Writing Readable Health Messages

DIANE MANNING, PhD, MPH

HEALTH WORKERS who occasionally write for the general public or other health workers should assure themselves of positive answers to at least two questions: Is the target audience able to read the message? If so, will it want to? Although these questions are relevant for all authors, they are of particular concern to health writers because of the importance of their message. By following a few basic principles and techniques, workers who are not professional writers can help to ensure that the information contained in articles, fliers, and announcements will reach their intended audiences.

At its most basic level, reading means decoding the printed symbols. Ultimately, however, reading means comprehending the writer's intended message. In a recent article, Freimuth (1) described the technique of applying a "readability formula" to health messages as a method of determining their level of reading difficulty. A readability formula is a mathematical equation derived by regression analysis that describes the relation between the reader's skill and the author's style. For practical application in non-research situations, a two-variable

formula using word and sentence length—such as the Dale-Chall Formula, the Fog Index, or the Flesch Formula—has sufficiently high predictive validity and does not require elaborate training or computer analysis. Freimuth recommended that health writers "should be encouraged to routinely assess the readability of their writing."

Using a readability formula to determine the reading difficulty of health messages is a useful step toward ensuring reader comprehension, but it is only a beginning. Even health writing that is in an acceptable range will be too difficult for many readers, including those high school graduates whose reading skills are below the level of an "average" 11th or 12th grader. Declining reading achievement scores across the United States suggest that the number of people capable of decoding and comprehending health messages written for people at the high school level of education actually may be dwindling. Those whose educational levels are at the lower end of the academic spectrum probably are at even greater risk for the conditions many health education messages address than "good" readers.

These considerations suggest that the astute health writer should try to produce the lowest readability level that is appropriate for the target audience within the constraints of the subject matter. At first, this task may be discouraging because

the number of polysyllabic technical words used in many health messages may cause the reading level to soar. Practically speaking, a health writer who knows only how to apply a readability formula without also knowing how to reduce the reading level of a difficult piece is no further ahead. The health writer must learn techniques to reduce the number of features that make the material difficult to read and to compensate for unavoidably difficult material by improving motivation to read.

A person's ability to read is determined not only by "true" reading skills, as measured on a standardized achievement test, but also by the intensity of motivation to read a particular piece. Even good readers may not read important information if they lack the desire to do so or are "turned off" by the material. Similarly, poor readers may struggle to decode difficult material if they are sufficiently motivated. Just as writers can control some features of linguistic style to affect the readability level, they also can affect a reader's motivation by using interesting linguistic styles and formats. Readable writing is more than simplistic writing. It often entertains, just as a good speaker entertains while providing useful information.

The writer's knowledge of the target audience can be a critical factor in determining whether a piece of writing achieves appropriate readability and motivational levels.

The "lowest common denominator" approach to readability may not be the best strategy for all readers, and, in fact, the opposite sometimes is true. For example, when one writes for professionals or scientific audiences who can readily understand technical information, a more sophisticated approach is preferred for maintaining interest and motivation. "Talking down," regardless of the reader's educational background or age, is a fatal stylistic error for any writer.

Techniques

The following are some techniques that a writer can use to increase the chances that health messages will be read and understood.

• Use one and two syllable words if appropriate. High-frequency "Anglo-Saxon" words (sometimes called the basic sight words) such as *there, is, and, some, same, we, you, house* can be recognized by almost everyone.

• Write short, simple sentences whenever possible. Introduce only one idea in a sentence. Limit the number of new ideas on a given page.

• State the main idea at the beginning of each paragraph.

• Use connectives (*consequently, however, in spite of, first*) sparingly and, then, as signals to the reader.

• Break up long stretches of narrative with subtitles and captions. The reader should be able to grasp the major points just by skimming the captions.

• Use the active voice. Frequent use of the passive voice troubles poor readers.

• Highlight important ideas and terms with boldface type or italics.

• Leave plenty of open white space on the printed page—uncrowded pages seem less formidable.

• Add the phonetic pronunciation of necessary technical terms in pa-

rentheses to help the reader decipher the word.

• Define difficult words by context clues. Use apposite phrases and parenthetical expressions.

• Summarize important points in short paragraphs clearly labeled as "summaries." This helps the reader skim the material.

• Illustrations, cartoons, photos, and graphs add appeal, as well as important information. Take care that pictures portray only intended messages. Do not depend upon a careful reading of the entire text to correct a faulty impression. For example, a recent publication on occupational safety shows a smiling worker washing his hand in dangerous solvent. The puzzled face of his buddy is not strong enough to counteract the major impression that a happy worker washes in solvent. Only by reading the text does the reader learn that this practice is not something to smile about.

• Write lists. Don't bury sequential information or a series of events or ideas in narrative form. Health writers must be good news writers, reporting information in a logical sequence. If a piece of the puzzle is missing, the reader will lose interest.

• Choose a style that is easy to follow. Smith (2) has described several styles often used in technical writing. Two that are usually easy to read are the "'question-answer" pattern in which the author asks and then answers a question and the "sharing-experience" pattern in which the author describes an experience in personal terms. Avoid styles that are harder to read, such as the "imparting information," the "opinion-reason," and the "substantiated facts" patterns.

• Nobody enjoys squinting through a long page of narrative. Print size and style affect both readability and motivation. Similarly, the type and finish of the paper influence the reader. Select typeface and paper

that are attractive, easy to read, and in harmony with the purpose and tone of your message. For example, elaborate, script print on high-gloss paper ordinarily would not be a good choice for an informal flier directed at factory workers.

• Personal words (all pronouns other than neuter pronouns, all words that have masculine or feminine gender, and names of people) and personal sentences (spoken sentences, questions, commands, requests, exclamations, and incomplete sentences) add interest (3).

• Short slogans convey information in a memorable way. "Drink a little water often" is more effective than a recent pamphlet's heeding, "During hot jobs drink small amounts, frequently." Furthermore, the former uses only "basic sight words" and can be read by anyone with only a primary-grade level of reading ability.

Conclusion

The critical importance of health information transmitted through print media compels health writers to employ all their talents. How thoroughly a message penetrates to its target audience depends upon the recipient's ability and motivation to read the material. The strategies that have been outlined can help the occasional health writer go beyond a simple assessment of the material's readability level and create a health message that the reader wants to read, can read, and understands.

References

1. Freimuth, V. S.: Assessing the readability of health education messages. Public Health Rep 94: 568–570, November-December 1979.
2. Smith, N. B.: Speed reading made easy. Popular Library, New York, 1963, pp. 180–222.
3. Burmeister, L. E.: Reading strategies for middle and secondary school teachers. Ed. 2. Addison-Wesley, Reading, Mass., 1978, pp. 29–41.