PLAIN LANGUAGE: A PROMISING STRATEGY FOR CLEARLY COMMUNICATING HEALTH INFORMATION AND IMPROVING HEALTH LITERACY

Purpose statement

This issue brief describes why plain language is a promising strategy for clearly communicating health information and improving health literacy.

Introduction

The brief shows how plain language helps adults understand health information by

- *reviewing plain language and health literacy terms;*
- *describing writing and speaking plainly;*
- *dispelling the myths of plain language and low literacy;*
- *discussing certain communication barriers that plain language alone cannot overcome; and,*
- *summarizing the evidence on plain language as a promising strategy for clearly communicating health information and improving health literacy.*

In its recent report on health literacy, the Institute of Medicine (IOM) finds that there is a major mismatch between the health information people receive and what they understand. But this lack of understanding is not primarily the fault of individuals receiving the information; nor is it solely or primarily the result of poor or limited literacy skills. According to the IOM, "Even highly skilled individuals may find the [healthcare] systems too complicated to understand, especially when these individuals are made more vulnerable by poor health."(1)

Four reasons why health information is difficult to use and understand are:

- the complexity of information presentation;
- the use of unfamiliar scientific and medical jargon;
- the demands of navigating the healthcare system, including locating providers and services and filling out forms; and,
- the difficulty that people of all literacy levels have in understanding information when confronted with their own or a loved one's stressful or unfamiliar situation.

For example, the health literacy capacities of a 50-ish English-speaking woman with two years of college and a head cold who is buying a familiar over-the-counter medicine *are different in that moment* from the capacities of that same woman when she undergoes diagnostic tests, learns she has breast cancer, and has two different treatment options, neither of which she really understands.

The link between literacy skills and health literacy

Even though everyone may struggle to understand health information at times, the concept of "health literacy" recognizes that most health information is even more challenging for people with limited literacy skills. According to a 1992 study by the U.S. Department of Education, about 90 million English-speaking adults have literacy skills in the two lowest levels, affecting their ability to carry out everyday tasks. People with certain characteristics are more likely to have trouble reading and understanding health-related information. These include older adults, racial and ethnic minorities, people with low education or income levels, non-native speakers of English, and people in poor health (1).

The IOM and other organizations propose using plain language to address the needs of those with limited literacy skills, as well as those with limited health literacy skills. The idea is that plain language helps people understand health information because the writing style is clear, concise, organized, and jargon-free. Documents written in plain language are less complex and therefore easier for everyone to understand, including people who have limited literacy skills, limited health literacy skills, or both.

Defining the terms

People in the healthcare community often use the terms plain language and health literacy interchangeably or to refer to many of the same issues because they share a common interest in clear communication. One important shared concept is that people should be able to both understand and use the information presented. However, while the terms have points of intersection, they are not interchangeable. Therefore, it is useful to define and explain them.

Health Literacy – The widely accepted definition of health literacy comes from a 2000 National Library of Medicine bibliography (2), and was adopted by both *Healthy People 2010* and the IOM. Health literacy is the "degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions." This definition supports the *Healthy People 2010* Health Communication Objective 11-2: Improve the health literacy of persons with inadequate or marginal literacy skills (3).

It's crucial to recognize that health literacy capacities are broader than reading and writing skills, and include the ability to:
- comprehend complex vocabulary and concepts including medical terms or probability and risk;
- share personal information with providers about health history and symptoms;
- make decisions about basic behaviors like healthy eating and exercise;
- engage in self-care and chronic-disease management; and
- navigate a complex healthcare system from walking hospital corridors to filling out insurance forms (4).

These skills must also include understanding numerical data such as percentages, ratios, and measurements, which can be crucial to making informed medical choices. Presenting quantitative data clearly can also help people understand how to weigh the risks and benefits of treatment options and prevention strategies.

Plain Language – This term was first used in the United States in the early 1950s. The federal government's most recent plain-language initiative began in 1998, when President Clinton issued a *Memorandum on Plain Language in Government Writing* to the heads of executive departments and agencies. He said, "We are determined to make the Government more responsive, accessible, and understandable in its communications with the public. By using plain language, we send a clear message about what the Government is doing, what it requires, and what services it offers. Plain language saves the Government and the private sector time, effort, and money." (5)

There is no one generally accepted definition of plain language or plain English. But, most experts in the field would agree that a plain language document is one in which people can:
- find what they need,
- understand what they find, and
- act appropriately on that understanding (6).

Writing plainly

Key elements of plain language are to:
- organize information so the most important behavioral or action points come first;
- break complex information into understandable chunks;
- use simple language or define technical terms; and,
- provide ample white space so pages look easy to read.

In addition to the key elements, there are dozens of plain language guidelines and techniques such as using short sentences and active voice when possible (7) (See the Addendum). Document design principles highlight the importance of organization and format and enhance the impact of plain language. Good document design is "the act of bringing together prose, graphics…and typography for purposes of instruction, information or persuasion. Good document design enables people to use the text in ways that serve their interest and needs."(8) Although findings are not consistent, research and experience do suggest that plain language may be remembered better and be more persuasive when it is enhanced with graphics and other visuals (9, 10).

The specifics of plain language depend on the information needs of the audience, so it is critical to test materials with the intended audience in order to implement plain language effectively.

Speaking plainly

Health information is also communicated verbally, especially between patient and healthcare provider. Because some people learn better by listening than by reading, speaking plainly is just as important as writing plainly. Many of the same plain-language techniques that make the written word understandable also work with verbal messages. These include avoiding jargon and using every-day examples to explain technical or medical terms the first time they are used.

In interpersonal communication situations, plain language combined with other good communication practices can increase the understandability of information. For instance, research shows that communication between healthcare providers and patients can be enhanced

by using the "teach-back" method (11). People getting the health information are asked to restate it in their own words -- not just repeat it -- to ensure that it is understood and remembered. When understanding is not accurate or complete, the sender repeats the process until the receiver is able to restate the information needed. This iterative process is called the "interactive communication loop." Patients can also be asked to demonstrate their understanding of critical concepts by acting out a medication regimen or showing how they would, for example, check and record their blood sugar levels (12,13).

Dispelling the myths of plain language and low literacy

Plain language is not "dumbing down."
Sometimes, professionals are concerned that using plain language will over-simplify information to the point where it is inaccurate or worthless.
- Plain language is not anti-intellectual, unsophisticated, drab, or dumbing down. "Plain language has to do with clear and effective communication -- nothing more or less."(14) It is the style of Abraham Lincoln, Mark Twain, and Winston Churchill. As plain language expert Bryan Garner explains: "Plain words are eternally fresh and fit…capable of great power and dignity." Writing simply and directly only looks easy -- it takes skill and work and time to compose (14).
- Plain language is not just about vocabulary or grade level. Writing to a certain grade level does not necessarily ensure that the message is in plain language or understood by the intended audience, so all materials should be evaluated for understanding with the intended users, regardless of grade-level score.

People with low literacy skills are **not** illiterate.
A person who has limited or low literacy skills is not illiterate. This fact is not always well understood. Therefore, it is important to clarify the differences among the terms literacy, low literacy, and illiteracy.
- **Literacy** is defined by the National Literacy Act of 1991 as "an individual's ability to read, write, and speak in English and compute and solve problems at levels of proficiency necessary to function on the job and in society, to achieve one's goals, and to develop one's knowledge and potential." (15)
- **Low Literacy** is a limited ability to do what is defined above as literacy.
- **Illiteracy** means being unable to read or write (16).

Many people still believe the following myths about low literacy, and it's important that they be refuted with evidence (9).
- *Myth: People who have limited literacy skills are dumb and learn slowly, if at all.*
  Fact: Most people with low literacy skills have average IQs and function quite well by compensating in other ways. For example, some may invite a family member to accompany them to the doctor's office to help them fill out necessary forms.
- *Myth: People will tell you if they can't read.*
  Fact: Since there is a strong social stigma attached to limited reading and writing skills, nearly all nonreaders or poor readers will seek to conceal this fact. They will use ruses such as "I forgot my glasses" or "I'll have to take this home for my husband (or wife) to see it first."

- *Myth: Years of schooling is a good measure of literacy level.*
  Fact: Years of schooling tell what people have been exposed to, not what reading skill they acquired. Surveys show that, on average, adults currently read three to five grade levels lower than the years of schooling completed.

Everyone has difficulty understanding health information at some time.
People can be very well educated and highly literate in their area of expertise, and still not fully understand complex medical information. Virtually everyone has experienced receiving health information about themselves or a loved one that caused confusion and uncertainty. Regardless of one's literacy level, when a healthcare provider uses unfamiliar, technical language or delivers bad news, it is difficult to fully comprehend what is being said.

By moving past the myths, senders and receivers break down barriers and enhance the likelihood of understanding each other.

When plain language isn't enough

To ensure that the intended users of health information understand it, communicators must know how to reach them. Writing and speaking clearly are critical steps to achieve that goal. At the same time, communicators must also be aware of additional barriers to understanding. Intended users of the information may speak a different language or be unfamiliar with the situation; there may be critical cultural differences between sender and receiver; and intended users may have communication or development disorders.

Limited English Proficient speakers – Plain English won't necessarily help individuals who do not speak English as their primary language and who have limited ability to read, write, speak, or understand English. Simply translating health information, such as written medical instructions, into a person's native tongue does not guarantee that non-English speakers will be able to read or understand it. To better ensure understanding, health information for people with limited English proficiency needs to be communicated plainly in their primary language, using words and examples that make the information understandable in their language.

Cultural differences – Culture affects how people understand and respond to health information. In addition to the use of plain language, the cultural competency of health professionals can contribute to health literacy. The Office of Minority Health (OMH), U.S. Department of Health and Human Services, defines cultural competency as the ability of health organizations and practitioners to recognize the cultural beliefs, values, attitudes, traditions, language preferences, and health practices of diverse populations, and apply that knowledge to produce a positive health outcome. Cultural competency includes communicating in a manner that is culturally and linguistically appropriate.

Lack of knowledge and experience – People with limited health literacy skills often also lack knowledge or have misconceptions about critical health topics, such as the body, its functioning, and the nature and cause of disease. Without accurate and appropriate knowledge, they often fail to understand the importance of lifestyle factors -- diet and exercise, for example. They may read

commonly used directions, like "take on an empty stomach," and not understand what the terms mean (17). Even with clear directions, if the audience has no context or prior experience, they can still misunderstand. For example, when instructions say, "Give two drops, three times a day for earache," it may not be clear whether the drops should be swallowed or placed in the ear.

Communication and developmental disorders – Plain language and other clear communication techniques may not be effective or appropriate for audiences with communication or developmental disorders. Approximately one in six Americans has a disorder or difference in communication resulting in unique challenges.[1] There are also challenges for individuals suffering with mental health diseases and disorders that impair or obstruct clear communication, no matter how plain the language. These individuals will require strategies that are tailored to their needs and abilities. Developing improved ways to communicate health information to these audiences is a crucial component to addressing health literacy.

Demonstrating that plain language works

The best way to find out if plain language documents will work for intended users is to test the documents with those users. This is called usability testing. Usability tests show that plain language techniques help writers and document designers communicate clearly with the general public as well as people with limited health literacy skills (8). People who are given documents that are written with the audience in mind and that employ the elements of plain language and good document design find them easier to understand and use (18,19).

Research supporting plain language principles can be found in the following.
- *Guidelines for Document Designers,* published in 1981 by the American Institutes for Research, continues to be one of the best sources of plain-language research. It cites research for each of the 25 guidelines presented, such as *use information headers*, *use the active voice*, and *avoid unnecessary and difficult words*. The authors cite studies from several disciplines: cognitive psychology, linguistics, human factors, instructional and educational psychology, psycholinguistics, and typography (20).
- The revised edition of *Making Health Communication Programs Work is* the result of 25 years of evaluating communication programs. It affirms the value of using specific communication strategies to promote health and prevent disease. This book is a widely accepted tool for promoting public health (21). It provides guidelines, including many plain language techniques, for developing materials that intended audiences can understand, accept, and use. (See Addendum for links to sample guidelines.)
- The Communication Technologies Branch of the National Cancer Institute developed *Research-Based Web Design & Usability Guidelines* to help those involved in the creation of Web sites base their decisions on the current and best-available evidence. In the section, "Writing Web Content," a number of plain language techniques are included in the summary of research-based findings. (See Addendum) (22).

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[1] These include, but are not limited to: deafness, hearing loss, language delay, developmental delay, autism spectrum disorders, aphasia (the language disorder associated with stroke that can affect infants or adults), specific language impairment, stuttering, speech perception disorders, auditory processing disorder, spasmodic dysphonia, and traumatic brain injury.

- *Teaching Patients with Low Literacy Skills* includes the Suitability Assessment of Materials (SAM) tool. This is a criteria-based evaluation instrument that takes less than an hour to apply to materials that provide healthcare information. The 22 SAM evaluation criteria are based on research findings from adult education, health education, and other fields (9).

Where plain language is an accepted practice

Plain language is not recommended just for health information. Its use is also being encouraged:

- In government agencies – Many agencies in the federal government are encouraging the use of plain language for both internal and external communication. Of special note, the Office of Management and Budget issued its Policies for Federal Public Websites in 2004 (23). It includes the recommendation to "Use plain language – words the website's typical visitor can understand – in writing your website." (www.firstgov.gov/webcontent). These policies will have a far-reaching effect because many federal agencies, such as the National Institutes of Health and the Food and Drug Administration, have Web sites that are trusted sources of health information. In addition, many state governments, including California, Washington, New Jersey and Texas, are also championing the use of plain language in official documents (24, 25).
- In the private sector – Using plain language is also becoming an accepted practice in other sectors, including insurance, finance, and the law. This should lead to more understandable health-related documents, notices of privacy practices, and health insurance policies.
- Around the globe – The plain-language movement is flourishing in countries around the world including English-speaking countries like England and Australia, and non-English speaking, including Sweden, Spain, France and Mexico. (See Addendum) Canadians have a long-standing interest in health literacy and plain language in both of their official languages – English and French. Nations striving for clear communication share a common goal – that readers understand the message the first time they read it. But writing styles reflect the culture, and the style must be modified when editing for international or multicultural markets. One culture's plainness, for example, may be another culture's rudeness (26).

Conclusion: Plain language makes health information easier to understand

Our nation faces an enormous challenge to ensure that people with low health literacy skills have the opportunity to receive and understand the health information they need to make sound decisions. Limited health literacy is a complex communication and information problem that requires multiple approaches and methods to realize improvement. This brief examines plain language and its contribution to improving health literacy. Research and experience demonstrate that plain language is an essential element of clear communication. Although more research is needed to determine the most effective techniques to clearly communicate with all consumers and patients, existing research shows that plain language is a promising strategy to address the challenge.

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ADDENDUM

Resources

Making Health Communication Programs Work - The chapter entitled: Developing and Pretesting Concepts, Messages and Materials provides guidelines to help develop materials that intended audiences will understand, accept and use. It also addresses how to develop effective print material for low-literacy audiences. http://www.cancer.gov/pinkbook/page6

Clear & Simple: Developing Effective Print Materials for Low-Literate Readers – Low-literacy experts have identified key principles for developing effective materials for people with low literacy skills. These principles are summarized in the checklist found in this publication at Step 4: Develop Content and Visuals, http://www.cancer.gov/aboutnci/oc/clear-andsimple/page5.

Plain Language Action and Information Network (PLAIN) - Federal employees remain at the center of the plain language movement in the United States. They created a Web site to help others learn about and use plain language. *Writing Reader-Friendly Documents* is its major guidance document "…to help you write plain-language documents that your readers understand on first reading." http://www.plainlanguage.gov/howto/guidelines/reader-friendly.cfm. Several other resources can be found at http://www.plainlanguage.gov/howto/guidelines/index.cfm. Quick tips are found at http://www.plainlanguage.gov/howto/quickreference/index.cfm.

Research-Based Web Design & Usability Guidelines translates research into practical, easy to-understand guidelines to help those in charge of federal Web sites save time and resources. Chapter 15, Writing Web Content, http://usability.gov/pdfs/chapter15.pdf, recommends using many plain language techniques, such as:
- When preparing prose content for a Web site, use familiar words and avoid the use of jargon.
- If acronyms and abbreviations must be used, ensure that they are clearly understood by typical users and defined on the page.
- Minimize the number of words in a sentence and sentences in a paragraph.
- Use upper- and lower-case letters appropriately.
- Write in an affirmative, active voice.

Teaching Patients with Low Literacy Skills, 2nd Edition, by Cecilia and Leonard Doak and Jane Root, is intended for healthcare practitioners and those who teach them. It provides ideas, methods, and examples on how to simplify health instructions so that they are understood better by patients at all literacy levels – including those with low literacy skills.

U.S. Department of Health and Human Services Websites contain a wealth of health and literacy resources, including plain language:
- Health Resources and Services Administration (HRSA)
  http://www.hrsa.gov/quality/resources.htm
- National Institutes of Health (NIH)
  http://www.nih.gov/icd/od/ocpl/resources/improvinghealthliteracy.htm

Understanding Health Literacy and its Barriers, from the National Library of Medicine, provides 651 citations from a variety of disciplines to highlight resources available to medical, health, education, and communication professionals as they tackle this important national challenge. Selections are from health education, communication, risk, compliance, informed consent, professional-patient interaction, cultural competence, and health disparities research. http://www.nlm.nih.gov/pubs/cbm/healthliteracybarriers.html

Low Literacy, High Risk: The Hidden Challenge Facing Healthcare in California shares the results of a pilot study that found low literate adults in California are marginalized by the healthcare system because the process of obtaining healthcare requires specialized knowledge that only highly literate individuals can easily and consistently access. One policy implication arising from this study is that plain language materials should be available to patients at every stage of the healthcare process, and that doctors should use plain language. A summary of the study can be found at http://www.cahealthliteracy.org/pdffiles/allfourpageshealthlitreport_2.pdf

Pfizer's Principles for Clear Health Communication provides guidelines for creating health information and patient education materials that are accessible to a broad consumer audience. http://www.pfizerhealthliteracy.org/improving.html

International Plain Language Movement

Plain Language Around the Globe
In addition to the United States, several nations including Canada, Great Britain, Australia, New Zealand, Mexico, Spain, Sweden, and South Africa are encouraging its use. Some nations, such as England and Canada, have been in the forefront of this movement for decades. Others, such as Mexico, are new to this idea and enthusiastic about the need to use plain, clear language to communicate with its citizens.

In 2005, two international plain language conferences were held:
- Clarity, the international association promoting plain legal language, has members in 40 countries. Its annual conference was held in France, June 2005 www.clarityinternational.net
- Plain Language Association International has members in eight countries; it sponsored the 5th International Plain Language Conference in Washington, DC, November 2005. http://www.plainlanguagenetwork.org/conferences/2005 The conference was hosted by two U.S. organizations -- the Plain Language Action and Information Network www.plainlanguage.gov and the Center for Plain Language www.centerforplainlanguage.org