

teamlab

TOBACCO EDUCATION AND MATERIALS LAB

Health Literacy Webinar

December 6th, 2011

10:00am to 11:00am

Funded by the California Department of Public Health, Contract #09-11437, awarded to the Institute for Health Promotion and Disease Prevention Research Keck School of Medicine of University of Southern California (Baezconde-Garbanati, PI; Cruz, Koprowski, and Unger, Co-Investigators).

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Your Presenter

Michael Villaire, MSLM

- Chief Operating Officer for the Institute for Healthcare Advancement
- Produces the IHA Annual Health Literacy Conference
- Written numerous articles on Health Literacy
- Co-author, "Health Literacy in Primary Care: A Clinician's Guide"
- Co-author, "What To Do When Your Child is Heavy"
- Adjunct Faculty, Brandman University



Thank you!

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Writing and Designing Effective Tobacco Education Materials to Health Literacy Standards

TEAM Lab Health Literacy Webinar

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Objectives

By the time you're done with this education session, you should be able to:

- Say why it is important to write and speak at an easy to understand level
- Write and speak to clients / customers / patients using the basic principles of health literacy
- Write, edit, and design materials at an easy to understand level using the principles of low-literacy

Today's Schedule

- I. Health Literacy: An Introduction
- II. Writing Effective Communications
- III. Design Considerations / Samples
- IV. Wrap-Up / Questions

I. Health Literacy: An Introduction

Definition

- "Health literacy allows the *public and personnel* working in all health-related contexts to find, understand, evaluate, communicate, and use information. Health literacy is the use of a wide range of skills that improve the ability of people to act on information in order to live healthier lives..."
(Calgary Charter on Health Literacy, 2008)

Health Literacy Components

- Reading and writing
- Listening and verbal communication (patient and provider)
- Numeracy
 - ✓ Computation skills
 - ✓ Interpreting / evaluating risk (%)
- Self-efficacy

-Institute of Medicine *Health Literacy: A Prescription to End Confusion* 2004

Other Considerations

- Culture / belief systems
- Mismatch between provider demand and patient skill level
- Mismatch of reading level / materials
- Strong relation to health disparities
- Strong relation to safety and quality

**Which of the following
is the strongest predictor
of an individual's health status?**

- A. Age
- B. Income / Employment status
- C. Literacy skills
- D. Education level
- E. Racial or ethnic group

**Which of the following
is the strongest predictor
of an individual's health status?**

- A. Age
- B. Income / Employment status
- C. Literacy skills (75% who self reported poor health in Below Basic HL category)
- D. Education level
- E. Racial or ethnic group

--National Patient Safety Foundation

Health Literacy Myths

- Writing at a low grade reading level / using plain language is “dumbing down”
- Using plain language that is easy to read is unprofessional and insulting
- Writing at a lower grade level is easy to do
- Why do this? Most people understand what we send to them

Who has poor health literacy?

A few facts based on national research studies:

- More than one-third of U.S. adults have limited health literacy skills
- Only about 12% are considered Proficient
- Older adults' health literacy is even lower

Who has poor health literacy?

- Almost anyone can have poor health literacy
- You can't tell by looking
- Even people who can read well or are highly educated, may not understand medical or insurance terms
- Health literacy is not just the reading level: it involves understanding the information and acting on it to make positive health decisions

Why Does Health Literacy Matter?

Those with limited literacy skills:

- Use more resources because they don't understand information
- Are less likely to make use of screening / preventive care (such as smoking cessation programs)
- Have poorer understanding of how to manage their chronic diseases (75 cents of every healthcare dollar spent—tobacco-related diseases are the easiest to prevent)
- Less likely to understand how to appropriately use services (such as smoking cessation programs)
- Are more likely to be hospitalized / re-hospitalized
- Cost more (individuals, families, employers, insurance companies, government, society, etc.)

Real-life example

An 89-year-old man with dementia is diagnosed with an ear infection and is prescribed an oral liquid antibiotic. His wife understands that he must take one teaspoon twice a day. After carefully studying the bottle's label and not finding administration instructions, she fills a teaspoon and pours it into his painful ear.

Parker, R. et al. J Health Comm, 2003.

Another real-life example

Mr. G, 45, an Hispanic immigrant, native Spanish language speaker, has a job health screening. He is told his BP is high, can't work until it's controlled. Given β -blocker, diuretic, instructed to take each "once a day." 1 week later, presents @ ED, BP very low, dizzy. Docs can't figure out. Spanish speaker asks him how many he took each day. "22," says Mr. G. (In Spanish, *once* means 11.)

Nielsen-Bohlman et al. IoM "A Prescription to End Confusion" 2004

**What's
clear to
you...
is clear to
you!**



II. Writing Effective Communications

What is the message? Focus on:

- Why are you developing the piece?
- What does the reader "need to know" (essential information)?
- What do you want the reader to do?

Typical Document Problems

- Too much information. Limit key messages to no more than 3.
- Readability level too high. Aim for 6th grade level or lower.
- Not interactive. Engage reader with questions / checklists or use 2nd-person pronouns ("you") when possible.
- Difficult to understand words/jargon. Use simple, living-room language.

Tips for writing and editing

- Cut out unnecessary phrases / words
- Stick to basics: What to do, how to do it
- Explain/define hard words. Use examples.
- Avoid abstract concepts, figures of speech.
- Write a paragraph / edit down / edit again.
- Put key message 1st in sentence:
"You can quit smoking by doing X..."
not "Doing X will help you quit smoking"
- Always choose the simpler word

Translate Tobacco Jargon

Secondhand smoke

Third hand smoke

Cessation

Sponsorship

Translate Tobacco Jargon

Secondhand smoke (smoke from cigarette)

Third hand smoke (smoke from cigarettes that sticks to anything that it touches)

Cessation (to quit smoking)

Sponsorship (tobacco donations)

Creating Your Document

- Define your audience and messages
- Organize your document
- Involve end-users early
- Sequence information logically
- Write message clear / simple / engaging
- Create document with good design processes
- Test-revise-test
- Focus groups are best if possible

Define Your Audience / Message

- Who is your target audience? (General/specific, age, gender, language, nationality)
- What is the critical information? (Need to know/do vs. Nice to know)
- What do you want them to do?
- Message must be action-oriented. Make clear what the expected behavior / outcome, and provide a clear path to that goal.

Organize Your Document

- Ensure purpose of document is stated early and clearly
- Think through logical sequence
- Are there dependent concepts, i.e., ones that must be defined in order to understand another concept?
- Headers / graphics / bulleted lists / color / other navigational aids

Involve end-users early

- Ask them what they know and don't know
- Show samples of what you've written early for feedback
- Does the material resonate with them?
- Is your writing clear and understandable?
- Are they "getting" your messages?

Sequence Information Logically

- Are there concepts or words that must be defined first? (For example, secondhand smoke, addiction, risk, third hand smoke.)
- Present actions in sequential steps.
- Define unfamiliar words.

Write Message **Clear / Simple / Engaging**

- Use active, not passive, voice (“Get help from a counselor” vs. “A counselor can give you help.”)
- Action-oriented verbs, write to goal.
- No jargon. Watch for figures of speech, abstract concepts. Define tough words.
- Use interactive devices when possible (questionnaires, story, 2nd-person pronouns “you”)
- Use examples.
- Short, simple sentences (15 words or less).
- Short words (1-2 syllables).

Example of 9th Grade Text

“One of your doctor’s primary roles is to prescribe and monitor the use of your asthma medicines. Medications, when taken correctly and combined with appropriate lifestyle changes, can effectively control your asthma.”

Same Text, 4th Grade Level

“Both you and your doctor will check on how your medicines are working. When you take the right medicine in the right way, you can control your asthma. You will also need to deal with the things in your life that bring on the asthma.”

Example of Problem

“In order to be responsive to Member problems and concerns about the HMO’s policies, programs, procedures, personnel, or health benefits and services, the following grievance procedures have been established.”

Is this what that means?

“If you have a problem or complaint, here’s what to do.”

III. A (very) Short Course on Design

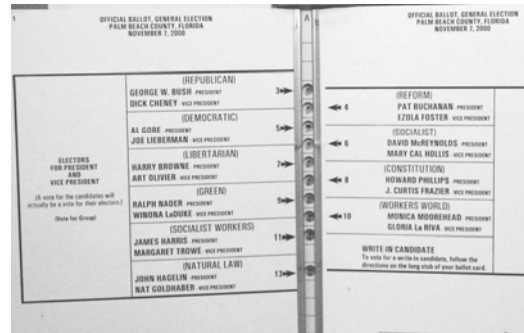
- Design is a means by which we interact with, perceive, and use tools in our world.
- Good design aids and eases this interaction, provides a more pleasant, complete, and satisfying experience for the user.
- Poor design can impede and frustrate attempts to use/understand these tools.

Why did Al Gore lose the 2000 election?

Bad Design

Do not underestimate
the power of design

The infamous 'Butterfly Ballot'



Myths of good design

- More is better
- White space is meant to be filled up
- **Fancy type faces ARE cool and good**
- More info with smaller type
- Style should be formal, like our corporate image
- Great art provides effective communication
- If I can, I should

Who needs to be involved?



Some you may have thought of...

- Writers
- Editors
- Clinicians
- Administrators/legal
- Graphic artists
- Patients
- Printer

Who needs to be involved?



Some you may not have thought of...

- Teachers
- Students
- Architects
- PR firms
- Publishers
- Mailing house/Post office

Design Considerations

Six Design Elements that Affect Readability

1. Type
2. Paragraphs
3. Grouping
4. Graphics
5. Color
6. White Space

Type

- Type face—Serif or sans serif. Use serif for body copy, sans serif for headings. Avoid fancy, “novelty” type faces. Arial / Times New Roman
- Size—12 to 14 point for body copy.
- Case—Upper and lower. Not all caps.
- Font—Use bold or italic sparingly, if at all.

Paragraphs

- Block paragraphs with no indents are best.
- One line return between paragraphs.
- Left justified.
- Short, descriptive headings. Acts as navigational aid.
- Line length about 4” to 6”, 30-50 characters.
- Sentence no more than about 15 words.

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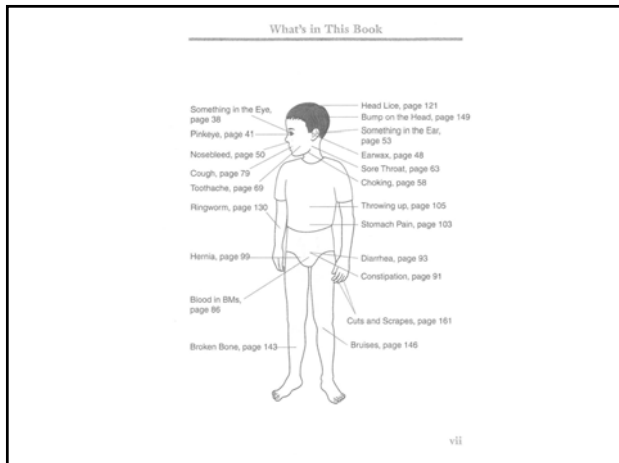
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Grouping / Chunking

- Keep like ideas together. Discuss ideas in logical sequence.
- Bulleted lists chunked into categories. No more than 7 items in a bulleted list.
- Break out processes into single, easy to follow steps.
- Be careful constructing tables with too many columns or rows. Difficult to use.



Explore...

- nmlm.gov/outreach/consumer/hlthlit.html
- nces.ed.gov/naal
- www.health.gov/communication
- www.ahrq.gov/browse/hlitix.htm
- medlineplus.gov
- healthfinder.gov
- www.hsph.harvard.edu/healthliteracy
- www.ih4health.org (more links) (Health literacy conference discount code: USC12)

Explore...

- www.healthliteracy.com
- www.healthliteracymissouri.org
- <http://lincs.ed.gov/mailman/listinfo/Healthliteracy/> (join listserv)
- ama-assn.org (Foundation/Health Literacy)
- foundation.acponline.org/hl/hlresources.htm
- www.iom.edu (health literacy)
- plainlanguage.gov

Thank you!

What questions do you have?