

“You Don’t Know What I Went Through”: Adult Learners Healing Through Multimodal Play

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Abstract

There is a growing trend of states offering alternative pathways towards a high school equivalency outside of the traditional standardized test. Amidst this landscape, this study utilizes elements of teaching inquiry, participatory action research, and qualitative methods, to investigate the outcomes of using multimodal play in a composition unit within an adult high school equivalency classroom. Findings from this study suggest that multimodal play creates opportunities for students to make choices about the stories they tell and make connections as a way to feel a sense of belonging in education spaces, both of which act as a source of healing.

Keywords: healing, high school equivalency, multimodal play

“The classroom just be too much going on.”

“Yeah, it went too fast, and if you didn’t understand the explanation, you be left behind.”

“I was just a number in a room full of students and the teachers only dealt with the students that were acting up and only taught the students that were in Advanced Placement classes.”

“lady you don’t know what I just went through in school.”

(semi-structured interview, September 20, 2018).

These quotes come from adult learners seeking their high school equivalency (HSE) diploma; adult learners who represent many others where the classroom never felt like a place they belonged. Without feeling a sense of belonging and agency, they were unable to successfully complete schooling in a traditional environment and, unfortunately, have been left without a diploma.

In many states, if a student does not earn their high school diploma through traditional schooling by the age of 21, passing the General Education Development (GED) assessment, or another approved standardized

assessment has been the only way that adult students can earn a HSE diploma. With a focus on passing a standardized assessment, some literacy researchers and theorists argue that HSE programs teach a narrowly focused curriculum and emulate a system that students do not feel they belong to and that they struggle to learn in (Chen, 2013; Horsman, 1999). This paper argues that teaching literacy through multimodal play can help students make choices in order to take control of their learning and make connections with others in order to heal from and reframe their relationship to academic spaces. For the adult HSE students represented in this paper, making choices and connections was an important first step towards earning their HSE diploma.

Understanding How Adult HSE Classrooms Became Narrowly Focused

A focus on standardized teaching grows out of the early years of education, during the age of industrialization. During this time, operational forms of schooling served all children with standardized curriculum to advance the

moral, social, and economic interests deemed vital to the nation (Labaree, 1997). Due to the sheer number and ethnic diversity of high school students in urban areas, Charles Eliot believed this could best be achieved by way of vocational education. Vocational education was for those who supposedly could not handle ‘serious’ math or science. Intellectual learning was saved for the most privileged members of society. To determine which track students would be placed on, Thorndike introduced standardized tests (Labaree, 1997). Standardized tests have since played a prominent role in education with the accountability measures introduced by George W. Bush and Barack Obama under the labels of No Child Left Behind and Race to the Top (Tyack & Cuban, 1997).

While adult education programs were developed to act as an agent of social change based on the needs of the students (i.e., Freire, 1970; Horton, 1932 as cited in Hale, 2007), the standardized GED exam was quickly adopted in adult HSE diploma programs resulting in literacy methodologies that have mirrored the emphasis on standardized testing and learning seen in K-12 education (Heaney, 2011). Many adult HSE centers have structured instruction in ways that will give students the skills and knowledge needed to pass a standardized test due to the urgency adults have to gain their high school equivalency in order to attain employment. A narrow instruction focused on passing a standardized assessment has worked for adults who come into classes with skills ready to test, but there are many students who are left without a high school diploma if this is the only pathway of learning offered.

Alternative Pathways to High School Equivalency Diplomas as the New Trend

There has been a growing trend across the nation to offer alternative pathways to earning a HSE diploma. For many states, that alternative pathway includes a transcript that shows course completion (National Association of State Directors of Adult Education, 2022). With this trend, adult educators are in a position to construct and investigate what literacy outcomes are possible in an adult HSE classroom that is not narrowly focused on standardized test prep. Without the pressure to focus on a standardized assessment, there is also room to address some of the negative experiences that adult students bring with them into an adult HSE classroom. The opening quotes of this paper align with research on adult literacy

students and trauma. Exposure to trauma and stress is more prevalent for low-income minoritized people in urban communities (Porche et al., 2011). Additionally, those that leave high school early are more likely to have experienced childhood trauma (Porche et al., 2011).

This study was inspired by the opportunity to expand what counts as literacy in a HSE classroom while also figuring out how to teach most effectively regardless of the trauma the literacy learners carry (Horsman, 2000). Thus, this study uses elements of teacher inquiry and participatory action research (PAR) to reflect upon how a teaching approach using multimodal play can act as a healing centered approach to literacy by allowing space for adult HSE learners to make choices and connections. This paper begins with a brief overview of the literature on multimodal play and how multimodal play aligns with healing centered literacy. I then describe how participants were co-researchers in this inquiry. Subsequently, in the findings, I describe the healing outcomes through multimodal play due to the control and connection learners had in the space.

Literature Review

Grounded in Knowles (1980) adult learning theory that acknowledges that adults learn best when they are active in relevant and problem-based learnings, I worked alongside adult HSE students to construct and investigate a competency-based composition unit. The investigation invited play in the adult HSE classroom. The play, or unscripted moments, was supported by an increased access to modalities for composing. An increase in available modalities was influenced by previously successful units using multiple modes of meaning making with this population of students (see Gruen & Lund, 2019).

Multimodal Play

Multimodal play stems from multiliteracies. With the belief that there is a rapid and continuous process of change in the ways in which we read, write, view, listen, compose, and communicate information, the New London Group (New London Group, 1996) coined “multiliteracies” in order to embrace a strong commitment to incorporating a more expansive perspective of what counts as literacy and literate competency. Multimodal play is unscripted - offering a low-stakes trial and error process where

participants are able to play with their ideas and the modal resources and materials around them.

Play is often studied in children with conclusions that play provides an opportunity for children to imagine possible lives, rehearse multiple scenarios, and be and become people (e.g. Hibbert, 2013; Paley, 2004; Sutton-Smith, 1997). Unfortunately, play is less present and more regulated for adolescents and adults, perhaps because there is little room in learning environments for unscripted moments in the day due to the demands of testing and accountability. Thus, multimodal play does not show up in empirical studies regarding adult HSE environments.

When multimodal literacy is studied in adults, research suggests that adults use multimodal composition to engage in narrative forms. For example, Prins (2017) provides an overview of digital storytelling in adult basic education and literacy programs. In this overview, adult learners used participatory visual methodology that included photography, video, mapping, and digital archives to create stories in new ways. Another example is Holloway & Qaisi's (2022) study that looked at multimodal use in adult education settings such as a museum, a dance studio, and a French language learning center. The findings of this study suggest that multimodality supports versatility in the ways that narratives can convey meaning.

Studies specifically on multimodal play in adolescents suggest that multimodal play can also enhance passions and joy in learning. In Vasudevan's (2015) study, adolescents' practices of manipulation and experimentation with multiple modalities brought on scenes of laughter which served as a medium of play. For the laughter and play to occur in a learning space, educators had to be mindful to avoid scripting play and had to create space for spontaneous multimodal play to move the learning in unexpected directions. In another case study on filmmaking with adolescents at an alternative pathway program for juveniles (Hibbert, 2013), multimodal play moved the process of film production forward. With the invitation to play, the group did not focus on the product, but instead jumped into the filmmaking process - experimenting as actors and directors in a low-stakes environment.

Multimodal play expands what counts as literacy learning. Aside from expanding literacy learning, the literature

reveals that it has the potential to invite learners to reframe learning and the learning environment - no longer focusing on the outcomes, but instead telling stories through narrative form, creating joy, and imagining possible lives all of which align with healing centered literacies.

Healing Centered Literacies

In her book *Too Scared to Learn*, Jenny Horsman (2000) explores the complex ways the aftermath of violence, neglect, and trauma impacts adult learner's attempts to learn. In fact, research documents that exposure to traumatic events may negatively impact cognitive, emotional, and behavioral brain development. Since this study took place, we have experienced a worldwide pandemic. This time in history holds personal and shared trauma. Trauma of pain, loss, and fear, increased social isolation, and mental health challenges (Dutro & Caasi, 2022). As noted by scholars writing and researching in the field of adult education (see, for example, Boeren et al., 2020; Housel, 2022), COVID-19 has particularly impacted the wellbeing and mental health of adult learners as they have decreased access to education and increased unemployment. Trauma is part of the human condition and thus should be addressed in the work of humans, which includes education.

And, yet, historically little attention has been given to socioemotional healing in traditional classroom spaces at the K-12 level and the adult level (Dutro & Bien, 2014). In fact, teachers and students are often asked to teach and learn in spaces that deny emotional aspects of their identity (Dutro & Bien, 2014; Horsman, 1999). Without taking on the role of therapist, literacy teachers can use aspects of narrative therapy to support healing centered practices.

Narrative Therapy

Literacy and therapy are so intertwined that there are documented therapeutic strategies that use narrative storytelling to help people engage in their own stories anew, so they can explore and discover new possible endings to the problem (Combs & Freedman, 2012). Extensive research has documented how writing in narrative form can positively impact physical and mental health, especially when participants are writing about traumatic experiences (Danoff-Burg, Mosher, Seawell, and Agee, 2010). Specifically, studies documented how turning the fragmented and chaotic emotions of the

event into an organized story helps an individual regain a sense of control of the account (Danoff-Burg et al., 2010; Huber et al., 2013).

Without assuming students are in need of rescuing and teachers are responsible for healing, literacy teachers have a unique opportunity through narrative writing to invite students to participate in spaces of healing. However, when offering space for stories from learners' lives, some literacy programs may be at risk of focusing only on pain. Several therapists stressed that if the focus of the literacy program is only on pain, an opportunity to create a space for joy in the learning environment could be lost (Horseman, 1998).

I argue that multimodal play, due to its unscripted nature, could invite adult HSE learners to engage in narrative therapy while also creating a joyful learning environment. Additionally, multimodal play could be a therapeutic support because it puts control into the learners' hands - control around what materials to use, what story to compose, and what process to engage in - and it opens up opportunities for unscripted connections of sharing amongst learners. Control and connections are central to learning according to Horseman's work with survivors of trauma (1999).

Multimodal play is not yet widely used in adult HSE learning environments. Knowing that multimodal play moves in unexpected directions, this study seeks to uncover what outcomes occur when an adult HSE classroom employs multimodal play as a teaching strategy. In the following sections, I will describe how the use of teacher inquiry and participatory action research provided an opportunity for participants to reflect upon how a teaching approach using multimodal play created space to heal and to reframe their relationships to academic spaces through choice and connection in an adult HSE classroom.

Methods

Research Setting

The selected research site for this study is a university-sponsored literacy center located in the East Garfield Park neighborhood of Chicago. The center is situated in this neighborhood because most high schools in the community graduate 50% or less of their students

and 60% of 20 - 24-year-olds in the community are unemployed (Anderson, 2017). Additionally, in Illinois, where this study took place, a new law allowing for alternative methods of credentialing took effect in January 2018 (High School Equivalency, 2019).

All students who registered for classes were invited to act as a participant and co-researcher during the summer and the fall session of the 2018-2019 academic year. A co-researcher, in this case, means students collected data, reflected on data, and analyzed data while also being an authentic participant in the classroom. After hearing about the study, purpose, and commitments, eight adult HSE students and myself provided completed consent documents; six of us participated in both sessions. The six that participated, along with how each participated is described in the following sections.

Participants

Andrea, a 44-year-old African American woman enrolled in classes to earn her high school diploma with the hopes of eventually working in a children's hospital. She left school due to various medical challenges. Upon enrollment she was reading at a first-grade level.

Diamond, a 27-year-old African American woman, enrolled in class because she loves learning. As a child, she struggled to feel understood in school. She sees earning her HSE diploma as necessary to enter the workforce and earn an income that will help her move out of the neighborhood. At the time of enrollment, she was reading at a fifth-grade level.

Gary (actual name), a 38-year-old African American man, committed to earning his high school equivalency diploma alongside his 17-year-old daughter. Gary stated that he was often the class clown in school. He enrolled at a ninth grade reading level.

Rachael. I was a 36-year-old white woman and lead teacher in the adult education classroom at the time of this study. My background is in special education having taught for twelve years at the time of this study.

Takeya (actual name), a 30-year-old African American woman. As the mother of two young girls, she wanted to be able to help with their studies. At the time of enrollment, Takeya was reading at a sixth-grade level.

Terrenya (actual name), a 23-year-old African American woman. Terrenya identified as someone who loves school and learning. She was reading at a fifth-grade level when she enrolled.

Data Collection and Analysis

This study used elements of teacher inquiry, participatory action research, and qualitative methods to construct understanding about teaching and learning in one adult HSE classroom as it employed multimodal play. Teacher inquiry is research into one's own practice with the goal of improving that practice (Stanovich & Stanovich, 2003). I added PAR to this methodological framework to include the students as researchers. The purpose of PAR is to engage the full spectrum of practitioners, in this case an adult education teacher *and* adult HSE learners, in inquiry, so there is equal voice in the analysis and interpretation of the research on praxis (Glassman & Erdem, 2014; McTaggart, 1991). Both teacher inquiry and PAR engage in iterative cycles of research that begin with identifying an issue, implementing an intervention, collecting and analyzing data, and reflecting on classroom practices to propose changes (Glassman & Erdem, 2014; McTaggart, 1991). In the following section, I explain the iterative process of research we took.

Step 1: identify an issue. In earlier cycles of inquiry, participants/co-researchers problematized the emphasis of the HSE exam on their learning. Their adult HSE learning environments mainly consisted of prep sites where they were placed on a computer to practice rote skills. Participants/co-researchers identified this as an issue because this style of instruction did not work for them.

Step 2: design an intervention. To figure out what style of instruction might be better, we used a semi-structured interview and experience sampling methodology to understand students' literate lives outside of class. In the semi-structured interview, students were invited to share about the schools they had attended, their feelings around education and themselves as a learner, and what kinds of texts they read and wrote. Students also participated in photo journaling to document various literacies they engaged in, how they learned those literacies, and how those literacies might help them in the classroom. Data revealed students best learned their mastered literacies in hands-on, collaborative spaces that incorporated many

modes of making (i.e., cooking, sewing, crafting). Thus, multimodal play became the designed intervention.

Step 3: collect data. During the six-week unit, we used multiple methods of data collection to inform curriculum and analyze the outcomes that were taking place. Participant observation consisted of six, 90-minute lessons that were video and audio recorded, transcribed by the teacher researcher, and used for analysis later. Reflective field notes were collected by all researchers after each of the six lessons. These reflections were recorded in narrative form and focused on general observations, reactions, and feelings about the lesson as students thought about things like: what the lesson was about, how they participated in the learning, how they felt, and how they collaborated with one another. Finally, students collected artifacts based on what they deemed to be evidence of their learning. This documentation could include, but was not limited to, something they did in class, a picture of a moment in class, or a journal entry describing their learning.

Step 4: analyze data. Following in the tradition of constant comparison (Charmaz, 2000), analysis occurred both throughout and after the completion of the data collection process. Each week, I reviewed all the field notes from each researcher alongside the transcribed video data and recorded overall themes from that week. After data was collected, all researchers engaged in descriptive data analysis. First, participant researchers used in vivo coding of their portfolios of learning and field notes. In vivo coding is a code that refers to a word or short phrase from the actual language found in the qualitative data record (Saldana, 2009, pg. 105). Using in vivo coding allowed for the participants' voices to continue to be the center of the research, but was also limiting because the same student phrases were not used repeatedly, thus it was difficult to find patterns. With that in mind, research participants also used emotion coding. Emotion coding labels emotions recalled and/or experienced by the participant. Examples of codes from the participant researchers in their early memos included: school, job, need money, challenging, regret, doubt, stuck, left behind, unwelcomed, overwhelmed, lost, urgency, pressure. As participant researchers continued to look through their work, new codes appeared such as believe in yourself, take chances, life story, express yourself, one step at a time, hope, learning, emotional growth.

Once initial coding occurred, participant researchers brought their portfolios of learning, field notes, and initial codes to a semi-structured interview. Each participant researcher shared their work and their codes with time for follow up questions such as “what were you feeling during this type of reading/writing/literacy” or “how did your creation process help you in your educational goals.” Once each person shared, the group of participant researchers discussed patterns they noticed across portfolio presentations in order to organize the codes into a system of themes and how they are in relationship to one another. All participant researchers listed out the codes, then categorized, recategorized, and conceptualized those codes into the following themes: power, choice, collaboration, healing, self-expression, and process.

After themes were determined by all participant researchers, I, the teacher researcher, went back into all data and independently used those codes to do more analysis. Specifically, I began with a domain analysis to better understand how the themes we identified were in relationship with one another. To do this, I used the themes as cover terms that smaller themes could fit into. For instance, play became a cover term that included themes such as power and choice. I then used semantic relationships to link the cover terms to the included themes (Spradley, 1980). Examples included “making is a way to play”, “healing is a result of play.” I then re-engaged with the data to code based on these semantic relationships.

Throughout the data analysis, I used a variety of tools that are common to participant action research to ensure validity. Specifically, I used triangulation through the collection of multiple pieces of data. Methods of triangulation included initial coding, interim analysis, critical friends group, and member checking. The critical friends group included three persons: one HSE teacher, one doctoral student, and one researcher. This group discussed data transcripts and initial findings, checking my analysis in light of their experience and expertise. Member checking was used by systematically soliciting feedback about the data and conclusions alongside the participant researchers (Maxwell, 2013). While members informed data analysis, I also had them check my interpretations of the data once I had written up the results of the findings. During this time, participant

researchers had an opportunity to review the findings and give feedback to ensure their voices and views were accurately portrayed. Additionally, teaching practices were built upon throughout the summer and fall sessions to include insights from each unit to validate the learning in practice.

Step 5: reflect. I initially engaged in this study to inquire how multimodal play might be an alternative pathway to developing the competencies needed for a HSE diploma and workforce readiness program. I wanted to use PAR to do research with students whose learning this intervention would impact the most so that recommendations for their education experience were from them. In the analysis of the data, along with insight from the critical friends group and participant researchers, it became clear that multimodal play should be incorporated into adult HSE classrooms, not because it increases disciplinary competencies, which it does, but because it provides spaces of joy and healing in educational environments for adult learners. In the following section, I describe what the data showed us about the impact of using multimodal play in an adult HSE classroom, specifically how control through choice and connection through bearing witness were sources of healing for students in the educational environment. I then describe what those implications are for future teaching practices in the adult HSE classroom.

Findings

Horsman’s work with survivors of trauma (1999) suggests that literacy educators can better meet the needs of all learners when control and connection are central to the learning. The findings for this study begin by describing how multimodal play gave control to students to choose the content and mode of what they wanted to compose. As students shared their stories in unscripted moments, connections amongst students were made and those connections helped students heal and reframe their relationship to academic spaces - an important part of their HSE learning process.

Control Through Choice

Control in many learning environments is described as learners having choice. By using multimodal play, choice of mode invited students to explore ways of doing literacy

beyond one prescribed way. Specifically, students had control over the content and mode of their composition. Control over the content seemed to give students comfort to create narrative compositions which had been shamed in other academic settings, or at least not as valued. Control over the mode gave students different tools to express their narratives.

Gary chose to write about a time when he struggled the most with education. He was 13 and his mom had just left to live a life in the street. Gary chose to write a letter to his teenage self about lessons he had learned. Reflecting on his drafted letter, Gary's memo touched on what he learned from the process of writing about that time in his life. He stated "I no longer have negative feelings about my teenage years. Instead, I am seeing that I am an expert in my own life" (May 24, 2018). This realization shifted Gary's relationship with his story. He wanted other teenagers to hear his story, so they might be impacted by the lessons he learned. Thus, he chose to record his letter in an audio format that he posted to the internet.

With the structure of multimodal play, Terrenya, who identified as a writer, found herself continually crumpling up her paper, writing, and crumpling up her paper (active participant observation, September 20, 2018). A week later, Terrenya began to observe her classmates playing with different modes. Seeing the different strategies her classmates and instructor were using (i.e., podcast, graphic novel) opened up opportunities for her to reform her narrative through a visual mode. The visual mode freed Terrenya from having to have the right words to express the story she was trying to tell - a story about her family and the dark impact those relationships had on her ability to manage school. Her final composition consisted of 3 pieces of construction paper, 2 green and one black (portfolio artifact, September 27, 2018). The black piece was placed in the middle of the two green pieces. On the left, she used images and words to introduce herself, foods she liked, products she used, dreams she had. The middle, pasted on the black construction paper, was a picture of a family tree with a broken heart. She described it as representing the pain of family. She stated that "with family, there is a lot of heartbreak among the relationships" and she would try to hide the pain she felt which caused her to go into a depressive state during high school (memo, September 27, 2018). Finally, on the right were pictures of her two

sons which represented the things that were important to her in her life and gave her hope for the future.

Diamond also began by writing in a more traditional way. But after seeing others engage in various modalities, she chose to adapt her writing into a scripted play because she felt like it needed to be expressed visually to better reach her intended audience (memo, September 27, 2018). Diamond's play focused on a classroom setting in which the teacher made her feel unwelcomed, overwhelmed, and left behind. The opening scene has her entering the classroom timid, embodying feelings of anxiety and self-doubt. Throughout the play, Diamond highlighted moments of negative feedback, isolation, and denial of receiving help when asking for it. When Diamond embodied the emotions she felt in this classroom space while acting out her story, her pain was palpable. In fact, in her memo (October 11, 2018), she reflected upon the tears that welled up in her eyes during her performance and her desire to distance herself from other classmates throughout that period.

Multimodal play gave students the choice and control to share their stories authentically and vulnerably without barriers. To be that vulnerable in a classroom environment could only happen if students felt connected to the other students and the learning. Multimodal play provided an opportunity for students to connect organically and, through those connections, bear witness to each other's stories as a step towards creating therapeutic support in the adult education classroom.

Connection Through Bearing Witness

As students crafted their own compositions, they reached across for materials, commented on each other's work, and started to co-construct stories. For Andrea, this was an entry point into composing practices. When Terrenya talked about all the things she had to do as a parent, Andrea responded:

"when I was a little girl my mom told me I have to teach you how to be responsible because I not gonna be here forever. So, from that day on my mom teach me how to wash clothes. And she show me how to be responsible as a teenager. I was going places by myself. I was catching the bus at the age of 12 with my little brother and sister at the age of 14. I was helping my mom pay bills at the age of 16. I was going to the food store shopping by myself at the age of 17. I was taking care of my little brother and sister because my mom have past away. I thank god that my mom teach me how to be responsible. And sometimes it feel sad and

sometimes it made me like I did not have a childhood cause I grow up too fast. But with all this been said I would not change it for the world. I just wish I had my mom for that for I can tell her how much I thank you for everything that you done for me and my brother and sister. Ain't a day go past that we love you and miss you. Every year for your birthday we let a balloon go for you. Rest in paradise mom - gone but not forgotten" (active participant observation, October 28, 2018).

Andrea was not just engaging in conversation; she was sharing her story. The shift in audience from Terrenya to her mother highlights this. Andrea's memo from that day reflected that she "feels better to share her story. There is no one way to read or write" (memo, October 28, 2018).

The collaboration and interaction of the space and materials invited everyone to learn from each other, and providing feedback as a means of validation became part of a healing process. Dutro and Bien (2014) describe this phenomenon as "critical witnessing." Critical witnesses are people who witness, either through seeing, hearing, or reading, a traumatic story and validate that story. Through this validation, critical witnesses help re-create the author's identity by seeing the author as someone beyond the trauma (Dutro, 2009).

When analyzing the data, we noticed the interactions among all people in the learning space highlighted multiple points of connection and critical witnessing. As I engaged in the multimodal composing practices among students, I also composed a narrative about my own grief, fear, and desires. In this case, I designed a graphic novel about the heartache I experienced throughout the adoption process, and the fear I had about becoming a biological mother. Since many of my students were also parents, their critical witnessing to my story, validation about the emotions I was experiencing and conveying through my graphic novel provided me with support and hope to overcome those pains and fears (memo, September 20, 2018).

Modeling vulnerability led others to be vulnerable. When Terrenya shared her visual collage as part of her portfolio, she chose to talk about her suicidality which dug deeper than the original story that she shared in class (semi-structured interview, November 1, 2018). She described her choice to use pictures instead of words because trauma is often difficult to write about - the events are "unspeakable" (e.g. Caruth, 1996). It is also difficult to share traumatic stories with people you do not feel connected to.

Sharing became an important class structure, one that required an active audience to not only hear the story, but to provide feedback and offer support. This type of sharing increased the connections students felt to one another and the vulnerability they were willing to share. In unscripted moments of multimodal composing, Andrea shared that she lost her mom to terminal illness at a young age. Gary witnessed Andrea's story and validated her by describing that drugs were the reason he lost his mother. She is now deceased, but when he was 14, Gary said the "streets got a hold of her and [he] was kind of forced to take care of [his] little sister." Takeya chimed in, adding that she never knew her parents. She was raised by her uncle until the arguing between her and her uncle grew to be too much, and she got kicked out. She then moved in with her grandmother. Unfortunately, her grandmother had severe medical needs and could not take care of Takeya. Instead, Takeya was left to take care of her grandmother, missing out on the high school experience (active participant observation, October 28, 2018).

These are the "spoken wounds" that were shared, stories that have in the past been asked to be "left at the classroom door" (Dutro & Bien, 2014). In fact, some instructors and educational administrators have invalidated personal narratives for their assumed lack of academic rigor which is seen in the narrow focus of argumentative and informative writing prompts in HSE exams. (e.g., General Education Development Test; American Council on Education, 2014). Without acknowledging the spoken wounds that students carry with them, the school can become a place of trauma as well. But this class offered something different through multimodal play - it invited sharing. Sharing their work and their stories, helped build "up [their] relationships with each other because [they] were only sharing what [they] were comfortable sharing and the task of writing wasn't getting in the way of that sharing" (Takeya's memo, November 11, 2018).

Sharing stories connected the students to one another, and it also aided in students' healing, or re-storying traumas and identities they held from the past. As Gary re-storied his teenage years through a letter of lessons he learned, he engaged in auditory modes to get his message across. He considered what music might be a good addition to his letter but struggled to find a song that had

the right meaning or beat. Takeya suggested he make a rap. Gary covered his eyes. Terrenya told Takeya to “throw down a beat” at which point Takeya began to beatbox and the whole class erupted in laughter (active participant observation, June 6, 2018).

Witnessing a classmate heal from a previous shared pain through their composition encouraged others to heal from that pain as well. No matter how the text is presented, either spoken, performed, read, or embodied in other ways, the process of expressing the testimony aids in healing (Dutro & Bien, 2014). Healing in this context, meant changing one’s relationship to their narratives and their identity as a learner.

The invitation to engage in multimodal play in an adult HSE classroom allowed students to return to their personal trauma, take control of the event by organizing the traumatic events, and make choices about what version they wanted to share, remember, and forget (Spear, 2013). When stories were shared, critical witnessing occurred as the audience helped the author explore a different result to the problem - continuing to help the author gain a deeper understanding, connection, and self-awareness to continue the healing process (Haertling & Schmidt, 2017). Multimodal play gave students the opportunity to process and share their trauma narrative by being in control of the choices for their composition and building connections by bearing witness to each other’s stories. This process helped them heal from past experiences and relationships with school and made them better able to focus on learning and what lay ahead for them in the future.

Discussion

Without dismissing that trauma exists in the adult HSE classroom, it is important to recognize that modern forces and policies, such as standardized testing and the Workforce Innovation and Opportunity Act, make it difficult for adult HSE programs to provide more than standardized-test preparation skills since test-scores are how programs are measured. A sense of urgency to get students to be able to pass the writing portion of a standardized test limits writing to informational and argumentative forms. Without taking time to engage in multimodal play, the choice to tell stories and use narrative form as a source of healing may not find a place in the adult HSE classroom.

There is a need for the adult literacy field to continue to wrestle with different perspectives about what adult literacy could be. Freire (1970) calls adult educators to take up trauma stories in order to resist the dehumanizing structures and practices of school that silence emotions. Based on this study, I recommend that adult literacy, specifically HSE educators incorporate multimodal play - unscripted moments - to engage in different modes of meaning making and composing in order to invite students to make choices and make connections as avenues towards healing in the classroom. Educators should consider what materiality is available for students to make choices, how narrative expression is invited in the learning environment, and how to create time for unscripted moments of connection. In this way, perhaps, assumptions about what is and is not meaningful in regard to the outcomes we count and care about in the adult HSE classroom will shift.

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