

## EDITORIAL

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This issue of *Literacy and Numeracy Studies* features contributions in areas of literacy and workforce development, vocational literacy and health literacy. Each of these areas has had significant attention in many English speaking countries in the OECD, and they also highlight the cross-disciplinary nature of adult literacy research.

In ‘Workforce development rhetoric and the realities of 21<sup>st</sup> century capitalism’, Erik Jacobson challenges the prevailing rhetoric about adult education as a panacea for problems in the economy. He argues that there is a fundamental contradiction between this rhetoric and the nature of capitalism itself that limits the power of education to solve issues of economic inequalities. However, Jacobson goes beyond critique to point to adult education - not as a site to feed fodder to the capitalist marketplace, but as a site for critical education about the economy and mobilisation for structural change.

The contradictions presented by neo-liberalism are further illustrated in the second contribution in this issue by Oleg Popov and Alzira Manuel: ‘Vocational literacy in Mozambique: historical development, current challenges and contradiction’. The authors analyse the development of vocational programs in Mozambique using Cultural-Historical Activity Theory (CHAT) as their analytical lens. Vocational literacy is treated as an ‘activity’ leading to the development of job-related skills and knowledge. Their analysis uncovers the historical and cultural influences on the shape of vocational literacy education in Mozambique, and how this is currently challenged by a range of factors including economic inequalities and inadequate infrastructures and quality assurance systems, each of which demands closer examination as dynamic elements within a larger and complex cultural and historical activity system.

The third research article by Holly Jacobson, Lauren Hund and Francisco Soto Mas: ‘Predictors of English health literacy among US Hispanic immigrants’ raises questions about how English language proficiency and socio-linguistic environment affect the health literacy of adults in language minority groups. While several health literacy assessment instruments have been developed and used in the US, the language of assessment is English, and does not take into account that this may not be the first language of many of the participants, or the language they primarily use in their communities. In addition to calling for health literacy research that takes on board the reality of bilingualism in many communities, for example by examining not only English language proficiency but also the

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participants' first language, the authors identify the need for more place-based research to uncover the complex sociolinguistic environmental factors that may be affecting the health literacy, care and outcomes of the population.

The final contribution, in the *Refractions* section, is an opinion piece from Stephen Black. Black puts forward a criticism of the Australian health sector's creation of crisis discourse about health literacy. He traces the source of this crisis to a definition of what constitutes 'minimum literacy' used in the reporting from an OECD international literacy survey, and argues that not only is this criterion of literacy unsubstantiated, but that it results in a victim-blaming exercise.