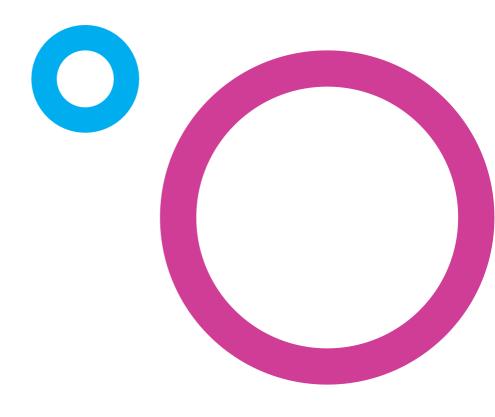
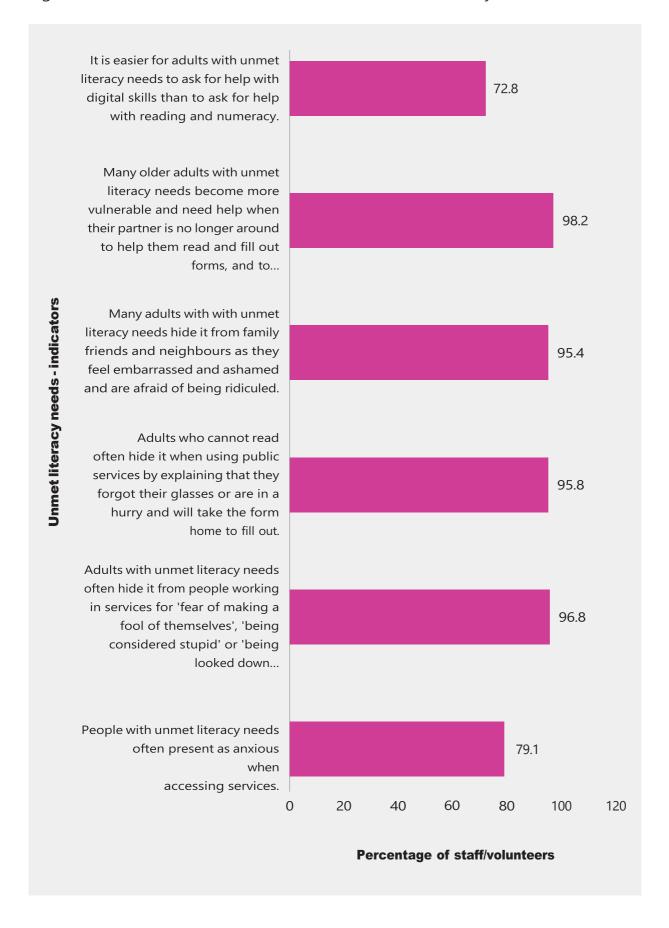


Figure 16: Accurate awareness of adults with unmet literacy needs



Yet, some staff and volunteers, approximately one in 20, are less aware.

- The majority<sup>10</sup> of this group have firsthand experience of, and encounter, adults with unmet literacy needs through their work.
- They hold paid and voluntary roles in administration and reception, front line practice as well management and leadership across a range of statutory and community and voluntary sector organisations.
- These include health, education and training, local government, justice, social welfare, local partnerships, social care, early years and youth work.

Figure 16 also highlights that more staff and volunteers, approximately one in four, lack awareness of the fact that adults with unmet literacy needs may

- experience anxiety when accessing services;
- find it easier to disclose an unmet need around using technology than reading and writing.

<sup>10</sup> Range between 60% and 93% across questions.

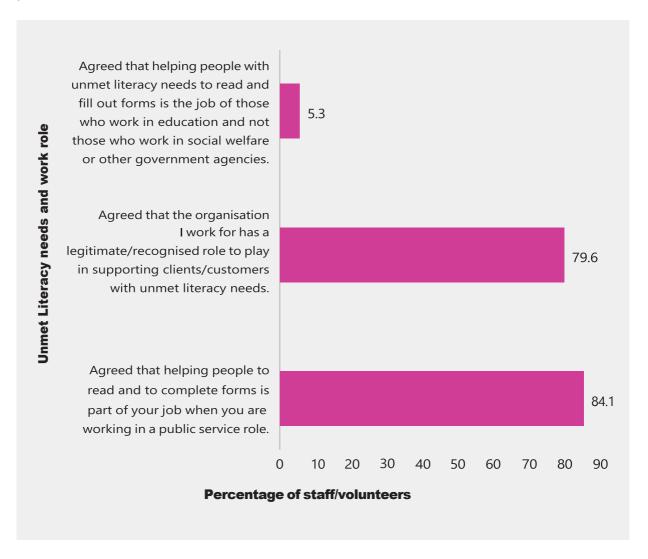
## Finding 7 - Not all staff view supporting clients with unmet literacy needs as part of their professional role at work

When asked in the survey, the majority of staff and volunteers indicated that supporting adults with unmet literacy needs is part of their professional role.

However, Figure 17 shows that not all staff and volunteers shared this view.

- **One in 14** (7%) disagreed that the organisation they work for has a legitimate/recognised role to play in this area.
- One in 21 disagreed (4.6%) that helping people to read and to complete forms is part of your job when you are working in a public service role.
- **One in 19** (5.3%) agreed that helping people with unmet literacy needs to read and fill out forms is the job of those who work in education and not those who work in social welfare or other government agencies.

Figure 17: Supporting adults with unmet literacy needs is part of my professional role at work



Closer analysis of the survey responses has found that this minority of staff and volunteers

- work across a range of administrative, front-line practice, middle and senior management and leadership roles in education and training, health, local government, justice, social welfare, youthwork and early years care and education.
- One in three<sup>11</sup> report having firsthand experience of adults with unmet literacy needs through their work.

<sup>11</sup> Percentage across the 3 survey questions: 60%. 75% and 80%.

## Some staff in statutory organisations do not view supporting adults with unmet literacy needs as part of their role

Figure 18 below also highlights that at least three in five of these staff and volunteers work in statutory organisations.

These staff are obligated by the Public Sector Equality and Human Rights Duty<sup>12</sup> "in the performance of their functions, to have regard to the need to eliminate discrimination, promote equality and protect human rights of staff and people availing of their services."

Figure 18: Staff and volunteers in statutory organisations who believe supporting adults with unmet literacy needs is not part of their professional role



Government of Ireland (2014) Available at <a href="https://www.ihrec.ie/downloads/Implementing-the-Public-Sector-Equality-and-Human-Rights-Duty-%E2%80%93-2nd-Edition.pdf">https://www.ihrec.ie/downloads/Implementing-the-Public-Sector-Equality-and-Human-Rights-Duty-%E2%80%93-2nd-Edition.pdf</a>

The survey also found that almost nine out of 10 staff and volunteers were happy to provide support to adults with unmet literacy needs that they encountered in their work.

Table 4 below presents these results.

Yet, the results show that a small minority of between one in 100 or one in 200 staff and volunteers do not share this view. Their survey responses suggest that they would prefer not to work with adults with unmet literacy needs or they resent the time required to do so.

Again, closer analysis of the responses highlights that more than 60% are paid staff working in statutory organisations across local government, education and training, justice, information and support services.

Table 4: Staff and volunteer views on supporting adults with unmet literacy needs in their work

|   | Agree | Neither<br>agree nor<br>disagree | Disagree |
|---|-------|----------------------------------|----------|
| I am happy to help people with<br>unmet literacy needs by explaining<br>information clearly and helping<br>them to read and fill out forms. | 95.8% | 2.8%                             | 1.4%     |
| I resent the amount of time it takes<br>to explain things to and help people<br>with unmet literacy needs.                                  | 0.8%  | 10.2%                            | 89%      |
| I would prefer not to deal with clients or customers with unmet literacy needs.   | 88.3% | 9.9%                             | 1.8%     |

### Finding 8 – There is an expressed need for training

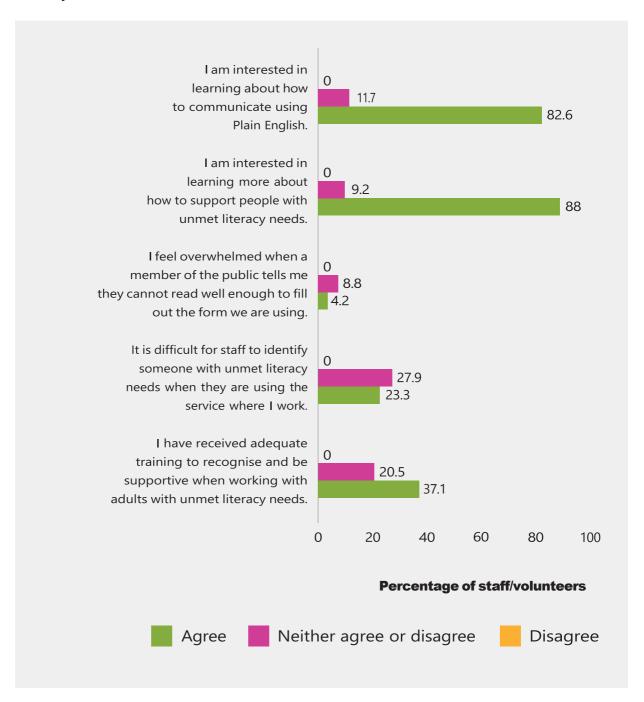
The survey identified that the majority of staff and volunteers across a range of roles in statutory and community and voluntary organisations are interested in learning about supporting adults with unmet literacy needs.

This includes learning more about communicating using Plain English.

The results presented in Figure 19 also highlight an expressed need for training.

- One in three agreed that they had received adequate training to recognise and be supportive when working with adults with unmet literacy needs.
- One in five agreed that it is difficult for staff to identify someone with unmet literacy needs when they are using the service where they work.
- One in 25 agreed that they feel overwhelmed when a member of the public tells them they cannot read well enough to fill out the form they are using.
- Almost **nine in 10** agreed that they are interested in learning more about how to support people with unmet literacy needs.
- **Four in five** agreed that they are interested in learning about how to communicate using Plain English.

Figure 19: Expressed need for training to support adults with unmet literacy needs



As Figure 20 shows, two in five (42.4%) reported that they had not received adequate training to recognise and support adults with unmet literacy needs.

This is important as four in five, (82.5%) have firsthand experience of, and encounter adults with unmet literacy needs through their work.

Figure 20:Adaquate training to recognise and support adults with unmet literacy needs

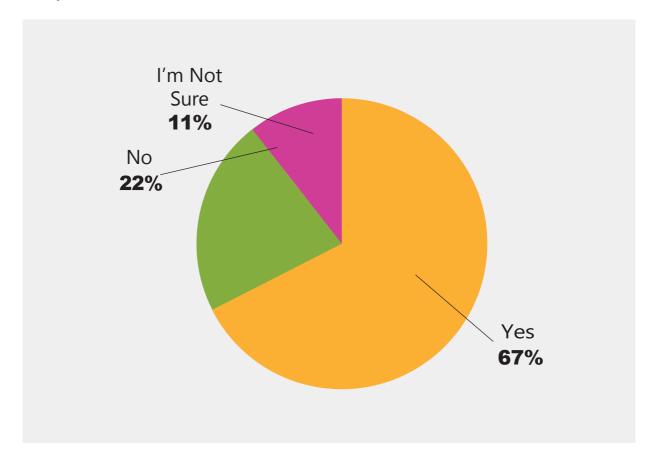


The need for training has been expressed across organisations, sectors and roles.

- 59% work in statutory and 41% work in community and voluntary organisations.
- 52% work in front line practice, 17% middle management, 13% in administration (including reception) and 10% in senior management and leadership roles.

There is also a need for training to build awareness of local support services for adults with unmet literacy needs. Figure 21 shows that one in three staff and volunteers report not having this information or not being sure if they do.

Figure 21: I am aware of support services for adults with unmet literacy needs in my local area



# Finding 9 - Training should build confidence and skills to identify, respond and support adults with unmet literacy needs, as well as knowledge and awareness

The majority of staff and volunteers, 75% or more, reported they are comfortable supporting adults with unmet literacy needs that they encounter through their work.

This includes working in the context of a team to provide services and downloading and printing off paper copies of information.

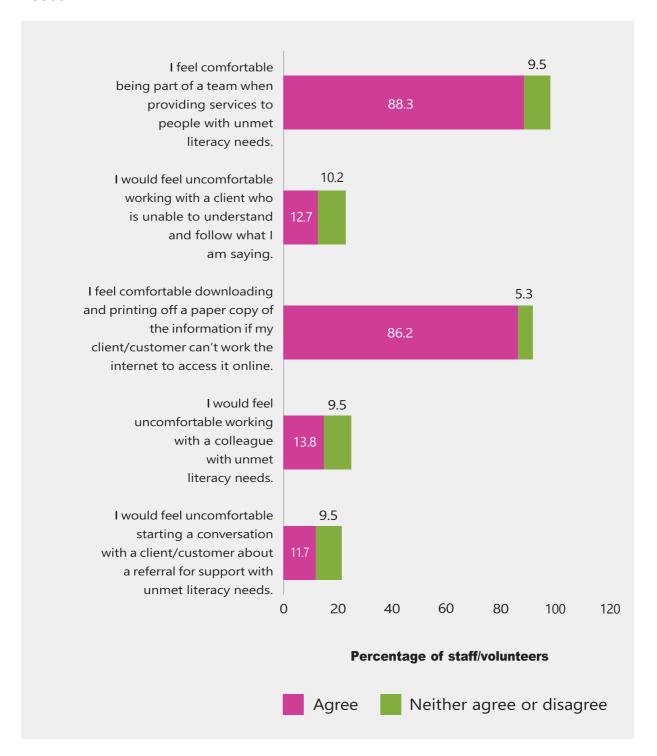
#### Training needed so staff and volunteers feel comfortable

A small minority disagree that they are comfortable providing this support. These results suggest they require training in this area.

The results presented in Figure 22 also highlight that approximately one in five are not comfortable:

- when the adult with unmet literacy needs is a colleague,
- o if the adult is unable to understand and follow what they are saying, or
- starting a conversation with the adult about a referral for support with unmet literacy needs.

Figure 22: Identified need for training to support adults with unmet literacy needs



- These are staff and volunteers working in a range of administration, front line and management roles in statutory and community and voluntary organisations.
- These include health, education and training, housing, early years care and education, local government, justice, agriculture, information and support services, local partnerships, social care, social welfare, and youth work.

These results suggest the need for training that builds confidence, and the type of skills needed to identify, respond and support adults with unmet literacy needs. This is different and in addition to training that builds knowledge and awareness.

## Training needed so staff and volunteers can show empathy and work in a trauma informed way

The need for training that develops a trauma informed approach and fosters communication skills and empathy was raised consistently in the focus groups and workshops with staff and volunteers.

"To really, I suppose ... to alert the staff to what the issues are around unmet literacy needs and also then to give them the skills of how to deal with it.

And I would hear from staff that sometimes they don't feel they have the skills even though we've done a little bit of training, we could definitely be doing more in that area and ... just so they can really assist people as best they can.

Because it is ... I think it's a very difficult area for people to actually come forward ... and having the empathy skills around that, but also the knowledge skills of how then to move forward or that in a supportive way is really important."

(Focus Group: Information and Support Services Sector staff member)

"We have a large number of foreign nationals and Travellers that volunteer with us or come through the probation services. I think in my experience ... is that they build a trust with us.

And I've had the conversation with a lady in the Travelling Community who wants to learn how to read. And has asked would I support her?

So I'm guessing it's just to find out different ways and trying to get that support to be able to help her."

(Focus Group: Social Care Sector staff member)

## Finding 10 - An organisation-wide approach is needed to provide a supportive environment for staff, volunteers and adults with unmet literacy needs

The survey results suggest that most staff and volunteers, 70%, consider their organisation is supportive of their efforts to work with adults with unmet literacy needs.

Figure 23 also shows that almost one in two feel they have access to the tools and resources needed for this.

Yet, the analysis also highlights the following gaps to be addressed.

- One in five disagree that they have access to the tools/resources needed to support clients/customers with unmet literacy needs.
- One in three agree that there is not enough time or staff in their workplace to help clients with unmet literacy needs to fill out forms.

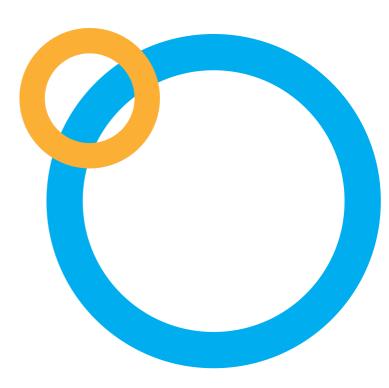
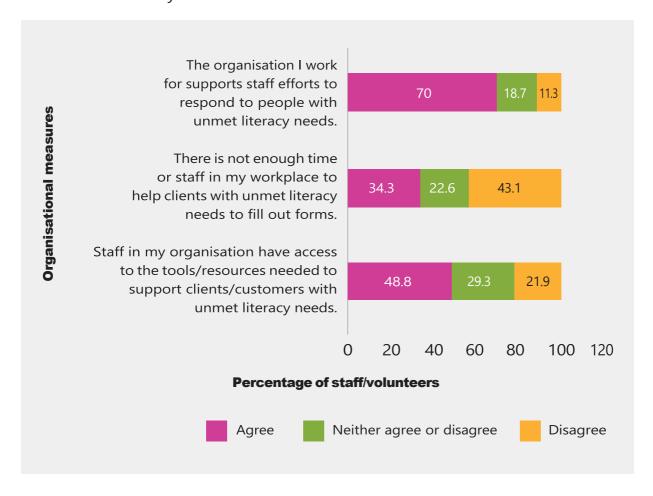


Figure 23: How organisations support staff and volunteers to work with adults with unmet literacy needs



#### Lack of time and resources inhibits an organisation-wide approach

It is significant that 88.7% of those who don't agree that they have access to the tools/resources needed to support clients/customers with unmet literacy needs, report that they have firsthand experience of and encounter these adults in their work.

The analysis also shows that 89.7% of those who agree there is not enough time or staff in their workplace to help clients with unmet literacy needs to fill out forms, have firsthand experience and encounter these clients in their work.

- These staff and volunteers work in administration, front line, middle and senior management roles across a range of sectors.
- This includes health, agriculture, early years care and education, education and training, information and support services, justice, local government, social care, social welfare, and youth work in statutory and community and voluntary organisations.

The lack of time and resources also emerged consistently in the focus groups and workshops with staff and volunteers.

"So I suppose health literacy has been an issue that has been kind of bubbling to the fore ...

We have done pieces of work about, you know, signage and pieces like that. But I think it's something that needs way more focus and energy put into.

The organisation, I would think the health service are tuned into it, but I would think the resources aren't there...

So you have a service that acknowledges the need for literacy support, but the inability due to time poor and staff poor."

(Focus Group: Health Sector staff member)

Overall, this research has identified gaps in adopting an organisation-wide approach to developing a supportive environment.

Table 5 presents further information from the survey. This shows that

- Only one in two confirmed that working with people with unmet literacy needs is covered as part of their Equality, Diversity and Inclusion policies and training.
- Only one in five confirmed that there is a Literacy Champion/ Ambassador in their workplace.
- Only one in four have completed training in Unconscious Bias in their workplace.

Table 5: Actions taken by organisations to create a supportive environment for staff and volunteers working with adults with unmet literacy needs

|  | Yes  | No   | l'm not<br>sure |
|--|------|------|-----------------|
| Working with people with unmet literacy needs is covered as part of our Equality, Diversity and Inclusion policies and training. | 50.9 | 8.1  | 41              |
| There is a Literacy Champion/<br>Ambassador in my workplace.   | 19.8 | 41.7 | 38.5            |
| I have completed training in Unconscious Bias in my workplace.   | 29.3 | 58.7 | 12              |

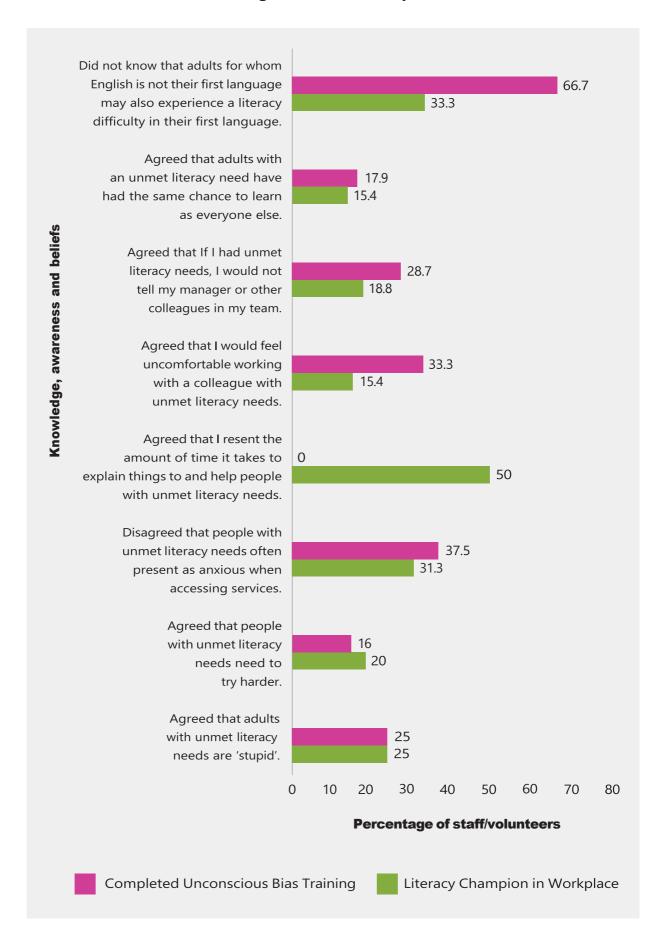
## Review policies, training and practice to identify where unmet literacy needs sit within organisations

The high percentage of staff and volunteers responding that they are not sure raises questions in relation to the implementation of Equality, Diversity and Inclusion policies and training and the visibility of an organisational Literacy Champion in their work.

Closer examination of the survey responses has also found that some staff and volunteers who report lower knowledge, awareness and understanding of unmet literacy needs have already completed Unconscious Bias training and or have a Literacy Champion in their workplace.

Figure 24 includes more detail which raises questions about the focus and effectiveness of this training and the focus and influence of the Literacy Champion role.

Figure 24: Completion of Unconscious Bias training/Workplace Literacy Champion among staff and volunteers reporting lower knowledge, awareness and understanding of unmet literacy needs



#### **Review service design and delivery models**

In two out of seven focus groups and workshops with staff and volunteers, some participants acknowledged that while training is important, more is required across organisations that work with adults with unmet literacy needs.

This includes considering their needs in the design and delivery of services.

"So the services that are there and the supports that are there really need to be, I feel a little bit more reflective in what they're offering and not to make the assumption ... which would be white middle class assumption a lot of the time.

Yeah, people won't if people's needs are not being met. They're not gonna stay and we have to understand that.

The groups that a lot of us work with, you know, they're on the very bottom rung of the hierarchy of needs, and if those needs are not being met, then they're not going to engage because they they're on survival mode."

(Focus Group: Education and Training Sector staff member)

"I think it's a bit of a partnership that they need the services to come on board with them and acknowledge that there is literacy issues that we need to do more from a service point of view...

... but not all will provide a telephone call as well as a letter and that's a way around literacy issues."

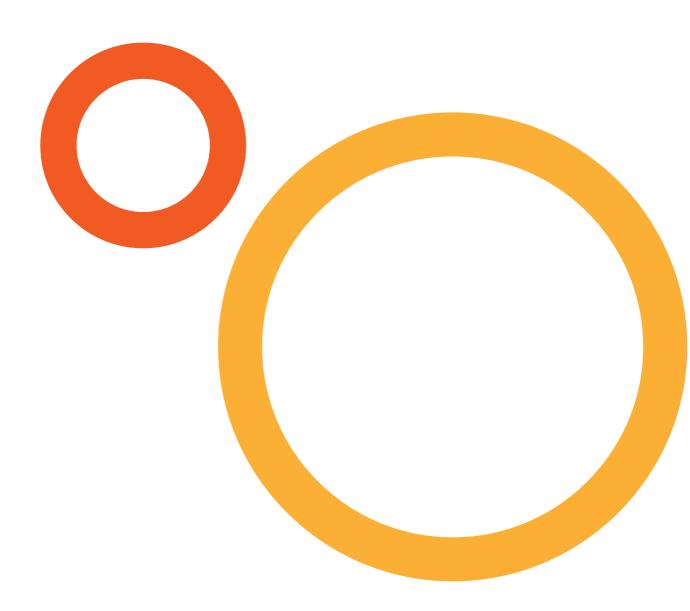
(Focus Group: Health Sector staff member)

"We've had some people in to speak to the staff, you know, of where to sign post into ... We've had them down to actually talk to the staff and like that, give them the tools that they know what language to use around it. Even you know, to be sensitive and aware.

I can say that it definitely helps, but it doesn't fix the problem because you know you're just sending them to somebody else and you hope that they have the capacity or the numbers or the time to help and fix it as well with them.

Like we're becoming more educated about it. ... but the action is still a bit, just bit more to be desired if you get me."

(Focus Group: Education and Training Sector staff member)



## **Discussion**

This research has engaged 283 staff and volunteers providing services to the public in exploring their perceptions and experience of unmet literacy needs.

Importantly, it has also sought the experience and perspective of 19 adults with unmet literacy needs using those services.

This research is the first of its kind in Ireland.

## Adults with unmet literacy needs have experienced trauma and experience stigma about their unmet literacy needs

This research confirms that adults with unmet literacy needs have most likely experienced significant trauma when growing up, that got in the way of their learning. This may include poverty, racism, poor mental health, war and persecution, disability, homelessness and violence and abuse.

- These adults experience stigma around their unmet literacy needs.
- This is caused by the inaccurate beliefs, negative assumptions and misconceptions that people hold about other people in stigmatised groups.
- Experiencing this stigma stops adults with unmet literacy needs from seeking help.

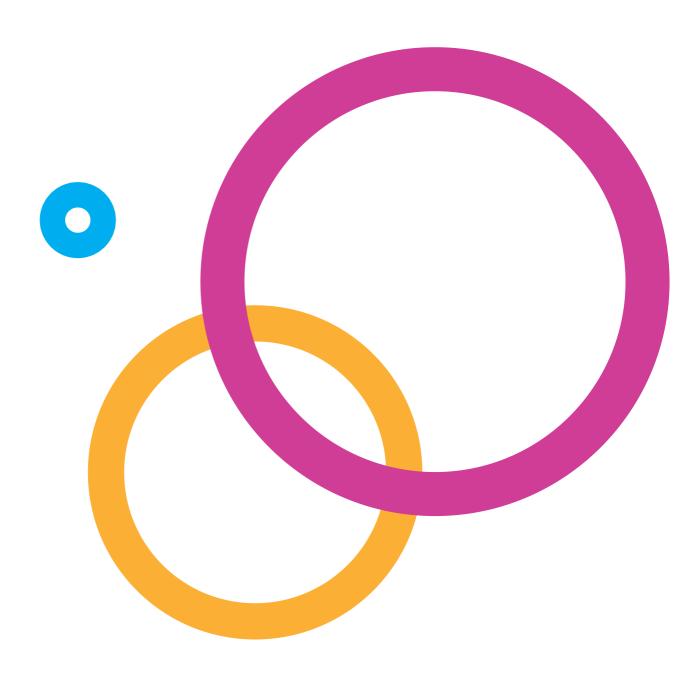
## Staff and volunteers providing services to the public do not have an accurate understanding of unmet literacy needs and this contributes to provider-based stigma

This research confirms that a minority of staff providing services to the public in Counties Carlow and Kilkenny have a limited understanding of unmet literacy needs.

- Gaps include the extent and impact of unmet literacy needs, who is impacted, and what has got in the way of their learning.
- A small minority hold negative beliefs about adults with unmet literacy needs. This contributes to stigma.

## This research provides a solid evidence base on which to develop further work to address provider-based stigma around unmet literacy needs

We know from research elsewhere that efforts to address stigma should be based on understanding and evidence of stigma; where it comes from, beliefs, attitudes, behaviours. This research project provides that evidence.



## **Key Learning Points from this Research**

#### Address stigma in workplaces.

Most people meet and know adults with unmet literacy needs through their work, family and friends. Investing to address stigma in the workplace will have a positive spillover effect into the family and community lives of staff and volunteers. This will have a positive impact on many more adults with unmet literacy needs.

### Address stigma around unmet literacy needs by telling a new story that communicates a fuller understanding.

This must include an explanation of the stigma and where it comes from, as well as information

- » on the extent and impact of unmet literacy needs,
- » about who may have an unmet literacy need,
- » on what has got in the way of adults developing literacy skills, and
- » that challenges the negative beliefs that some people hold about adults with unmet literacy needs.

#### Work with all staff and volunteers in all types of organisations, and all sectors, to address stigma.

Tailor efforts to specific contexts and roles as each provides unique challenges and opportunities to address stigma. This includes the Education and Training sector and Adult Literacy services.

### Deliver training that develops a trauma informed approach, communication skills and empathy as well as knowledge and awareness of unmet literacy needs.

This requires interactive learning, role modelling, coaching and mentoring approaches.

On organisation-wide approach is needed to create a culture and environment that supports staff and volunteers providing services to the public, and adults with unmet literacy needs accessing these services.

There is a need to review

- » service models to make sure their design and delivery is appropriate for adults with unmet literacy needs.
- » the focus and effectiveness of current approaches including policies, Unconscious Bias training, and the role of Literacy Champion.

Now is the time to align this work with Equality, Diversity and Inclusion practice.

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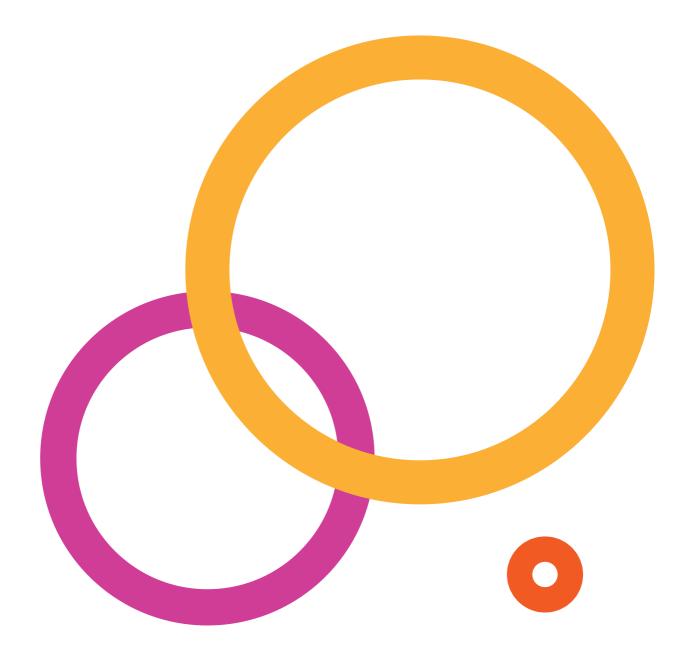
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