Choose the Short Word

Here are some frequently used long words. What are shorter (i.e. easier-to-read) words which express the same idea?

accumulate  ______ ______ initial  ______ ______
acquaint  ______ ______ locality  ______ ______
additional  ______ ______ maintenance  ______ ______
aggregate  ______ ______ modification  ______ ______
anticipate  ______ ______ obligate  ______ ______
approximately  ______ ______ occasion  ______ ______
assistance  ______ ______ optimum  ______ ______
commitment  ______ ______ participate  ______ ______
compensation  ______ ______ proceed  ______ ______
construct  ______ ______ purchase  ______ ______
contribute  ______ ______ reimburse  ______ ______
demonstrate  ______ ______ subsequent  ______ ______
equivalent  ______ ______ sufficient  ______ ______
explicit  ______ ______ transmit  ______ ______
facilitate  ______ ______ utilization  ______ ______
Rewriting easy-to-read sentences

Examples

The program will be terminated when funding is exhausted.
Possible rewrite: The program will end when we have used up our funds. Or we will keep the program going until we run out of money.
Participants should register prior to the start of the program year.
Possible rewrite: Sign up before the program begins.

Try rewriting these.....

There has been a modification to the schedule.

Combining alcohol with other drugs can have deadly consequences.

This is intended as a reference guide to key services and agencies in the city for persons with HIV infection or AIDS.

A violation of this policy may result in disciplinary action resulting in suspension or termination of employment.

The prior authorization request submitted by your dentist for comprehensive orthodontic treatment has been approved for payment.
Some people have trouble knowing what is active and what is passive voice. Active voice is when the subject of the sentence is doing the action:

Active: "All children under twelve must wear seat belts."

Passive: "Seat belts must be worn by children under 12."

Active: "The nurse will take off the bandages."

Passive: "Bandages will be removed by the nurse."

Look for the passive voice:

1. When a helping verb is used: "-- was taken --" or when the verb "to be" is used: "-- should be worn --."

2. When the word "by" is used: "-- by the nurse --".

Some of the following sentences are active voice, some passive. Put an "A" in the box of the active sentences, and a "P" for passive sentences. Then rewrite the passive sentences to make them active.

- **Q** Eat five servings of fruits and vegetables every day.
- **Q** Use #15 sunscreen if you are out in the sun.
- **Q** Many people are affected by second-hand smoke.
- **Q** Don't be mislead by fine sounding drug claims.
- **Q** Choosing a low-fat diet will help you live longer.
- **Q** Your child should have been vaccinated by age 5.
- **Q** Release of this information is controlled by the doctor.
- **Q** Meatless meals will help you cut the calories.
- **Q** Cholesterol levels can be lowered by exercise.
- **Q** More vitamins are retained when vegetables are steamed.
Make Instruction Explicit

Instructions often give a generalization (a general rule) and leave it to the learner to apply what the rule means to his/her own situation.

If we are not explicit in teaching what to do, the desired behavior may never occur.

On the left are some generalizations taken from health pamphlets. On the right are the behaviors which should apply. If you have room in your teaching, you might use both, though you might simplify the generalization. The one on the right should always be there.

**Generalization**
**Desired behavior**

Fetal Alcohol and other drug effects are completely preventable.

If you are pregnant, do not smoke, drink or do drugs.

The message you want the reader to remember and act on is: " -- don't smoke, drink or do drugs." The generalization is less important.

---

**Generalization**
**Desired behavior**

Attitudes about food can be shaped by school lunch programs.

Serve foods that look good, taste good, and are good for you. That will build good eating habits that will last a lifetime.

---

**Generalization**
**Desired behavior**

Foods low in fat and high in fiber are to be preferred.

Serve lots of fruits and vegetables, breads and pasta. Go easy on fried food or anything with fat in it like hamburger or cheese.

---

**Generalization**
**Desired behavior**

Practice what you preach.

Write a "Desired behavior" for each of the following generalizations in the space on the right.

1. Watch for excessive bleeding.

2. Blood pressure can often be reduced by reducing sodium.
3. Sanitation is critical to food poison control.

4. Low birthweight babies may be slow to develop and are prone to illness.

5. Walking is good exercise.

6. Watch for signs of infection.

7. Child abuse often runs in families.

8. Avoid over-exposure to the sun.

9. Younger children should be served smaller portions.

The Print

Type size: 12-point to 14-point

Line length: Not more than 5½ inches (shorter is better). About 40-50 characters per line.

Margins: 1. White space is important - be generous.
2. It's easier to keep your place with ragged right margins.
   Use left-justification.
3. Don’t right-justify except against an illustration with a straight left edge.
4. Margins should be wider at bottom than at top - sides equal.

Inks: 1. Dark ink on light paper is best (e.g., black ink on white paper).
2. Reversed type (light type on black background) is hard to read.

Print quality: Masters should always be used for copies. Don't copy a copy.

Type faces: 1. Serif type is easier to read than sans-serif (sans is French for "without"), but sans-serif may be used for headings.
2. Long stretches of italics or bolding or understlining is hard to read.
3. All these are good for emphasis when not over-used.
4. All caps are hard going even for good readers.
   Use capital letters only where grammatically appropriate.

Position: Keep the message reading horizontally - or nearly so.

Spacing: 1. Double space between paragraphs.
2. Try not to end a line with a single word of the next sentence.
3. Avoid "widow" and "orphan" lines - either the first line of a paragraph alone at the bottom of a page, or the last line of a paragraph alone at the top of a page.
Lay-Out

Headers: 1. Help readers organize and locate information quickly.
2. Short instructional headings are better than single words.
3. Visuals with headings that help explain the information in the visual.

Balance: 1. Words, spaces and illustrations should be visually balanced.
   (Try looking at the page upside-down.)
2. Watch out for clutter - a spotty look to the page.
3. Start the message in the upper-left or upper-middle of the page.

Sequence: If the material is sequenced, number the frames or groups
so the reader knows where to move his eyes.

Lists: No more than 5-6 items in a list.
If more are needed, make sub-groups with appropriate headers.

Devices: Use arrows, boxes, or other highlighting devices - but don't over-do it.
This is 8 point print.

This is 10 point print.

This is 12 point print.

This is 14 point print.

This is 18 point print.

This is 24 point print.

This is 36 point print.
Concept: (What is this piece? How will it look? 4-fold pamphlet, instruction sheet, letter etc.)

Target Audience: (Be specific)

Distribution/Marketing: How? Where?

Planning/Review: Who will plan, have input? Who will review along the way?
   Clients/target audience

   Peers/professionals

Approval: Who must give final approval? How will you engage them in the process?

Graphics/Printing: Who will help with lay-out and graphics (if needed)?

   How will piece be printed? Number of copies?

Budget:
Dover clip art books are inexpensive (about $5) and the drawings are "clean" (i.e., not shaded). Some figures are outdated and have to be changed to look contemporary. Art supply stores in Maine carry them retail. You can order directly from the company.

Examples of books we use:
- Illustrations of Children
- Baby and Infant Care Illustrations
- Illustrations of Senior Citizens
- Numerous Illustrations of Children
- Fitness and Exercise Illustrations

2. Graphics Products Corporation
   1480 South Welf Rd.
   Wheeling, Illinois 60090
   708-537-9300

Books are inexpensive, like Dover ($5 range) and some are more up-to-date than Dover. They are sometimes not as "clean" as Dover, but useful. Write for a catalogue.

Examples of books we use:
- Men
- Women
- Sports
- Expressive Faces
- Exercise & Fitness

   6000 N. Forest Park Drive
   PO Box 1901
   Peoria, Illinois 61666-1901
   800-253-8800

These clip art books are sheets within a looseleaf binder, organized by topic. They cost $5.00 - $6.00 per binder. Quality seems to vary between topics and within each binder. Some is excellent. We are using 2 binders on "Families." This company also markets electronic clip art (i.e., computer graphics).

4. Armaster Book Co.
   500 North Claremont Blvd.
   Claremont, CA 91711
   714-626-8065

Clip art books are in the $4 - $5.50 range and are limited in scope. We are using several:
- Children
- Communications
- Family & Home
- People
- Health
- Menu
Field Testing Materials

Questions for Group Review
(To be used in conjunction with a content quiz)

Use the following questions as guides in field testing your pamphlet with an adult education class or other group(s) you select. They are discussion starters. You may need to probe for more specific information, depending on the answers to these kinds of general questions. Have a "helper" record responses and/or use a tape recorder.

- What are some words you would use to describe this pamphlet?

- Is there any new information in this pamphlet? If so, what?

- Is the information do-able? That is, could you use the ideas in your own life? If not, what doesn't make sense or doesn't seem useful? Would you be willing to try the ideas? Why or why not?

- Are any words hard for you? Which ones?

- Do the pictures help get the message across?

- Is the print big enough? Too big?

- Can you think of ways this pamphlet could be improved?
Field Testing New Easy-To-Read Pamphlets

Introduction

Field testing is also sometimes called pre-testing, formative evaluation, or learner verification. Use the term which suits you! The idea is to be sure that the materials we have produced are understandable (by poor readers), appealing, and useful. So, we need to check on:

1. **Content:** Can poor readers read, understand, and remember important points?
2. **Appeal:** Does the pamphlet attract attention and have sufficient appeal in ideas and graphics to get people to pick it up/read it?
3. **Utility:** Do readers get any new information about health promoting behaviors and could they use it? That is, would it work in their lives?

The Test Group

You probably want to check all 3 items with at least 2 groups: a group of peer professionals and a group of your target audience. The target audience can be a small group of adult learners at an Adult Basic Education Program and/or a group of Headstart parents, a group of WIC moms, a group of teens etc. If it's impossible to assemble a small group, at least ask 3 or 6 or 10 people from the target audience to review it individually.

Testing Content

For the target audience, this is most effectively done with a brief paper and pencil quiz. Write questions drawn from the most important points in the pamphlet. Do not use yes/no or true/false questions and do not expect poor readers to write out lengthy answers. To make it workable, try asking questions which have options listed under them (or brief fill-in-the-blanks).

Example (drawn from a pamphlet on dental health for children)

Which things should parents do to take care of a child's teeth?

- Brush and floss each day.
- Use lots of toothpaste, the more the better.
- Serve chicken at least 2 times each week.
- Make your child brush her own teeth without help.
- Tell the school to give fluoride pills.

Testing Appeal and Utility

Use the attached "focus group review" sheet to help you frame questions to ask your test group. This can be an informal process, with time for you to probe and get more ideas.
After you have read the booklet, please put it aside and answer these questions. We want to see if the booklet was clearly written. This is not a test of you - it’s a test of the booklet.

Please put a check in each box that tells you something you read in the booklet. You may check more than one box.

If you stop smoking, you will:

☑ Cut down on the risk of stroke and heart attack.
☑ Improve your eyesight.
☑ Save money.
☑ Feel better about yourself.
☑ Not gain weight.
☑ Smell better.

People smoke more:

☑ The older they get.
☑ When they do things like driving, watching TV or telephoning.
☑ When they are bored, lonely or angry.
☑ When they are away from home.

Put a check on the things the booklet said you might do instead of smoking:

☑ Close your eyes and take 10 deep breaths.
☑ Listen to music and sing along or dance.
☑ Eat a candy bar.
☑ Chew gum.
☑ Brush your teeth.
☑ Call someone on the phone.
☑ Eat a piece of fruit.
☑ Go fishing.
☑ Drink a glass of water.
☑ Take a walk.
☑ Bake a cake or a pie.

On "Quit Day," what did the booklet say you might do?

☑ Put your saved money in a jar.
☑ Give your cigarettes to a friend.
☑ Eat a cookie when you feel like smoking.
☑ Clean out your car ashtray.
☑ Air out your house.

Do you smoke now? ☑ Yes ☐ No
If you smoke, have you tried to quit? ☑ Yes ☐ No

If you think this booklet would help you decide to quit smoking, check here ... ☑
1. Circle the food in each list that you should pick if you wanted to follow what you read about in this booklet:

A  |  B  |  C  
---|---|---
buttered corn | french fries | ice cream 
broccoli | baked potatoes - sour cream | fruit 
creamed onions | boiled potatoes - no butter | chocolate cake 

2. Circle all the foods in the cabbage family:

cauliflower  |  brussel sprouts  |  turnip greens 
carrots  |  kale  |  chic peas 
lettuce  |  asparagus  |  green beans 

3. Circle snack foods that will help avoid cancer:

apple slices  |  cereal snack  |  cup cakes 
popcorn (no butter)  |  cheese crackers  |  wheat crackers 
potato chips  |  carrot sticks  |  cookies 

4. Here are some health rules. Circle the ones that were talked about in the booklet:

Drink less coffee.  |  Eat more cabbage-y foods. 
Eat less fat.  |  Eat green and yellow vegetables. 
Eat more slowly.  |  Eat less bacon and baloney. 
Eat more fiber.  |  Wear clean socks every day. 
Don't smoke.  |  Sleep 8 hours every day. 
Drink whole milk.  |  Don't drink much booze. 
Take vitamin pills.  |  Keep your weight down. 
Eat low-fat cheese. 

Announcer: Your blood pressure is too high but you can bring it down. Listen in as Mary and Josie are talking.

Mary: Gee, Josie, if the Doctor says your blood pressure is too high does it hurt?
Josie: Well, no. I didn't know I had anything wrong with me. I don't feel a thing. They say that's the trouble. Some people who have it just don't want to do anything about it — which is dumb.

Mary: Why? What could happen?
Josie: The Doctor says I could have a heart attack or a stroke or it could mess up my kidneys if I don't bring it down. I sure don't want any of that stuff.
Mary: Well, what do you have to do about it? Do you take medicine?
Josie: They do have medicine but we're gonna try some other stuff first.
Mary: Like what?
Josie: Well, exercise is a big help — and you know I never get much of that. I'm supposed to walk for about a half hour three or four times a week. That might slim me down some and I could sure use some slimming. I'd love to get back into a size 16.
Mary: I suppose you have to eat sprouts and seeds to do that.
Josie: Well, not exactly, but losing weight is important so I guess I'll have to work on that. But I can't do everything at once so for now I'm just cutting down on gooey desserts and I'll bake my chicken instead of frying it and no cookies and doughnuts between meals. I've got to cut down on salt too. So don't offer me any more potato chips.
Mary: I'll bet you're glad you don't smoke. You'd probably have to give that up too.
Josie: Yeah — and I'm supposed to cut down on coffee and tea and coke and....
Mary: Wow! For something you can't even feel you're supposed to do all that! Come on! Get real!
Josie

Yeah, but I really do want to lose weight anyway so maybe this will help me do it. I'll lose it faster if I exercise. I already know that - and I can probably change what I eat if I don't try to do it all at once. A heart attack or a stroke is sure no fun and I want to be around to watch my grandkids grow up. I'd be willing to change some stuff for that.

Marry

I can see it now - the new You - skinny and on everyone's case to cut out the sweet stuff and put on their walkin' shoes. But you know, that sounds like something I should be doing too. Let's go for a walk.

Announcer

Well, Josie has a plan to do something about her high blood pressure. She's going for more exercise and a better diet with less fast foods like cookies and french fries, ice cream and cheese - and more fruits and vegetables. She will also be trying not to get angry and not to worry and fret over things as much as she does now. That's hard on her blood pressure too. She'll need to cut down on coffee and Coke, but she doesn't smoke so she has that going for her already. She and her doctor will work out a plan that won't change everything all at once but if she sticks to the plan, her weight will gradually go down and her blood pressure should too - and her feelings about herself will go up.

Now how about you? The person who gave you this tape also gave you a sheet where you can mark what you will do to bring down your blood pressure. You should look at that now. This shows some of the things Josie will be doing. All the things pictured on this page will help you lower your blood pressure too. Let's look at the pictures.

The first one is exercise - walking or biking or some other activity that gets your heart pumping. You should start off slowly and get yourself up to 30 minutes on 3 or 4 days a week.

No. 2 is coffee, tea, Cokes - cut down on anything that has caffeine. You shouldn't have more than 2 cups a day.

No. 3 is salt - take the salt shaker off the table. Snacks like potato chips, pretzels and other salty things are off limits too.

If you check No. 4, it's a promise not to eat fried food, to cut down on fats like cheese and butter and to eat more grains and fruits and vegetables.

Checking No. 5 means you'll try to keep your cool and stay happy as much as you can - not let anger get to you.

If you smoke, No. 6 is a pledge to cut down or cut out the cigarettes.

Now, you decide which one or two of those things you are willing to begin on right now to get your blood pressure under control. Doing that will be one less thing to worry about and you'll look and feel better than ever. So put a check in one or two of the small boxes and show this sheet to your Doctor or Nurse.

And Hooyay for you! You've made a start! Turn off the player and mark your paper. Good Luck!
Verbal Interaction

Framing a Conversation to Increase Compliance

One of the most common interactions between a health care giver and a patient occurs when a diagnosis has been made and a prescription for care is advised.

Ley et al\(^1\) have shown that organizing the message and using category names can increase recall by as much as 70\%. So, begin your interaction by stating the categories:

"I am going to tell you what I think is wrong;"

"What tests we need to make to be sure;"

"What I think will happen to you;"

"And what you can do to help yourself;"

"First - what is wrong. You have a chest infection."

"Second - tests. We'll need a blood sample and a chest x-ray to be sure."

"Third - here's what I think will happen. Your cough should disappear in the next two days and you should feel better in a week or so."

"Fourth - treatment. I'll give you an anti-biotic which should take care of the infection. I'll also give you an inhaler to use if you have trouble breathing."

"Finally - to help yourself. Stay indoors when it's foggy outside, take your medicine, and get 2 hours rest each afternoon."

Compilation of recent studies on patient knowledge of their medication\(^2\) stated:

**Patient Knowledge About Medicines**

1. 50\% of patients didn't know the correct dosage of their medicine.
2. 38\% didn't know the correct timing of their doses.
3. 68\% were not well informed about side effects.

**Consumer Attitude About Medicines**

1. 30\% said they took less medicine than prescribed.
2. 72\% said they were inadequately informed about medicines.
3. In a series of 221 patient interviews, only 19 said their doctor had asked if they had questions.
4. Patients reported (a) being cut off in mid-sentence, (b) a lack of eye contact during a visit, or (c) having the professional looking at the clock while the patient is speaking.

How to Summarize What the Patient Is To Do

This suggests a furibet interaction strategy which will improve patient comprehension. After the tests are completed and the health care provider is ready to dispense medicines or write a prescription, a careful explanation of:
- how each medication is intended to help,
- the dosage, and
- the related side effects
is in order. Written information in easy-to-read format should accompany each explanation. It would be well to point to the text as the conversation proceeds. Then, to check on patient comprehension at the close of the interaction, the care giver might say: 
"I want to be sure I didn't leave anything out that I should have told you. Would you tell me back what you are to do so that I can be sure you know what is important. You can use the pamphlet as you tell me what medicines you will take and when you'll take them, the dosage, etc. .... And what about exercise, diet, rest etc.?"

When the patient can respond in his own words with the essential information needed for self-care, the likelihood of compliance is greatly increased.

Many health care providers are concerned that there isn't time for carrying out the recommended procedures. There is no doubt that time is a factor, but it does little good to spend time on careful diagnosis and testing if the remedy prescribed for the problem is ignored or poorly administered. To make an analogy, we would never buy a car with all the parts but the wheels. It's not a car until the wheels go 'round. It's not an effective health interaction unless the patient can carry out the recommendations provided.

Tips for Effective Verbal Communication

- Consider bringing in a partner/spouse/family member (or an appropriate other who will help the patient at home) to listen to instructions with the patient.

- Frame your message first. This means, tell your client/patient what you’re going to tell him/her up front, before giving the actual information. For example, a health provider seeing an ill patient might say, “Mr. Jones, I’m going to tell you what I think the problem is, what the effects may be, offer you some treatment choices, and help you plan how to carry out the treatment we agree on.” Then, the provider goes on to give the actual information.

This “framing” prepares the patient to understand and remember the information which follows.

- Use lay language. It’s easy for professionals to speak in technical words or jargon. Even simple words/expressions may be misunderstood. For example, some parents don’t know what it means to “push fluids” for a sick baby.

- Limit information to 3 - 5 points. This is all a person can typically remember, particularly when ill, in pain, or stressed.

- Make instructions concrete and specific rather than general. For example, recommend specific foods rather than food categories. Or, work with the patient to determine 3 specific times a day to take medication rather than just “3 times a day.”

- Check in with the patient/client. See how they feel about the instructions you’re giving and whether they are able to do what you’re recommending. Provide reassurance and support as appropriate.

- Repeat important points.

- Have the client/patient repeat information back to you. You could say “Ms. Jones, I teach so many patients that I sometimes leave things out. Could you please tell me back what I’ve asked you to do?” Or, “Ms. Jones, could you tell me how you will explain what we’ve talked about with your family?” The point is for you to assume the responsibility for patient learning, not to make the patient feel stupid or put them on the spot. By checking out what the patient understands, you can fill in the missing parts.

- Use written information as back-up. Patients think they’ll remember your instructions, but they don’t! Write down important points.
Sometimes people think that simplifying written materials is mostly a matter of shorter words and sentences. Much more is involved. Consider these two articles from the Cradle Cries, a monthly newsletter aimed at mothers with children 0-12 months. It is published by the Extension Service at the University of New Hampshire. The one on the left is written at a 7th grade level, the one on the right at a 3rd grade level.

**TIPS FOR WORKING MOMS**

Research on employed parent shows that the amount of time you work away from home is not usually as important as the quality of the time you and your baby spend together. If you arrange for quality day care, and do your best to be a sensitive parent the rest of time, your baby will grow and develop just fine.

Try to make time each day to spend with your entire family. You may need to cut down on house-held chores in order to create more free time to enjoy your child.

It might help to manage your time more efficiently. Here are some ways to make the most of your time:

- Write a list of things that need to be done.
- Do the most important tasks first.
- Plan ahead to save time. Leave 10 minutes earlier for an appointment. Being early eliminates stress.
- Establish a routine for daily tasks. Routines reduce thinking time.
- Don’t hesitate to ask a family member, neighbor or friend for help.
- Try not to waste time or energy feeling guilty about tasks you can’t complete. Spending time with your baby is more important.

**Tips for Working Moms**

Parents often worry if they will harm their children if they work away from home.

Studies show it is not how much time you spend with your children, but what you do together that counts.

If you have good day care, and do your best to tune into your child’s needs when you are together, your child will do just fine.

Try to make time each day for the whole family to be together.

You may decide to cut down on some of your housework to save more time to be with your family.

Here are some things other mothers say save time. Check the ones you will try:

- Write a list of what needs to be done.
- Plan around the times you’ll do first.
- Leave 10 minutes early to get where you’re going. Being early means less stress.
- Make a plan for daily chores. That will save thinking about them each day.
- Tell your family, neighbors or friends when you need help.
- Don’t worry if you can’t get everything done. Babies grow up. Chores can wait.

Note that both of these use adult language. What else was changed besides the words? Try to find 4 significant changes. Then, turn the page upside-down to check your answers.