Writing Text to Reach Audiences with Lower Literacy Skills

Audiences with lower literacy skills often have difficulty making sense of social and behavior change communication (SBCC) materials that rely on written text. This *C-Bulletin* explains how to write text for these audiences and discusses readability formulas and how and why they are used to measure reading levels of text.

Why Is It Important to Consider Text Carefully?

People with lower literacy tend to have limited skill in reading and writing in their first language. They are able to read and write short texts in their first language, but usually slowly and with less benefit than individuals with higher literacy levels.

People with lower literacy tend to read one word at a time and often forget what was in the previous paragraph. As a result, they may lose the meaning and the broader context of information and ideas in the text. SBCC practitioners thus need to pay special attention to how text is written and presented for these audiences.

What Guidelines are there for Writing Text for Lower Literacy Audiences?

When developing written content for audiences with lower literacy skills, practitioners should ensure the text is clear, easy to understand, and that readers can relate to and remember the ideas and messages presented.

Follow these guidelines when writing text for audiences with lower literacy skills.

SENTENCE STRUCTURE

- **Use simple words and short, uncomplicated sentences.** Short sentences are easier to read and remember. Sentences that include clauses and long words are difficult to understand.

  Instead of: Upon realizing your symptoms need medical attention, patients should arrange an appointment by phone prior to arriving at the health facility

  Try: Call before you come to the clinic

- **Omit words that do not add meaning.**

  Instead of: What types of medicines need to be obtained?

  Try: Types of medicine needed

- **Count the syllables in the words.** The longer the word, the more difficult to understand.

  Instead of: Differentiate

  Try: Tell apart

- **Use verbs in the active voice, rather than verbs in the passive voice.** In active voice, the person (or the subject) doing the action comes before the verb.

  Instead of: The baby was taken to the clinic by the mother
  Try: The mother took the baby to the clinic

DIFFERENT KINDS OF TIPPY TAPS

Counselling Card

Tin Can

- Make hole on side of tin can near bottom
- Hang can
- To start water flow: pour cup of water in can
- To stop water flow: let water run out

Hollow Tube

- Make hole in container
- Insert hollow tube (pen casing, pawpaw stem...) in hole
- Find plug/cover for tube (pen cap, stick, ...)
- To start water flow: remove plug/cap
- To stop water flow: cover/plug tube

Screw Top with Hollow Tube

- Make hole in side of screw top bottle
- Insert tube into hole
- To start water flow: loosen screw top
- To stop water flow: tighten screw top

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CONTENT

- **Present only a few concepts.** Several concepts in one message and too many concepts in one material may not be remembered. Research suggests that print materials should not use more than four to six concepts in one material.

- **Present information directly relevant to the immediate health problem.** Do not include a large number of facts. Concentrate on those most pertinent.

- **Make the text interactive, its messages action-oriented, and engage readers, if possible.** Develop checklists, use fill-in-the-blanks and scratch-offs, or introduce "interactive" narrators for storytelling. An interactive narrator can either engage the reader directly with questions and quizzes or it can be a narrator behind the scene in a comic story: the characters in the story are fully aware of the narrator and can interact with him or her. (See *C-Bulletin 2* for more on interactive formats.)

- **Ask the reader to do something or consider consequences** by using questions, such as "What do you think is going on here?" and "What happens next?"

- **Address the reader directly.** In some cultures, the use of "you" and "your" tends to make text more personal and helps engage audiences with its content. This may not be true in all cultures, e.g., "Breast milk is the only food and drink your baby needs for the first six months. The use of "your baby" in this case makes it much more personal and engaging to mothers than "a baby.""

The questions in this interactive picture code ask a user to think about what happened in the picture, consequences, and how the tragedy could have been prevented. Posing these questions helps a user to identify with the problem and understand how to take action. (Picture Codes on Alcohol Abuse Reduction, PACT Botswana)

What is happening in this picture?

What could the driver have done to avoid the crash?

What could the family have done to prevent this tragic result?

It is essential to test pictures and images with intended audiences. See *C-Bulletin 6* and *C-Bulletin 8* for more information on visuals and testing.

- **Present the main points in the first and last sentences.** What is stated at the beginning and end is most likely to be remembered.

- **Use subheadings.** These can help readers to understand the text when used to organize the content. Present subheadings logically.

- **Use numbers to clarify a sequence or steps to be taken.** Examples include the sequence of steps involved in putting on a condom or making oral rehydration solution.

- **Group similar information into several smaller pieces.** Skilled readers usually cannot remember more than seven items at a time, while lower literacy readers usually remember between three and five items. The grouping of similar items is called "chunking" because information is organized into manageable chunks.

What Can You Do When You Get the Urge to Smoke?	**What Can You Do When You Get the Urge to Smoke?**
Un-chunked:	*Chunked:*
Chew gum	**Do Something Else**
Buy yourself a present with your cigarette money	Call a friend
Call a friend	Go places where you can't smoke
Have a healthy snack	Clean your house
Put a toothpick in your mouth	
Drink water	**Put Something Else in Your Mouth**
Relax!	Chew gum
Go places where you can't smoke	Have a healthy snack
Clean your house	Put a toothpick in your mouth
	Drink water
	Be Good to Yourself
	Relax!
	Buy yourself a present with your cigarette money

How Does Aging Affect Literacy?

When developing materials for audiences 65 and over, it is important to take into consideration how aging affects literacy. Vision and cognitive abilities change with age, which can result in processing information at a slower pace and with decreased flexibility and increased difficulty in focusing and drawing conclusions from text. Literacy programs often target younger people, leaving older adults with the challenges of both literacy and aging. However, there are several aspects that do not change drastically with age. These include the ability to draw conclusions from visuals, the skills to understand spoken language, and the wide range of knowledge and life's experiences that aid in understanding information.

To support older adults, much of the guidance in this bulletin applies. Using a font size that is large enough for older adults to read and designing an uncluttered format with sufficient white space are especially important. Combining written material with images allows the older adult to take time with the material, reading and rereading at their own pace to help them draw conclusions. SBCC practitioners should remember to account for any generational differences in the development and adaptation of materials for older adults.

What are Readability Formulas and Why Are They Used?

Readability formulas measure the reading level of materials by counting the number of words in sentences and the number of syllables in words as well as other items, such as the number of verbs used. When this information is put into the readability formula, a readability score for the text is produced.

The two best known readability formulas are the Fry Graph Reading Level Index and the SMOG (Simple Measure of Gobbledygook) Readability Formula. These formulas focus on vocabulary, sentence structure, and word density.

The FRY and SMOG formulas are available on the web. Links below provide background information and specific steps to follow:

www.readabilityformulas.com/smog-readability-formula.php

www.readabilityformulas.com/free-fry-graph-test.php

Readability formulas can help SBCC practitioners determine the reading level of the text and decide if the words in the materials are too complex and sentences too long to enhance understanding. They do not measure the level of difficulty readers may have in understanding the concepts presented, which is more a function of their previous knowledge of the subject and their level of interest in it. In addition, Fry and SMOG tests may not be useful for languages other than English, French, and Spanish.

What experience has shown is that careful pretesting is more important for determining readability than any formula. Pretesting lets practitioners know whether the SBCC materials being developed are appropriate for the literacy level of the intended audience (see *C-Bulletin 8*).

What Is the Value Added?

Audiences with lower literacy skills read and understand text in SBCC materials.

Has Text Used in Written SBCC Materials Met the Following Standards?

- ☐ Sentences are short and simple
- ☐ Words do not have many syllables
- ☐ Sentences use verbs in the active voice
- ☐ Only a few concepts are presented
- ☐ Unnecessary and extraneous facts are excluded
- ☐ Text is interactive and engages the audience
- ☐ Messages are action-oriented
- ☐ Wording is personal and relates to the audience
- ☐ If necessary, information is "chunked" into categories with three to five items
- ☐ Steps and sequences are numbered
- ☐ The reading level of the text fits the audience's ability and its readability score indicates it is appropriate for audiences with lower literacy skills
- ☐ Materials have been pretested with members of the intended audience and were considered by them to be appropriate

Communication**Bulletins**

Feel free to make copies. We welcome the sharing of resources.

Resources for More Information

AMC Cancer Research Center. 1994. *Beyond the Brochure: Alternative Approaches to Effective Health Communication.* Denver, Co: AMC Cancer Research Center and CDC.

C-Change. 2010. *C-Modules. A Learning Package for Social and Behavior Change Communication.* Volume 3. Washington, DC: FHI 360/C-Change.

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National Cancer Institute. 2003. *Clear and Simple: Developing Effective Print Materials for Low-literate Readers.* Bethesda, Md: National Institutes of Health.

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Acknowledgments