

REMOTE ESOL CASE STUDY:

Resilience, Health Literacy and English for Parents

Literacy Partners
New York, NY



ESOL Program: English for Parents

Website: www.literacypartners.org/our-classes

Reach: Urban

Number of ESOL students served per year: 200 parents, plus their young children

Student population:

Parents of young children (ages 0–5), who primarily speak Spanish, Arabic, or Chinese

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Photo: *Antonia, English for Parents student, and her daughter Alexa*

Program Description

Literacy Partners is a community-based organization in New York City. Its mission is to strengthen families through a two-generation approach to education. Designed to provide parents and caregivers with the tools they need to create success for themselves and a better future for the children in their care, Literacy Partners' programs strive to break the cycle of poverty, improve job prospects, and close the achievement gap for children before they begin school.

The organization offers beginning to high-intermediate levels of thematic ESOL instruction on an open enrollment basis through multiple, flexible learning options. Literacy Partners did not operate a distance education program prior to March, 2020, at which time it became fully remote. The average annual enrollment is 200 students. Literacy Partners has chosen to be 100 percent privately funded because the terms of government contracts might constrain the program model and cut out those students most in need of support. The annual program budget is around \$420,000.

Notable, Innovative Practices

English for Parents is a partnership between Literacy Partners and health providers, with a strong emphasis on health literacy, access to health care and social services, early child development, and school readiness. The program uses a blend of live online and on-demand digital content that helps immigrant parents of young children (ages 0–5) to navigate health and educational systems, while engaging in authentic language production with a variety of native speakers.

The student journey often begins with a health care encounter where health provider partners have adapted their intake process to include a “social determinants of health” screening that identifies English language learning needs. Families are then referred to Literacy Partners for online ESOL classes. These classes are supported by a network of student interns from local universities who act as “health navigators” to connect families to the health and social services they need. Students are further supported by a large pool of volunteers who serve as small-group and one-on-one speaking partners both in and outside of class time.

Literacy Partners uses a resilience-based, trauma-informed approach that aims to foster the “five C’s” of resilience within a remote format: competence; confidence; community; contribution; and critical thinking. The organization has successfully kept and even deepened its approach and thematic focus in the new remote model.

Remote ESOL Program Design

“We had to stop thinking about the past and think about what fits this [remote learning] environment while holding onto what drives outcomes. We reinvented our program from scratch.”

—Anthony Tassi, CEO

In response to the COVID pandemic, the program morphed from in-person classes that met 8–10 hours a week for 36 weeks a year to a fully remote model with classes meeting only 6–8 hours a week on Zoom and WhatsApp. Program designers started with a small class pilot to get proof of concept and then increased classes and teachers over time. They also prototyped use of WhatsApp with former participants and used volunteers to increase opportunities for students to speak. Currently the program has eight online classes that serve more than 200 ESOL students.

The program design is driven by flexible learning options that leverage more than 100 volunteers, who reinforce and supplement instruction by teachers with formal training. The primary components are:

- Teacher-facilitated live online classes twice a week via Zoom;
- Breakout room discussions facilitated by volunteers during the last 30 minutes of class;
- One-on-one volunteer speaking partners by phone or Zoom outside of class;
- Online vocabulary tools for students to work independently or in volunteer-facilitated small groups;
- Weekly Power of Families workshops that bring together all classes to watch and discuss episodes of [We Are New York](#) videos and other media that cover parent-focused topics such as childcare, school readiness, and hospital visits.

Four times a year, all participating families receive a home library of children's books that are culturally representative and integrated into classroom instruction.

Student Onboarding and Persistence Supports

The program uses the coordinated care network [UniteNYC](#) to receive referrals for classes from health providers and to refer families to the social services they need. Most students are referred by health provider partners and come in through the program's [multilingual website](#).

Currently, eight student interns from New York University, CityTech University, and City University of New York are trained as health navigators to do intake and follow-up support with individual families. These interns conduct intake by phone, and pre-screen prospective students for eligibility (parents of young children) and availability (classes are during the day). They also survey students about social determinants of health, such as stable housing, adequate food, technology, and feeling safe, to ensure that students start out classes with the support they need to learn effectively.

The program pre- and post-tests students using BEST Plus to track language proficiency, as well as pre- and post-surveys to gauge increases in time and frequency of reading to their child, health literacy, well-child visits, and parenting efficacy.

The primary persistence strategies are the “five C’s” of resilience:

- Building **community** inside and outside of class using multiple strategies: 1) opening and closing circles during class; 2) WhatsApp chats to share class information and photos from home; and 3) health navigators who follow up with students who miss class to make sure they have the resources they need.
- Boosting students' **confidence** using multiple strategies, including a shared teaching model that brings students into weekly contact with native English speakers who are not their teacher.
- Providing outside of class opportunities to build **competence** through independent practice, small-group vocabulary sessions, and one-on-one speaking partners.
- Creating opportunities for students to **contribute** to each other's knowledge during breakout room discussions and Power of Families workshops.
- Incorporating vocabulary and media that prompt **critical thinking** and help parents navigate the health and educational systems that contribute to the well-being of their child.

Instruction

“Connection is most important — then engagement and differentiation.”

—Michael Kengmana, ESOL Teacher

Teachers in the program developed a two-semester curriculum that is based on Communicative Language Teaching (CLT) theory and imbeds academic language in two areas: health literacy and early childhood literacy. The program aims to help parents develop the confidence and the competence to use English to navigate the world around them, including educational and health care systems. During the first semester, teachers incorporate child development and parenting topics to help parents and caregivers boost children’s early reading, social emotional growth, and school readiness. In the second semester, teachers focus on health literacy and well-child visits. While the health and early literacy curriculum was in place prior to the pivot online, the move to Zoom-based instruction, with breakout rooms that leveraged the growing volunteer pool, strengthened the communicative approach and increased opportunities for authentic language production with native speakers.

Classes use a trauma-informed approach that builds community and connection between students. Every class begins with an opening circle where each student gets a chance to check in and say something in English without being corrected. Next, teachers use compelling text or media to help students build their competence listening, reading, writing, and speaking about that day’s topic. The sessions are structured with incremental scaffolding to help students in the process of becoming confident speakers. For the last 30 minutes of class, students take what they have learned into breakout rooms, where they work with a volunteer speaking partner to practice speaking and listening to each other in English. Classes end with a closing circle that connects that day’s lesson to their children, and a challenge to share photos on WhatsApp of themselves reading and interacting with their child.

Power of Families workshops bring students from all eight classes together once a week — children and other family members are welcome — to watch and discuss an episode of the *We Are New York* video series or other compelling media. Breakout discussions take place in home-language affinity groups or in English, facilitated by a volunteer. The ultimate purpose of these weekly workshops is to provide a space where parents are contributing to each other’s knowledge and thinking critically about how they can navigate the health and educational systems. Students can also participate in two additional hours of practice: one-on-one speaking partners with a volunteer outside of class time; and individual or small-group practice sessions using online vocabulary resources such as Voxy.

Digital Learning Supports

Prior to moving online, students were polled as to their technology needs. The majority of students were able to quickly pivot to Zoom and WhatsApp, but many still do not have a stable internet connection. Participants with school-age children are provided information about computers available through the New York Department of Education and interns help facilitate wireless discounts through the LifeLine Program.

Support for Students’ Basic Needs

At the beginning of each term, staff administer a social determinants of health survey and the student intern health navigators follow up on the needs it reveals. In the Fall, 2020, cohort,

60 percent of students were food-insecure and 40 percent were housing-insecure. Working with community partners, staff organized a pop-up event in a Family Health Center parking lot to hand out bags of food, school supplies, and curated book bundles to more than 100 families in Sunset Park, Brooklyn, one of the neighborhoods hardest hit by COVID-19.

Support for Teachers and Staff

“The teachers have worked hard to align their curriculum while keeping their students connected to each other and the resources they need.”

–Lynn Clark, Chief Program Officer

The program fosters a culture of professional learning. Staff meet weekly to support each other and connect resources for their students through updates from the program director and volunteer coordinator. Teachers have also created a virtual community of practice, where they observe each other teaching, another activity made easier by the remote format.

Partnerships

Strong partnerships are a defining feature of the program. Health care providers, universities, and UniteNYC, a coordinated care platform, are primary partners who support students through direct referrals. Although English for Parents had a strong place-based partnership in place with NYU Langone Health, the move online expanded the network to include New York-Presbyterian Hospital, The Child Center of New York, and Public Health Solutions. Literacy Partners has formal memoranda of understanding with health providers and the program director communicates regularly with the designated points of contact.

Leadership

When the pandemic hit, program leadership decided to pause classes and take the time to redesign and pilot the remote program. This process engaged both teachers and former participants. Staff came together under the leadership of a new chief program officer, who was tasked to create a model that would keep the “five C’s” of resilience, while reinventing the program for an online format. This included leveraging interns and volunteers to support students and increase opportunities for students to speak. By bringing down the number of teacher contact hours, the program was able to double the number of classes and meet the growing number of referrals from health providers. The move online has increased the linguistic and geographic diversity of the classes as well as expanded the range of students, with almost half of the classes serving the lowest levels of English language acquisition. Program leaders actively continue to cultivate organizational partnerships, raising funds from the private sector to fund the entire program.

Indicators of Effectiveness

“Our students are really thriving in the remote model. The online model enables our interns and volunteers to be present for every single class. Transportation and childcare issues, for example, go away for people.”

–Anthony Tassi, CEO

In spite of having cut hours of direct instruction in half as part of the transition to the remote model, student persistence, engagement in classes, and learning gains have remained high: 63 percent of students made +1 level gain as measured by BEST Plus as compared to 60 percent the year before. Notably, the pool of volunteers increased from one to 100 when classes went remote, which made more English-speaking practice time available to students. Currently the program has a waiting list of more than 100 students.

“It’s complicated when you’re a parent. I’m afraid to leave my kids in others’ care. Alexa depends 100 percent on me now, so remote learning works well with me. Also, we immigrants work long hours so it’s hard to make it to class in person. With online classes, there’s more flexibility. I can study in the train and the bus with my phone. I’m in the Voxy program [small group vocabulary practice]. It’s very good. I also participate in a conversation class with a volunteer [speaking partners] and in online ESL classes with a parent group on Fridays [Power of Families]. This program has exceeded my expectations.”

–Antonia, English for Parents student



ABOUT THE REMOTE ADULT ESOL PROJECT

This case study is part of the Remote Adult ESOL¹ (English for Speakers of Other Languages) Project led by World Education, Inc. The project's goal is to document and disseminate viable remote adult ESOL program models and practices so that ESOL instruction can be done at scale efficiently and effectively in a variety of settings. The impetus for the project was to identify strategies for meeting the current interest and unmet demand as well as meeting potential demand prompted by English language requirements for U.S. citizenship under immigration reform. During winter and spring of 2021, the project investigated selected ESOL programs' and learners' needs, experiences, and promising instructional and learner support practices that rely predominantly on technology-rich strategies and tools deployed remotely.

This case study is one of eight full program profiles selected for its innovative program design and promising practices. The eight case studies of programs from across the U.S. are complemented by:

- *Policy and Practice Brief* that presents policy considerations and recommendations;
- *Creating Equitable Access to Remote ESOL and Supports in Multiple Contexts and for Distinct Populations and Purposes*, a cross-case analysis of remote adult ESOL delivery through the lens of the varied organizational settings in which they operate and the supports needed to engage distinct ESOL populations; and
- *Promising Remote ESOL Practices*, a document that highlights specific practices and innovations of selected, nominated programs from onboarding to instruction, digital skills development, and student and teacher supports.

¹ We use the term English for Speakers of Other Languages or ESOL rather than English as a Second Language (ESL) out of recognition that many English Learners already speak more than one language, just not English.