

Supporting Community Literacy for Improved Health and Literacy Outcomes in Urban and Rural Quebec

Robert Savage & Victoria Chen
McGill University, Montreal, Quebec

This study explored the challenges faced in developing community supports for improving literacy in two contexts, one suburban and one rural in Quebec, Canada. Given that literacy can be viewed in an eco-systemic way, a community approach was taken to understanding challenges here to the challenges and resources available. The salient features of these two communities, current attempts to support literacy and the multi-disciplinary perspectives of health, education and university professionals to future community interventions were elicited in various ways, including through the primary vehicle for exploring perspectives - two multidisciplinary focus groups run with between 8 and 10 community-based professionals allied to schools in each of the communities by staff at the Coasters organization and McGill University. Content and theme analysis of the transcripts of these main qualitative results of these focus groups suggested that there were important commonalities across the two communities. These commonalities included those of needs: low parent engagement, possibly reflecting low parent confidence and shame, and of limited physical resources including books. In terms of resources, a common underlying model that sees literacy change as being built through community focus was implicit in responses. This model included a focus on very early family and school literacy as the vehicle for impact on later literacy, and viewed schools as providers of outreach. These notions were noted independently in professional's comments in both suburban and remote contexts. A role for universities for training and in attracting crucial resources through research initiatives was also noted by both sets of professionals. One of the most striking contrasts across stakeholders within some communities was of the way that health and education professionals viewed each other's roles in literacy as primary respectively, in a fashion that suggested a potential 'diffusion of responsibility'. Commonalities also lay in community solutions that involved universities training professionals across health and education disciplines on health literacy, of cross-disciplinary community problem solving teams meeting regularly to discuss issues, and the use of community schools and multiple-use of school buildings as a 'hub' for school, daycare, youth center, adult community to help build capacity and bridge divides. There were nevertheless also distinct challenges both across- and within- communities that reflected complex contextual and historical-cultural and geo-political chrono-, meso-, and macro-systemic influence on each community and which belied simple explanations. These and implications for further intervention are discussed in our extended paper on this work (in preparation).

ACKNOWLEDGEMENT: This research was funded by Health Canada and administered by the McGill Training and Retention of Health Professionals Project.