Webinar Logistics

• All lines are muted

• Two ways to ask questions during Q&A period:
  1. Type your question into the question section and we will read your question aloud.
  2. Click the “raise hand” icon and we will call your name and unmute your line allowing you to ask your question.
Presenters

Wendy Mettger, M.A.
President, Mettger Communications

Joanne Gallivan, M.S., R.D.
Director, National Diabetes Education Program
National Institutes of Health
Using Plain Language to Make Diabetes Messages Clear and Simple

Wendy Mettger, M.A.
President, Mettger Communications
Member, Clear Language Group
www.ClearLanguageGroup.com

wmettger@mindspring.com
Objectives

• Understand the problem of low health literacy
• Why plain language can make a difference
• Understand the barriers to comprehension
• Learn about plain language strategies using NDEP examples
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 (jees-TAY-shun-ahl) 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

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 (jees-TAY-shun-ahl) 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.
Before and After Examples
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: 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
Department of Homeland Security

“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
Webinar Polling Question

Did you find these words easy to read and pronounce or hard to read and pronounce?
Instructions and Numeracy

• Before
  – Choose sparingly foods that provide few nutrients and are high in sugar and fat.

• After
  – Eat fewer foods that have lots of fat and sugar in them. Examples include cakes, cookies, muffins, candy, and ice cream. You might decide to eat a muffin or two cookies just one day a week.
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

• Meaning unclear, don’t know how to take recommended actions
Examples Of Print Materials
Terms and Conditions

1. You must use the Stanwood Preferred Guest Credit Card to complete $500 of eligible spending by the end of your first three months of Card membership. Based on the date of your Card approval, if the card is issued after May 15, 2016, and 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. These nights are based on nights in a standard room at a Category 2 property. 3. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 4. This document does not supplement or replace the Policy. 5. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 6. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 7. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 8. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 9. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 10. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 11. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 12. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 13. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 14. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 15. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 16. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 17. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 18. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 19. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 20. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 21. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 22. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 23. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 24. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 25. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 26. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 27. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 28. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 29. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 30. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 31. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 32. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 33. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 34. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 35. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 36. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 37. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 38. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 39. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice. 40. Additional restrictions and exclusions of Policy A90051 or Policy PP124N and is subject to change with notice.
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 in 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 when and 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.
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
**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.
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-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.
Readability Formulas: What are They?

• Use mathematical formulas to calculate a score that is expressed as a grade level.

• Measures the number of syllables in words.

• Measures the number of words and/or sentences in a passage of text.
Readability Formulas: Strengths and Limitations

• **Strengths**
  – Help predict the level of reading difficulty
  – Tangible measure

• **Limitations**
  – A certain grade level doesn’t guarantee comprehension.
  – They do not take the place of field testing.
Readability Formulas

• www.harrymclaughlin.com/SMOG.htm

• www.micropowerandlight.com

• www.cdc.gov/healthliteracy/pdf/simply_Put.pdf

• www.centerforplainlanguage.org/blog/whats-wrong-with-readability-formulas/
Plain Language Research That Supports Strategies

- Short words and use of active voice help readers process and remember information better.
- Visual cues such as headings and subheadings tell readers what’s coming up.
Plain Language Research

- Fewer concepts make text easier to read.
- Use serif type for body text. Ok to use sans serif for headings and subheadings.
- White space enables readers to scan text quickly and understand relationship between text sections.
- Line length between 55 and 76 characters per line is most readable.
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.
- Made revisions to materials based on SAM and supplemental plain language analysis.
- Tested materials with target audience members.
- Made additional revisions based on audience feedback.
Changes Made to NDEP Materials

- Content
- Literacy Demand
- Graphics
- Layout
- Learning Stimulation and Motivation
- Cultural Appropriateness
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
Content – Behaviors

The behavioral messages do not stand out on the first page.

Action steps are highlighted in the revised version.
No summary is provided in the first version. A new section, “Things to remember” has been added.
Literacy Demand – Writing Style

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
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 health care 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.

- 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 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.

**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-ol).
The LDL (low-density lipoprotein) goal for most people is below 100. The HDL (high-density lipoprotein) 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.

**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?**
The blood pressure goal for most people with diabetes is below 130/80. Ask what your goal should be.
Graphics – Tables and Charts

Original directions not detailed enough

Revised directions are clearer and more detailed
Angled text box confusing

Revised text box clearly labeled
Layout – White Space

Not enough white space

Better use of white space to increase reading ease
Layout – Subheadings

Not enough separation between sections

Better use of subheadings to break up text
Learning Stimulation

Not enough emphasis on interaction and behaviors

Better emphasis on interaction and behaviors

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**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 (GAS-tuh-nay-shun) 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 at 24 to 28 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 weight-loss strategies and help you get the weight off.

- If you already have type 2 diabetes, take any medications your doctor recommends to help prevent type 2 diabetes.

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**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 (GAS-tuh-nay-shun) 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, American Indian, and Alaska Native women have the highest risk.

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**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 (GAS-tuh-nay-shun) 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, American Indian, and Alaska Native women have the highest risk.
Cultural Appropriateness and Visual Appeal

Too many images without strong appeal vs. Attractive family photo
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
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.
Key Resources

- www.healthliteracy.worlded.org
- www.cdc.gov/healthliteracy
- www.ahrq.gov
- www.hsph.harvard.edu/healthliteracy
- www.plainlanguage.gov
- www.plainlanguagenetwork.org
- www.centerforplainlanguage.org
Take Away

• Write down three things you learned today that you will put into practice.
NDEP Field Testing for Plain Language and Rebranding

Joanne Gallivan, M.S., R.D.
Director, National Diabetes Education Program
National Institutes of Health
NDEP’s Commitment to Plain Language
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
    • Write-in suggestions
    • Circle difficult terms
    • Underline helpful concepts
  – 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.
“Reviewed for Plain Language Principles” Icon

- Materials revised for plain language are labeled with the “Reviewed for Plain Language Principles” icon.
- The icon is placed next to publications on the NDEP Publications webpage and 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
• Did You Get Gestational Diabetes When You Were Pregnant? What You Need to Know.
Coming Soon: Newly Revised Materials

- **It’s Not Too Late to Prevent Type 2 Diabetes**
- **How to Help a Loved One Cope with Diabetes**
November is National Diabetes Month

- November is National Diabetes Month: *Diabetes is a Family Affair*

- To learn more, visit the National Diabetes Month page at www.niddk.nih.gov/health-information/health-communication-programs/ndep/partnership-community-outreach/national-diabetes-month
Webinar Slides and Evaluation

- Webinar Series Webpage
  - http://ndep.nih.gov/resources/webinars
- Presentation Slides
- Webinar Evaluation
- Certificate of Completion for Webinar Attendees
  - ndep@hagerssharp.com
Thank you!

NDEP National Diabetes Education Program
A program of the National Institutes of Health and the Centers for Disease Control and Prevention

www.ndep.nih.gov
1-800-860-8747
TTY: 1-866-569-1162