

Developing Effective Educational Materials Using Best Practices in Health Literacy

Abstract

Health literacy is emerging as a leading issue affecting U.S. consumers' health. It has been shown to be a stronger predictor of a person's health than age, income, employment status, education level, or race. To best meet the health literacy needs of consumers, Extension educators can use best practice guidelines for improved health communications to develop effective educational materials, which include getting to know the target audience; sending clear, actionable message(s); and using appropriate formatting with meaningful visuals. Extension educators can apply these best practice guidelines to better promote health-related behaviors and communicate science more effectively to consumers.

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Introduction

Translating complicated scientific concepts into meaningful and actionable nutrition and health messages for community members can be challenging for Extension educators. Why? According to the 2006 National Assessment of Adult Literacy, only 12% of consumers have been shown to have proficient health literacy skills required to understand health information (Kutner, Greenburg, Jin, & Paulsen, 2006). Health literacy can be defined as, "the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions" (Kindig, Panzer, & Nielsen-Bohlman, 2004). Health literacy is emerging as one of the most important cross-cutting issues to affect health in the U.S. Recent research has shown that health literacy is a stronger predictor of a person's health than age, income, employment status, education level, or race (Weiss & Association, 2007).

It is therefore essential for Extension educators to understand the health literacy needs of their target audience in order to effectively communicate health information. Using best practices in health literacy will assist Extension educators in developing evidence-based and consumer-friendly education materials designed to impact health-related behaviors.

Strategies for Improving Health Literacy

The Centers for Disease Control and Prevention's *Simply Put: A guide for creating easy-to-understand materials* (2009) outlines three key steps to improve health literacy.

1. **Get to Know the Target Audience.**

While it may be tempting to begin drafting a "great idea" for an educational piece, educators should begin by understanding the target audience, their characteristics, needs, attitudes, behaviors, and preferences. The following strategies will assist educators in meeting the audience's needs most effectively:

- Identify **key characteristics** of the target audience including: gender, race/ethnicity, beliefs, behaviors, culture, literacy skills, and current knowledge of the identified topic.
- Conduct a **needs assessment** to evaluate the target audience's health needs and concerns. This can be a formal survey or informal discussions with an agency head and/or members of the target audience.
- **Pre-test** educational materials with the target audience and modify based on feedback.

Once the audience's needs are identified, targeted educational materials, with clear and actionable messages, can be developed to meet the literacy needs of the audience.

2. **Send Clear, Actionable Message(s).**

Educators should select an appropriate message to which the target audience can relate and understand. The following outlines best practices to develop a clear message to maximize consumers' understanding of a health behavior or topic.

- Limit the number of messages.
 - Give the most important message first.
 - Discuss only one idea at a time.
 - Provide no more than three or four main ideas.
- Tell the audience what to do.
 - Use an *active voice* describing how the audience can take an action to accomplish the desired health behavior.
 - Use a *positive tone* focusing on what the target audience should do, instead of what they should not do.

- Provide numbered or bulleted lists to describe actions or sequences of actions.
- Choose words carefully.
 - Use short sentences and words when possible (One or two syllable words, eight or fewer words in a sentence, three to five sentences per paragraph).
 - Use culturally appropriate and familiar words.
 - Avoid unnecessary abbreviations.
 - Limit use of technical or scientific language.

Overall, educators should strive to create a clear message that consumers can understand by: limiting the number of key messages; providing specific examples of how a person can perform a health behavior; and choosing words that use plain language (Perry et al., 2012). A needs assessment will help identify key components of your message, such as culturally appropriate and familiar words for your audience. The table illustrates the application of these best practices.

Table.

Best Practices for Improved Health Communication

Considerations	Common Practice	Best Practice
Voice	<i>Passive voice:</i> 150 minutes of exercise should be completed by healthy adults each week. <i>Directive voice:</i> Exercise for 150 minutes each week.	<i>Active voice:</i> It is recommended that healthy adults exercise for 150 minutes each week.
Tone	<i>Negative tone:</i> Do not eat foods high in added sugar.	<i>Positive tone:</i> Substitute high sugar foods with healthier options, such as fruits, yogurt, or nuts.
Wording	<i>Complex/unfamiliar:</i> Cardiovascular disease	<i>Simple/familiar:</i> Heart disease
Technical Jargon	<i>Technical:</i> Lactation	<i>Lay:</i> Breastfeeding

3. Use Appropriate Formatting and Meaningful Visuals.

Educators should aim to capture the attention of consumers and increase their understanding of the message by creating visually appealing materials. The following are best practices for selecting an

appropriate font and meaningful visuals.

- Text appearance
 - Select font sizes that are between 12 and 14 points.
 - Headings should be at least 2 points larger than the main text size.
 - Select fonts that are easy to read. Use Serif fonts (e.g., Times New Roman) for the body of the text and Sans Serif (e.g., Tahoma) fonts for headings and subheadings to increase readability.
- Meaningful visuals
 - Select descriptive and/or actionable images to illustrate a desirable health-related message or behavior.
 - Make images culturally relevant and sensitive for the target audience.
 - Include brief captions to describe image(s). This will reinforce key concepts and enhance consumers' understanding.
 - Choose quality images with high resolution.

After selecting an appropriate font, use meaningful images to increase the consumer's comprehension of the topic. Pictures demonstrating how to perform a new behavior with a brief caption can increase consumer's comprehension and memory of how to engage in that behavior, especially for low-literate audiences (Houts, Doak, Doak, & Loscalzo, 2006; Miller 2001).

Conclusion

By taking the time to get to know your audience, sending a clear, actionable message, and using appropriate formatting with meaningful visuals, Extension educators can develop impactful educational materials designed to meet the health literacy needs of consumers. Best practices in health literacy can be used by Extension educators to promote health-related behaviors and communicate science more effectively to the consumer.

Using best practices in health literacy not only aligns with Extension's mission of "providing communities with practical applications of research knowledge," but also supports the National *Action Plan to Improve Health Literacy* (Baur, 2010). When Extension educators apply best practices in health literacy to increase readability and understanding of Extension materials, consumers can effectively improve their health-related knowledge and behaviors.

For a more detailed description of how to use best practices in health literacy for developing educational materials visit CDC's Simply Put guide (2009), which can be accessed online at: http://www.cdc.gov/healthliteracy/pdf/Simply_Put.pdf.

References

- Baur, C. (2010). *National Action Plan to Improve Health Literacy*: US Department of Health and Human Services, Office of Disease Prevention and Health Promotion.
- Centers For Disease Control and Prevention. (2009). Simply put: A guide for creating easy-to-understand materials. *Atlanta, GA: US Department of Health and Human Services*. Retrieved from: http://www.cdc.gov/healthliteracy/pdf/Simply_Put.pdf
- Perry, C., Albrecht J., Litchfield R., Meysenburg R., NgYin Er, I., Lum, A., et al. (2012). The development of a food safety brochure for families: The use of formative evaluation and plain language strategies. *Journal of Extension [On-line]*, 50 (1) Article 1RIB3. Available at: <http://www.joe.org/joe/2012february/rb3.php>
- Houts, P. S., Doak, C. C., Doak, L. G., & Loscalzo, M. J. (2006). The role of pictures in improving health communication: A review of research on attention, comprehension, recall, and adherence. *Patient Education and Counseling*, 61(2), 173-190.
- Miller, J. (2001). How to write low literacy materials. *Journal of Extension [On-line]*, 39 (1) Article 1TOT2. Available at: <http://www.joe.org/joe/2001february/tt2.php>
- Kindig, D. A., Panzer, A. M., & Nielsen-Bohlman, L. (2004). *Health literacy: A prescription to end confusion*: National Academies Press.
- Kutner, M., Greenburg, E., Jin, Y., & Paulsen, C. (2006). The health literacy of America's adults: Results from the 2003 National Assessment of Adult Literacy. NCES 2006-483. *National Center for Education Statistics*.
- Weiss, B. D., & Association, A. M. (2007). *Health literacy and patient safety: Help patients understand: manual for clinicians*.

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