Using Plain Language to Make Diabetes Messages Clear and Simple: The National Diabetes Education Program (NDEP) as a Case Study

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Disclosures to Participants

No Conflicts of Interest/Financial Relationships to Disclose
National Diabetes Education Program

• U.S. Department of Health and Human Services program jointly sponsored by:
  – National Institutes of Health
  – Centers for Disease Control and Prevention
  – and over 200 public and private partners

• NDEP’s goal is to reduce the burden of diabetes and prediabetes by facilitating the adoption of proven approaches to prevent or delay the onset of diabetes and its complications.
NDEP’s Partnership Network

- Community for networking and exchanging ideas
- Provide input to NDEP on how to effectively reach and engage the populations they serve
- Adopt, adapt, co-brand and/or evaluate NDEP messages and materials for their audiences
- Collaborate to extend the reach of messages and resources
NDEP Materials Development Process

- Focus on translating science into plain language
- Culturally tailored, consumer friendly
- Focus group testing with target audience(s)
- Many materials are available in English, Spanish, and 15 additional languages
- Copy-right free, can be co-branded
Presenters

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Objectives

• Understand the problem of low health literacy
• Why plain language can make a difference
• Understand the barriers to comprehension
• Learn about plain language print strategies using NDEP examples
• Understand the importance of field testing materials with the target audience
Before and After Examples
Before and After Examples

It’s never too early... to Prevent Diabetes

If you had gestational diabetes when you were pregnant, you and your child have a lifelong risk for getting diabetes.

Because of this risk, you need to be tested for diabetes after your baby is born, then every one to two years. Reduce your risk by taking small steps for you and your family. If you weigh too much, you can prevent or delay type 2 diabetes if you lose a small amount of weight and become more active.

Your children can lower their risk for type 2 diabetes if they don’t become overweight. Serve them healthy foods and help them to be more active.

What is Gestational (jen-TAY-shun-al) Diabetes?
It is a type of diabetes that occurs when women are pregnant. Having it raises their risk for getting diabetes, mostly type 2, for the rest of their lives. African American, Hispanic/Latino, American Indian, and Alaskan Native women have the highest risk.

A Lifetime of Small Steps for A Healthy Family

Did You Have Gestational Diabetes When You Were Pregnant?

What You Need to Know.

Some women get diabetes when they are pregnant. Doctors call this gestational (jen-TAY-shun-al) diabetes. Most of the time, it goes away after your baby is born. Even if the diabetes goes away, you still have a greater chance of getting diabetes later in life.

Your child may also have a greater chance of being obese and getting type 2 diabetes later in life. Use this tip sheet to learn what you can do for yourself and your child.

Action steps for you

Get tested for diabetes:
- Get tested for diabetes 6 to 12 weeks after your baby is born. If the test is normal, get tested every 3 years. If the test results show that your blood sugar (glucose) is higher than normal but not high enough to be diabetes, also called prediabetes, get tested for diabetes every year.
- Talk to your doctor about your test results and what you can do to stay healthy.
- If your test results show that you could get diabetes and you are overweight, ask your doctor about what changes you can make to lose weight and for help in making them. You may need to take medicine such as metformin to help prevent type 2 diabetes.
Health Literacy – The Official Version

• The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions. (Institute of Medicine, 2004)
Health Literacy –
The Easy-to-Understand Version

- Health Literacy is the ability to get, read, understand, and use health information to make good health care decisions.
Examples of Health Literacy Skills

• Navigate complex health care system: choosing insurance, hospital, and health care providers
• Find and use health information on the web
• Understand risks and benefits of procedures
• Ask questions of health care providers
Health Literacy Skills – Results from the 2003 NAAL Study

• 36% or 77 million American adults have below basic or basic health literacy skills.

• Only 12% or 25 million American adults have proficient health literacy skills.
Why Care: Research Shows People with Low Health Literacy Skills

- Difficulty reading and understanding medication instructions, prescription labels, and informed consent forms
- Less knowledge of how to manage chronic diseases such as diabetes, hypertension, and asthma
- More likely to be hospitalized
- More trips to the emergency room
Reading Levels Of Health Education Materials

• Research indicates most health education materials written at 10th grade reading level and higher.
Problem: The Gap

- Mismatch between reading abilities of American adults and reading levels of most print materials.
Vulnerable Populations

- People with health conditions
- Elderly
- Poor
- Immigrants
- Minorities
Everyone Experiences Low Health Literacy

- Stress, illness, and fear affect comprehension and our ability to process information.
One Possible Solution: Creating Easy-to-Read Materials

- Use of plain language strategies to create print materials that people can read, understand, and use.
Plain Language Definition

“Communication your audience can understand the first time they read or hear it.” (www.plainlanguage.gov)
Plain Language Is

- Easy-to-read
- Consumer-friendly
- Reader-centered
- Appealing
- Clear
Knock, Knock!
Who’s There?
Understanding Barriers to Comprehension
Health Literacy Video
“Have you ever been arrested or convicted for an offense or crime involving moral turpitude or a violation related to a controlled substance; or been arrested or convicted for two or more offenses for which the aggregate sentence to confinement was five years or more; or been a controlled substance trafficker, or are you seeking entry to engage in criminal or immoral activities?”

Yes  No
Try Pronouncing These

- Gastroschisis
- Hypoxic ischemic encephalopathy
- Per favore, chiami un dottore
- Paniolo
The Burden of Numbers

• Understanding numbers means having the ability to interpret quantitative-based health care instructions, interpret statistics, and understand the concept of risk.

• Yet about 55% of American adults have marginal quantitative literacy skills.
Reducing the Burden of Numbers

• Use concrete examples to talk about numeric concepts.
• Compare size or weight to familiar things, such as “3 ounces of meat which is about the size of a deck of playing cards.”
• Show visuals and/or actual items that illustrate how much food is in a portion size.
• Explain what 9 out of 10 means by showing human figures: nine in blue color and one in white color.
Instructions and Numeracy

• Before
  – Remember to accumulate 30 minutes or more of moderate physical activity on most — preferably all — days of the week.

• After
  – Try to be active. Experts suggest it’s best to be active for 30 minutes or more each day. You can walk, run, ride a bike, garden, or do yoga.
Summary of Barriers

• Complex language/unfamiliar words
• Long sentences
• Difficult and/or abstract concepts
• Complex numerical concepts and tasks
• Meaning unclear, don’t know how to take recommended actions
Examples Of Print Materials
Terms and Conditions
1. You must use the Starwood Preferred Guest Credit Card to complete $500 of eligible spending by the end of your first three months of Cardmembership, based on the date of your Card approval. 15,000 Starpoints will be credited to your account 8–12 weeks after you reached the spend threshold. Offer expires 3/13/2012. If your application is approved after this date, you will not be eligible for the $500 spend incentive bonus offer, as well as the Additional Card bonus offer.
2. Three nights are based on three nights in a standard room in a Category 2 property. Starpoints required for a free night range from 2,000 Starpoints for a weekend night in a standard room at a Category 1 property to 30,000 Starpoints for a weekend night in a standard room at a Category 7 property. Category 7 properties that are all suites, villas, or have mandatory board require higher Starpoint redemption. For complete information on reward stays, visit www.starwood.com.
3. Eligible spending means purchases for goods and services minus returns and other credits. Eligible spending does NOT include fees or interest charges; balance transfers; cash advances; purchases of American Express® Gift Cards or Traveler’s Checks; and, purchases of other cash equivalents. American Express reserves the right not to award any 3,000 points for transactions we determine are not made with the good faith intention of consuming the item charged.
4. You will receive one additional Starpoint for each U.S. dollar of Eligible Spending charged on your Card account at participating Starwood properties, and at standalone retail establishments and online stores that, in each case, are wholly owned by Starwood Hotels & Resorts Worldwide, Inc. Starwood hotels and properties do not receive any additional Starpoints as a Starwood Preferred Guest member for hotel stays and spend.
5. Starpoints never expire as long as you have Starpoints activity at least once every 12 months. Starpoints earned through Starwood Vacation Ownership are excluded. 6. 1,000 bonus Starpoints will be awarded to your Starpoints Account 8–12 weeks after the first purchase on an approved Additional Starwood Preferred Guest Credit Card submitted with this application. The Additional Cardmember must make their first purchase with the Starwood Preferred Guest Credit Card within one year of Card approval. Bonus offer applies to first Additional Card added to the application only. 7. Offer is valid at participating Starwood Hotels & Resorts in Hawaii and French Polynesia. Offer is valid for stays booked between January 3, 2012 through December 23, 2012 and for stays completed between January 3, 2012 through December 25, 2012. Advance reservations are required and may be made online or by calling 888-625-4688 and mentioning Rate Plan SPG35AX. Offer may only be booked with a valid American Express® Card. American Express Card may be charged at the time of booking, varies by property. Resort credit of $70 or $100 varies by property. $100 resort credit offered at: Sheraton Waikiki, The Royal Hawaiian, Waikiki; Moana Surfrider, A Westin Resort & Spa; Waiuku Beach; Sheraton Waikiki Resort & Spa; The Westin Maui Resort & Spa; The Westin Kaanapali Ocean Resort Villas; Sheraton Kauai Resort; The St. Regis Princeville Resort; The Westin Princeville Ocean Resort Villas; Sheraton Kauai Bay Resort & Spa; St. Regis Bora Bora. $75 resort credit offered at: Sheraton Princess Kaiulani; Le Méridien Bora Bora; Le Méridien Tahiti. A minimum stay of five consecutive nights is required. A maximum of 3 rooms may be booked per SPG member at one time. All promotions are subject to this Starwood Preferred Guest program terms and conditions, which are subject to change without notice, and can be found at SPG.com. The complimentary fifth night must be used in conjunction with a fully paid four night stay. There are no credits for any unused free nights if the guest checks out early. A fifth night free will be accumulated for each paid consecutive four nights at the resort on rate plan SPG35AX. Reservation confirmation will not reflect the complimentary fifth night; that adjustment will be made at the property level at check-out. Rates are per room, per night, based on single/double occupancy and availability at time of reservation and do not include additional per room, per night charges that may be imposed including resort charges or state/local taxes. A limited number of rooms may be available at these rates. Blackout dates and other restrictions may apply. Offer not applicable to signatures or promotions. Not to be combined with other offers or promotions and subject to change. Not responsible for emissions or typographical errors. Void where prohibited by law. 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Category 7 properties that are all suites, villas, or have mandatory board require higher Starpoint redemption. For complete information on reward stays, visit www.starwood.com. 10. No blackout dates apply to Free Night Awards, which apply to standard rooms only, as defined by each participating property; contact this property before booking to check availability. 11. For a list of participating airlines, transfer ratios and full program details, go to starwood.com. Participating airlines and transfer ratio are subject to change. Check with your frequent flyer program for details on redemption of airline miles. 12. $25,000 Starpoint Transfer Bonus: 6,000 Starpoints bonus is awarded only when 25,000 Starpoints are transferred as part of the same transaction. 13. Purchase Protection is administered by the American Express® Card. Coverage is limited to 90 days from purchase, up to $500 per item and up to a maximum of $1,000 per Cardmember account per calendar year. Shipping and handling charges will not be reimbursed. Subject to additional terms, conditions and exclusions. 14. Cardmembers insured through American Express® Card. Coverage is determined by the terms, conditions, and exclusions of Policy A00651 or Policy CPF-IND and is subject to change with notice. This document does not supplement or replace the Policy. 15. American Express® Card Baggage Insurance Plan is administered by American Express® Card. Coverage is determined by the terms, conditions, and exclusions of Policy A00652 or Policy CPF-IND and is subject to change with notice. This document does not supplement or replace the Policy. 16. American Express® Card Baggage Insurance Plan is administered by American Express® Card. Coverage is determined by the terms, conditions, and exclusions of Policy A00640 or Policy CPF-IND and is subject to change with notice. This document does not supplement or replace the Policy. **AADE14 REFRESH, RECHARGE, RENEW. 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Controlling Asthma Triggers

Asthma attacks are triggered by things in the air around you. These triggers vary from person to person, however many are common to the majority of asthma patients. Reducing exposure to your asthma triggers is one of the most important things you can do to better control your condition.

Some of the most common triggers are:
- Smoking cigarettes, cigars or pipes and secondhand smoke
- Pet dander from animals with fur or feathers
- Bedding with goose feathers
- Molds and mildew
- Dust mites
- Perfumes, scented candles, strong odors
- Wood smoke from fireplaces, wood stoves
- Cockroach debris
- Pollen and outdoor molds
- Pollution
- Cold air
- Exercise

There are other things that can trigger asthma attacks. It is important for you to learn which ones are problems for you. Talk with your doctor or asthma care nurse about identifying and eliminating your triggers.

Take Action Against Asthma

Asthma doesn’t have to put major limits on your life. With proper management, you can do just about anything. Because each case of asthma is different, treatment needs to be specific for each person. Together, you and your doctor can decide on your treatment goals and what you need to do to control your asthma.

Listed below are some important steps to your asthma management. Check off each as you complete it:
- Learn what asthma is, and why people develop it
- Create and follow an action plan
- Take medications as prescribed
- Identify and avoid triggers
- Know the early warning signs of an asthma episode
- Know how to use a peak flow meter
- Know how to identify an emergency and what steps to take
- Talk regularly with your doctor and asthma care nurse about how to manage your asthma.

We Have a New Look

With this issue, we are introducing a new look for your Asthma Care newsletter! Inside you’ll find all the information you need to better manage your condition. Designed in a new “quick-fact” format, Asthma Care will make learning how to live with asthma easier than ever. To learn more about asthma care, call our toll-free number to reach an asthma nurse.

In This Issue
- Controlling Asthma Triggers
- Focus On Allergies
- Take Action Against Asthma
- Top Questions To Ask Your Doctor
- Kid Connections
- Get Moving! Exercise And Asthma

Talk to a nurse today!

Nurses are available 24 hours a day to answer questions about your medications, your doctor’s treatment plan, or any other health concerns you might have. To speak to a nurse, call this toll-free number:
1-800-331-6221
Smoking
Smoking cigarettes puts you at much greater risk for having a stroke. Constant exposure to other people's tobacco smoke also increases your risk — even if you don’t smoke. If you’re a woman who uses birth control pills and smokes, your risk is even higher.

The bottom line is this: If you don’t smoke, don’t start. If you do smoke, quit! When you stop smoking — no matter how long or how much you’ve smoked — your risk of stroke drops.

Diabetes
Diabetes is a fasting plasma glucose (blood sugar level) of 126 mg/dL or more measured on at least two occasions. It can be controlled, but it still increases your risk for stroke. About 2.7 million African Americans, or over 11 percent, have diabetes.

People with diabetes often also have high blood pressure and high blood cholesterol, and are overweight. This increases their risk for stroke even more. If you have diabetes, work with your doctor to manage it.

Carotid or other artery disease
The carotid arteries in your neck supply blood to your brain. A carotid artery narrowed by fatty deposits may become blocked by a blood clot.

Peripheral artery disease is the term for narrowed blood vessels that carry blood to leg and arm muscles. If you have peripheral artery disease, you have a higher risk of carotid artery disease, which raises your risk of stroke.
4 Steps to Manage Your Diabetes for Life

NDEP
National Diabetes Education Program
A program of the National Institutes of Health and the Centers for Disease Control and Prevention
**B for Blood pressure.**

**What is it?**
Blood pressure is the force of your blood against the wall of your blood vessels.

**Why is it important?**
If your blood pressure gets too high, it makes your heart work too hard. It can cause a heart attack, stroke, and kidney disease.

**What is the blood pressure goal?**
Your blood pressure goal should be below 140/80 unless your doctor helps you set a different goal.
Wear shoes and socks at all times.

- Wear shoes and socks at all times. Do not walk barefoot when indoors or outside. It is easy to step on something and hurt your feet. You may not feel any pain and not know that you hurt yourself.
- Make sure you wear socks, stockings, or nylons with your shoes to keep from getting blisters and sores.
- Choose clean, lightly padded socks that fit well. Socks that have no seams are best.
- Check inside your shoes before you put them on. Make sure the lining is smooth and that there are no objects in your shoes.
- Wear shoes that fit well and protect your feet.
NDEP Plain Language Process

• Chose 10 most popular NDEP print materials.
• Used the Suitability Assessment of Materials (SAM) to assign a numerical score and rank in Superior, Adequate, or Not Suitable categories.
• Conducted supplemental plain language analysis to provide specific recommendations for changes to text, layout, design, and visuals.
NDEP Plain Language Process

• Made revisions to materials based on SAM and supplemental plain language analysis.
• Content reviewed by technical experts.
• Tested materials with target audience members.
• Made additional revisions based on audience feedback.
More About the SAM Instrument

- Designed to assess the suitability of printed health care instructions for patients.
- Evaluates literacy demand (how hard is it to read), graphics, layout, learning stimulation and motivation, and cultural appropriateness.
- Identifies problem areas that need to be corrected.
Content – Purpose

The title in the original booklet did not make the purpose clear

The revised title makes the purpose of the fact sheet clear.
The behavioral messages do not stand out on the first page.

Action steps are highlighted in the revised version.
Content – Summary

No summary is provided in the first version. A new section, “Things to remember” has been added.

Action Steps

FOR YOU:
1. Ask your doctor if you had gestational diabetes. If so, let your future health care providers know.
2. Get tested for diabetes 6 to 12 weeks after your baby is born, then every 1 to 2 years.
3. Breastfeed your baby. It may lower your child’s risk for type 2 diabetes.
4. Talk to your doctor if you plan to become pregnant again in the future.
5. Try to reach your pre-pregnancy weight 6 to 12 months after your baby is born. Then, if you still weigh too much, work to lose at least 5 to 7 percent (10 to 14 pounds if you weigh 200 pounds) of your body weight slowly, over time, and keep it off.
6. Make healthy food choices such as fruits and vegetables, fish, lean meats, dry beans and peas, whole grains, and low-fat or skim milk and cheese. Choose water to drink.
7. Eat smaller portions of healthy foods to help you reach and stay at a healthy weight.
8. Be active at least 30 minutes, 5 days per week to help burn calories and lose weight.

FOR THE WHOLE FAMILY:
1. Ask your child’s doctor for an eating plan to help your child grow properly and stay at a healthy weight. Tell your child’s doctor that you had gestational diabetes. Tell your child about his or her risk for diabetes.
2. Help your children make healthy food choices and help them to be active at least 60 minutes a day.
3. Follow a healthy lifestyle together as a family. Help family members stay at a healthy weight by making healthy food choices and moving more.
4. Limit TV, video, and computer game time to an hour or two a day.

The National Diabetes Education Program (NDEP) offers materials that can help you and your family make healthy food choices to prevent or delay type 2 diabetes. You can order a booklet for adults at mchc.org/adults/diabetes/guidebook.html or for children at mchc.org/kids/diabetes/kidsguidebook.html.

Things to remember:

- Get tested for diabetes 6 to 12 weeks after your baby is born.
- Talk steps to lower your chances of getting diabetes by being more active and making healthy food choices.
- Help your children be healthy and lower their chances of getting type 2 diabetes.

Other action steps:

- Tell your doctor or health care team if:
  • you had gestational diabetes
  • you want to get pregnant again
- Breastfeed your baby to help you lose weight and improve your child’s health.
- Make sure your history of gestational diabetes is in your child’s health record.

Change the foods you eat and be more active:

- Choose healthy foods such as:
  • fruits that are fresh, frozen, or canned in water
  • lean meats, chicken and turkey with the skin removed, and fish
  • skinless or low-fat milk, cheese, and yogurt
  • vegetables, whole grains, dried beans, and peas
- Drink water instead of juice and regular soda.
- Eat smaller amounts of food to help you reach and stay at a healthy weight. For example, eat a 3-ounce hamburger instead of a 4-ounce hamburger. There are also smaller sizes of your fast or a drink of water.
- Be more active each day. Try to get at least 30 minutes of activity, 5 days a week. It is okay to be active for 10 minutes at a time. 5 times a day. Walk with friends, swim, or garden to move more.
- Try to get back to a healthy weight. Talk to your health care team about a plan to help you lose weight slowly. Being at a healthy weight can help reduce your chances of getting type 2 diabetes.

Action steps for the whole family:

- Ask your doctor for an eating plan that will help your children grow and be at a healthy weight.
- Help your children make healthy food choices.
- Help your children be active for at least 60 minutes each day.
- Do things together as a family, such as making healthy meals or playing active games together.
- Limit TV, video, and computer game time to an hour or two a day.
- Contact your local public health department or local health department to learn where you can find safe places to be active and get healthy foods.

National Diabetes Education Program
1-888-959-NDEP (1-888-959-6337) • www.nationaldiabetes.org

Prepared by the National Institutes of Health and National Diabetes Information Clearinghouse. This project was prepared on behalf of the HHS Office of the Assistant Secretary for Planning and Evaluation. The National Cancer Institute (NCI) and the Centers for Disease Control and Prevention (CDC) reviewed this material for accuracy.

This project was developed by DCCT/EDIC, with the support of the National Institutes of Health (NIH). This project was also supported in part by the NIDDK, the American Diabetes Association, and the Juvenile Diabetes Research Foundation. The project was coordinated by the American Diabetes Association and the American Association of Diabetes Educators (AADE). The project was managed by the American Diabetes Association.

AADE14 REFRESH. RECHARGE. RENEW.
Before

• “If you had gestational diabetes when you were pregnant, you and your child have a lifelong risk for getting diabetes.”

After

• “Some women get diabetes when they are pregnant. Doctors call this gestational (ges-TAY-shun-al) diabetes.”
Literacy Demand – Common Words

Before

• Risk
• Pre-pregnancy weight
• Be physically active every day

After

• Greater chance
• Get back to a healthy weight
• Move more every day
Before
• It shows you what your blood glucose has been over the last three months. The A1C goal for most people is below 7. High blood glucose levels can harm your heart and blood vessels, kidneys, feet and eyes.

After
• What is it?
The A1C is a blood test that measures your average blood sugar level over the past three months. It is different from the blood sugar checks you do each day.
• Why is it important?
• What is the A1C goal?
Literacy Demands – Learning Aids Via Road Signs

No clear headings or subheadings used

Clear headings and subheadings are used

It’s never too early... to Prevent Diabetes

If you had gestational diabetes when you were pregnant, you and your child have a lifelong risk for getting diabetes.

Because of this risk, you need to be tested for diabetes after your baby is born, then every one to two years. Reduce your risk by taking small steps for you and your family. If you weigh too much, you can prevent or delay type 2 diabetes if you lose a small amount of weight and become more active.

Your children can lower their risk for type 2 diabetes if they don’t become overweight. Serve them healthy foods and help them to be more active.

What is Gestational (ges-TAY-shun-al) Diabetes?

It is a type of diabetes that occurs when women are pregnant. Having it raises their risk for getting diabetes, mostly type 2, for the rest of their lives. African American, Hispanic/Latino, American Indian, and Alaska Native women have the highest risk.

A Lifetime of Small Steps for A Healthy Family

有的人说，学习需要借助路标。本文将介绍学习中使用路标的好处。
Graphics – Cover

Cover graphic too busy and appears cluttered

Revised cover clear and uncluttered
Graphics – Type of Visuals

Black and white photo less appealing

Color photo more appealing

When your blood glucose is close to normal you are likely to:
- have more energy
- be less tired and thirsty and urinate less often
- heal better and have fewer skin or bladder infections
- have fewer problems with your eyesight, feet, and gums

Ask your healthcare team which type of diabetes you have.
- Learn why diabetes is serious.
- Learn how caring for your diabetes helps you feel better today and in the future.

Portion size matters.
- 1/4 grains
- 1/4 protein
- 1/2 vegetables and fruit
- Dairy (low-fat or skim milk)

When eating a meal, fill half of your plate with fruits and vegetables, one quarter with a lean protein, such as beans, or chicken or turkey without the skin, and one quarter with a whole grain, such as brown rice or whole wheat pasta.

Be active.
- Set a goal to be more active most days of the week. Start slow by taking 10-minute walks, 3 times a day.
- Twice a week, work to increase your muscle strength. Use stretch bands, do yoga, heavy gardening (digging and planting with tools), or try push-ups.
- Stay at a healthy weight by using your meal plan and moving more.

Know what to do every day.
- Take your medicines for diabetes and any other health problems even when you feel good. Ask your doctor if you need aspirin to prevent a heart attack or stroke. Tell your doctor if you cannot afford your medicines or if you have any side effects.
Graphics – Relevance

Visual unclear - not obvious that it’s a blood pressure cuff

Visual shows nurse taking blood pressure – more relevant to text

**Step 2:**
**Know your diabetes ABCs.**

Talk to your health care team about how to manage your A1C, Blood pressure, and Cholesterol. This can help lower your chances of having a heart attack, stroke, or other diabetes problems. Here’s what the ABCs of diabetes stand for:

**A for the A1C test (A-one-C).**
It shows what your blood glucose has been over the last three months. The A1C goal for most people is below 7. High blood glucose levels can harm your heart and blood vessels, kidneys, feet, and eyes.

**B for Blood pressure.**
The goal for most people with diabetes is below 130/80.
High blood pressure makes your heart work too hard. It can cause heart attack, stroke, and kidney disease.

**C for Cholesterol (ko-LES-ter-oil).**
The LDL goal for most people is below 100. The HDL goal for most people is above 40.
LDL or “bad” cholesterol can build up and clog your blood vessels. It can cause a heart attack or a stroke. HDL or “good” cholesterol helps remove cholesterol from your blood vessels.
Graphics – Tables and Charts

Original directions not detailed enough

Revised directions are clearer and more detailed

My Diabetes Care Record

Record your targets and the date, time, and results of your tests. Take this card with you on your health care visits. Show it to your health care team to remind them of tests you need.

A1C – At least twice each year

<table>
<thead>
<tr>
<th>Date</th>
<th>Result</th>
<th>My Target</th>
</tr>
</thead>
</table>

Blood Pressure (BP) – Each visit

<table>
<thead>
<tr>
<th>Date</th>
<th>Result</th>
<th>My Target</th>
</tr>
</thead>
</table>

Cholesterol (LDL) – Once each year

<table>
<thead>
<tr>
<th>Date</th>
<th>Result</th>
<th>My Target</th>
</tr>
</thead>
</table>

Cholesterol (HDL) – Once each year

<table>
<thead>
<tr>
<th>Date</th>
<th>Result</th>
<th>My Target</th>
</tr>
</thead>
</table>

Triglycerides – Once each year

<table>
<thead>
<tr>
<th>Date</th>
<th>Result</th>
<th>My Target</th>
</tr>
</thead>
</table>

Weight – Each visit

<table>
<thead>
<tr>
<th>Date</th>
<th>Result</th>
<th>My Target</th>
</tr>
</thead>
</table>

My Diabetes Care Record

How to use the record.

First read the shaded bar across the page. This tells you:
- the name of the test or check-up
- how often to get the test or check-up
- what your personal goal is (for A1C, blood pressure, and cholesterol)

Then, write down the date and results for each test or check-up you get. Take this card with you on your health care visits. Show it to your health care team. Talk about your goals and how you are doing.

A1C – At least twice each year

<table>
<thead>
<tr>
<th>Date</th>
<th>Result</th>
<th>My goal:</th>
</tr>
</thead>
</table>

Blood Pressure (BP) – At each visit

<table>
<thead>
<tr>
<th>Date</th>
<th>Result</th>
<th>My goal:</th>
</tr>
</thead>
</table>

Cholesterol – Once each year

<table>
<thead>
<tr>
<th>Date</th>
<th>Result</th>
<th>My goal:</th>
</tr>
</thead>
</table>
Layout – Page Layout

Angled text box confusing

Revised text box clearly labeled

When your blood glucose is close to normal you are likely to:
- have more energy
- be less tired and thirsty and urinate less often
- heal better and have fewer skin or bladder infections
- have fewer problems with your eyesight, feet, and gums

Why take care of your diabetes?
Taking care of yourself and your diabetes can help you feel good today and in the future. When your blood sugar (glucose) is close to normal, you are likely to:
- have more energy
- be less tired and thirsty
- need to pass urine less often
- heal better
- have fewer skin or bladder infections

You will also have less chance of having health problems caused by diabetes such as:
- heart attack or stroke
- eye problems that can lead to trouble seeing or going blind
- pain, tingling, or numbness in your hands and feet, also called nerve damage
- kidney problems that can cause your kidneys to stop working
- teeth and gum problems

Actions you can take
- Ask your healthcare team what type of diabetes you have.
- Learn where you can go for support.
- Learn how caring for your diabetes helps you feel good today and in the future.
Layout – White Space

Not enough white space

Better use of white space to increase reading ease

It's never too early... to Prevent Diabetes

If you had gestational diabetes when you were pregnant, you and your child have a lifelong risk for getting diabetes.

Because of this risk, you need to be tested for diabetes after your baby is born, then every one to two years. Reduce your risk by taking small steps for you and your family. If you weigh too much, you can prevent or delay type 2 diabetes if you lose a small amount of weight and become more active.

Your children can lower their risk for type 2 diabetes if they don’t become overweight. Serve them healthy foods and help them to be more active.

What is Gestational (jes-TAY-uh-nul) Diabetes?

It is a type of diabetes that occurs when women are pregnant. Having it raises their risk for getting diabetes, mostly type 2, for the rest of their lives. African American, Hispanic/Tutina, American Indian, and Alaskan Native women have the highest risk.

A Lifetime of Small Steps for A Healthy Family

National Diabetes Education Program www.ndep.nih.gov

Did You Have Gestational Diabetes When You Were Pregnant?

What You Need to Know.

Some women get diabetes when they are pregnant. Doctors call this gestational (jes-TAY-uh-nul) diabetes. Most of the time, it goes away after your baby is born. Even if the diabetes goes away, you still have a greater chance of getting diabetes later in life.

Your child may also have a greater chance of being obese and getting type 2 diabetes later in life. Use this tip sheet to learn what you can do for yourself and your child.

Action steps for you

Get tested for diabetes:

- Get tested for diabetes 6 to 12 weeks after your baby is born. If the test is normal, get tested every 5 years. If the test results show that your blood sugar (glucose) is higher than normal but not high enough to be diabetes, also called prediabetes, get tested for diabetes every year.

- Talk to your doctor about your test results and what you can do to stay healthy.

- If your test results show that you could get diabetes and you are overweight, ask your doctor about what changes you can make to lose weight and for help in making them. You may need to take medicine such as metformin to help prevent type 2 diabetes.
Step 3: Manage your diabetes.

Many people avoid long-term problems of diabetes by taking good care of themselves. Work with your health care team to reach your A1C goals. Use this self-care plan.

- Use your diabetes meal plan. If you do not have one, ask your health care team for one.
  - Eat healthy foods such as fruits and vegetables, fish, lean meats, chicken or turkey without the skin, dry peas or beans, whole grains, and low-fat or skim milk and cheese.
  - Keep fish and lean meat and poultry portions to about 3 ounces (the size of a deck of cards).
  - Bake, broil, or grill it.
  - Eat foods that have less fat and salt.
  - Eat foods with more fiber such as whole-grain cereals, bread, crackers, rice, or pasta.

- Get 30 to 60 minutes of physical activity on most days of the week. brisk walking is a great way to move more.
- Stay at a healthy weight by using your meal plan and moving more.
- Ask for help if you feel down. A mental health counselor, support group, member of the clergy, friend, or family member who will listen to your concerns may help you feel better.
- Learn to cope with stress. Stress can raise your blood glucose. When it is hard to remove stress from your life, you can learn to handle it.
- Stop smoking. Ask for help to quit.
- Take medicines even when you feel good. Ask your doctor if you need aspirin to prevent a heart attack or stroke. Tell your doctor if you cannot afford your medicines or if you have any side effects.

STEP 3: Learn how to live with diabetes.

It is common to feel overwhelmed and, or, angry when you are living with diabetes. You may know the steps you should take to stay healthy, but have trouble sticking with your plan over time. This section has tips on how to cope with your diabetes, eat well, and be active.

Cope with your diabetes.

- Stress can raise your blood sugar. Learn ways to lower your stress. Try deep breathing, gardening, walking a walk, meditating, working on your hobby, or listening to your favorite music.
- Ask for help if you feel down. A mental health counselor, support group, member of the clergy, friend, or family member who will listen to your concerns may help you feel better.

Eat well.

- Make a diabetes meal plan with help from your health care team.
- Choose foods that are low in calories, saturated fat, trans fat, sugar, and salt.
- Eat foods with more fiber, such as whole grain cereals, bread, crackers, rice, or peas.
- Choose foods such as fruits, vegetables, whole grains, bread and cereals, and low-fat or skim milk and cheese.
- Drink water instead of juice and regular soda.

STEP 3: Learn how to live with diabetes.

- When eating a meal, fill half of your plate with fruits and vegetables, one quarter with a lean protein, such as beans, or chicken or turkey without the skin, and one quarter with a whole grain, such as brown rice or whole wheat pasta.

Be active.

- Set a goal to be more active most days of the week. Start slow by taking 10 minute walks, 5 times a day.
- Twice a week, work to increase your muscle strength. Use strength bands, do yoga, heavy gardening, digging and planting with tools, or try pushups.
- Stay at a healthy weight by using your meal plan and moving more.

Know what to do every day.

- Take your medicines for diabetes and any other health problems even when you feel good. Ask your doctor if you need aspirin to prevent a heart attack or stroke. Tell your doctor if you cannot afford your medicines or if you have any side effects.
Learning Stimulation

Not enough emphasis on interaction and behaviors

Better emphasis on interaction and behaviors

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A Lifetime of Small Steps for A Healthy Family

National Diabetes Education Program - www.njndeq.org

Did You Have Gestational Diabetes When You Were Pregnant?

What You Need to Know.

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Action steps for you

Get tested for diabetes:
• Get tested for diabetes 6 to 12 weeks after your baby is born. If the test is normal, get tested every 3 years. If the test results show that your blood sugar (glucose) is higher than normal but not high enough to be diabetes, also called prediabetes, get tested for diabetes every year.
• Talk to your doctor about your test results and what you can do to stay healthy.
• If your test results show that you could get diabetes and you are overweight, ask your doctor about what changes you can make to lose weight and get help in making them. You may need to take medicines such as metformin to help prevent type 2 diabetes.

National Diabetes Education Program
A program of the National Institute of Diabetes andDigestive andKidney Diseases, and the Centers for Disease Control and Prevention.
Cultural Appropriateness and Visual Appeal

Too many images without strong appeal

Attractive family photo
Practice: Rewrite This Sentence

“Eat more vegetables and fruits without fats and sugars added in preparation or at the table.”

Think about:

• The main point of the sentence.
• Any problems with the sentence.
• How to rephrase the sentence to make it clearer and more personal.
Field Testing

• The purpose of field testing is to help make sure that your materials are appealing, meaningful, understandable, culturally appropriate and usable for members of your target audience.
Field Testing: What Are You Testing?

- Appeal
- Comprehension
- Usability
Field Testing: How to Test

- Individual interviews: one-on-one
- Focus groups: groups of 6 to 10
- Individual response via questionnaire completion

Did You Have Gestational Diabetes When You Were Pregnant?

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Focus Groups and Individual Interviews – Recruiting Participants

- Recruit individuals as much like the target audience as possible. Look at:
  - Culture
  - Language
  - Literacy levels
  - Education levels
  - Income levels
Field Testing: Why It’s Important

• It’s the best way to confirm that your piece is truly appealing and easy-to-read and understand.

• Almost always rewarding for both interviewer/facilitator and participants.
NDEP Field Testing for Plain Language

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Diabetes Specialist
Hager Sharp
Washington, D.C.
cbrown@hagersharpp.com
Disclosures to Participants

No Conflicts of Interest/Financial Relationships to Disclose
NDEP Plain Language Field Testing Objectives

• All publications revised for plain language were field tested with intended audience members to determine the following:
  – Audience comprehension of key messages and concepts
  – Sensitive or controversial content
  – Visual appeal
  – Cultural appropriateness
  – Audience motivation for:
    • Following recommended steps to prevent or manage diabetes
    • Seeking additional information from NDEP or health care provider
    • Sharing information with others
NDEP Field Testing Process

• Collect individual responses
  – Sample mock-ups
    • Circle difficult terms
    • Underline helpful concepts
    • Write-in suggestions
  – Questionnaire completion
Partner Collaboration for Field Testing

- **NDEP Partnership Network**
  - Local and state-level partners who work with desired audience segments on a day to day basis.

- **Sanofi Aventis**
  - Corporate partner with access to people managing diabetes (type 1 and type 2) and caregivers of people managing diabetes.
The Role and Importance of NDEP Partners in Field Testing

- Partners identify and recruit target audience members who can field test materials.
- Partners provide easier access to harder to reach audiences.
Incorporating Audience Feedback

• Take Care of Your Feet for a Lifetime
  – Concerned that the term “podiatrist” might be hard to understand.
  – Asked audience which term they preferred: “foot doctor” or “podiatrist.”
  – Most preferred the shorter term “foot doctor.”

Introduction

Work with your health care team to make a diabetes plan that fits your lifestyle and includes foot care. The team may include your doctor, a diabetes educator, a nurse, a foot doctor (podiatrist) and other specialists who can help you manage your diabetes.

Remainder of text

- Have a foot doctor trim your toenails if:
  - you cannot see or feel your feet
  - you cannot reach your feet
  - your toenails are thick or yellowed
  - your nails curve and grow into the skin
Incorporating Audience Feedback

- **4 Steps to Manage Your Diabetes for Life**
  - Concern that images only showed older adults.
  - Added photos of people between the ages of 35 and 55 years to show that management of diabetes is equally important among younger adults.
Incorporating Audience Feedback

- *Take Care of Your Heart. Manage Your Diabetes.*
  - Concern that the original publication title did not accurately reflect diabetes management for maintaining heart health.
  - Revised title and asked audience to tell us which title they preferred.

Question to Test Potential Titles  
Revised Title
Incorporating Audience Feedback

• *Portioned Plate Diagram in Multiple Publications*
  – Respondents evaluated the “well-portioned plate” diagram used across publications.
  – Suggestions included the following:
    • Enlarge text to improve readability of captions
    • Better distinguish food items on the plate
Field Test in Your Clinic

• Identify target audience for your material
• Determine approach
  – Individual
  – Focus group
  – Questionnaire
• Develop field testing questions
Sample Field Testing Questions

• Please tell me what the booklet is about.
• What do you think are the three most important things that the booklet talks about?
• What do you like about the way the booklet looks? What don't you like about the way the booklet looks?
• Were there any words or ideas in the booklet that you found confusing? If yes, which ones?
• What would you change to make the booklet easier to read and understand?
Accessing NDEP Publications Reviewed for Plain Language

- Visit www.yourdiabetesinfo.org/publications
- Materials revised for plain language are labeled with the “Reviewed for Plain Language Principles” icon.
- The icon also denotes revised materials in the NDEP publications catalog.
Available Publications

- 4 Steps to Manage Your Diabetes for Life
- Take Care of Your Feet for a Lifetime
- Choose More than 50 Ways to Prevent Type 2 Diabetes
Available Publications

• Did You Have Gestational Diabetes When You Were Pregnant? What You Need to Know.
• It’s Not Too Late to Prevent Type 2 Diabetes
• How to Help a Loved One Cope with Diabetes
Coming Soon: Newly Revised Materials

• **Taking Care of Your Diabetes Means Taking Care of Your Heart**

• **How to Help Your Children Stay Healthy: Tips to Lower Their Chances of Getting Type 2 Diabetes**
Tools You Can Use

- National Diabetes Education Program
  - www.yourdiabetesinfo.org/publications
- Plain language and health literacy resources:
  - www.plainlanguage.gov
  - www.plainlanguagenetwork.org
  - www.centerforplainlanguage.org
  - www.healthliteracy.worlded.org
  - www.cdc.gov/healthliteracy
  - www.ahrq.gov
  - www.hsph.harvard.edu/healthliteracy
  - www.cms.gov/Outreach-and-Education/Outreach/WrittenMaterialsToolkit
Take Away

• Write down three things you learned today that you will put into practice.

Come visit NDEP at Booth #108 for samples of plain language materials.
Thank you!