



The Susan G. Komen
Breast Cancer Foundation

African Americans:

Developing Effective

Cancer Education

Print Materials

cancer
education
information

women



breast health



diversity

African Americans: Developing Effective Cancer Education Print Materials
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Foreword

The Susan G. Komen Breast Cancer Foundation, credited as the nation's leading catalyst in the fight against breast cancer, has long been committed to research and education. Its mission is to eradicate breast cancer as a life-threatening disease by advancing research, education, screening and treatment. With this goal in mind, the Komen Foundation's Affiliates raise millions of dollars each year for local education and screening programs and for major national research fellowships and grants.

In its efforts to provide breast health information for all women, the Komen Foundation commissioned the production of guidelines for culturally relevant educational materials designed for medically underserved audiences. To develop these guidelines, the Komen Foundation identified and enlisted the aid of prominent authorities among each of the underserved populations targeted. Experts on the panel contributed valuable information and insight to this project.

Breast cancer, the most common form of cancer among women in the United States, is second only to lung cancer in cancer deaths among women. It is generally accepted that widespread adoption of screening behaviors (regular mammograms, clinical breast exams, and breast self-exams) can significantly reduce breast cancer mortality and suffering. Efforts of the Komen Foundation and other organizations have increased knowledge of screening activities and their benefits among many Americans. Unfortunately, this message still has not reached some significant segments of women in our country.

The purpose of these guidelines is to assist organizations in tailoring cancer education print materials to specific audiences that have received insufficient or inadequate information in the past. It is certainly not our intention to publish a comprehensive set of principles that would apply to every American woman, or even to all women in a particular racial, ethnic or cultural group. Moreover, it is our expectation that these guidelines will be used in conjunction with other publications available through public and private sources to produce culturally sensitive and appropriate materials and to highlight the importance of breast health to all women.

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The entire project involved the support and counsel of health professionals with extensive experience in working with African American audiences on cancer prevention and control activities across the United States.

Introduction:

This Guide and the Underserved African American Audience

About the Guide

Purpose: This guide is intended to provide, in a concise and clear manner, key principles for tailoring cancer education print materials to African American readers. While these guidelines are not comprehensive, they are easy to follow and address specific health needs of medically underserved African American audiences.

Development: In preparing this guide, a panel of experts reviewed samples of existing public health print products aimed at African Americans. Their assessments identified aspects of the materials that influence print-product effectiveness among African American readers. In addition, this advisory committee made significant contributions to the material included in this guide. The support and direction of this expert panel made this effort possible.

Intended Audience: Anyone engaged in producing print materials for medically underserved audiences will likely find this guide helpful. This includes program officers, educators, writers, designers, information disseminators and others collaborating on health education and promotion projects. These guidelines should further sensitize individuals and organizations to the rigors of creating effective educational materials.

The guidelines are based on the following assumptions:

- ▶ The increasing and ongoing need to develop culturally appropriate materials.
- ▶ That you are able to access those with the skills necessary to develop the product.
- ▶ That not all education materials are meant to be widely distributed or last forever.

It is expected that other resources, such as the National Institutes of Health (NIH) publication *Clear and Simple: Developing Effective Print Materials for Low-Literate Readers* located on the web at <http://www.cancer.gov/cancerinformation/clearandsimple>, will be consulted for more detailed guidance in producing quality, user-friendly print products. While the NIH publication focuses on general principles, this guide builds upon these concepts to help customize materials for a more specific audience: the underserved African American community.

Diversity of the African American Population

In approaching the subject of African Americans, we must be ever mindful that this is not a homogeneous population. Differences in lifestyle, philosophy, attitude, behavior, culture, education, income — indeed, the full spectrum of life experience — are represented under the umbrella term “African American.” In addition, geographic location and rural/urban

residency strongly influence this country's various African American population groups. To develop breast health materials for a particular African American audience, be aware of the full range of diversity within this population.

It is also helpful to remember that the purpose of these guidelines is to assist in tailoring breast health materials for women who are medically underserved. This segment of the population — regardless of geographic or other distinctions — may reflect very different values, circumstances, cultural influences, belief systems and education levels. Obviously, it is important that all African American women receive regular screening. However, since the more affluent population may have a wider range of education and screening opportunities, this guide will focus on development of educational materials directed at less affluent African American women, who have traditionally been provided insufficient or inadequate breast health information.

General Demographics

The largest minority group in the United States, African Americans number more than 36 million, or about 13 percent of the population. The majority of African Americans (55%) lived in the South, 18% lived in the Midwest, 18% lived in the Northeast and 9% lived in the West.^{1,2} Demographic data reflect lower levels of education and income among African Americans than among Caucasians. As of 2001, 23 percent of African Americans were below the poverty level as compared to 8 percent of the Caucasians.¹

Breast Cancer and African Americans

Breast cancer is the most common cancer in African American women and the second leading cause of cancer death among African American women, exceeded only by lung cancer.² An estimated 19,240 new cases of breast cancer are expected to occur among African American women in 2005.³ African American women have a higher breast cancer death rate (35.9 per 100,000) than women of any other racial or ethnic population.² An estimated 5,640 deaths from breast cancer are expected to occur among African American women this year.³ Although breast cancer incidence is lower among African Americans, mortality rates are higher among African American women than white women.³ African American women's survival rate for breast cancer has increased in recent decades. This five year- survival rate for breast cancer among African American women is 75 percent compared to 89 percent among Caucasian women.^{1,3}

Over the past 25 years, trends in breast cancer incidence among African American women show four distinct phases: a period of stable rates from 1975 to 1978, followed by a rapid increase from 1978 to 1986, a less rapid increase from 1986 to 1999 and leveling off from 1999 to 2001.³

The disparities in health among African Americans may be attributed to multiple factors. The factors include biologic and genetic differences in tumors, the presence of risk factors, history of other diseases, barriers to

health care access, socioeconomic factors such as lack of insurance, health behaviors and later stage of disease at diagnosis.⁴ Participation in annual mammography screening and treatment of the disease at its earliest stages offers the best opportunity for decreasing mortality and improving survival.

Communicating Health Information to African Americans

To be effective, programs encouraging health promotion and screening compliance must address the social, economic, cultural and other barriers faced by underserved populations. Certainly, poverty and relatively low educational attainment influence participation in health care services for segments of the African American population. For underserved African Americans, many of the barriers to care relate to these issues. Lack of insurance, inability to pay, transportation and child care needs, and problems navigating managed care organizations and hospital systems all represent challenges. In addition, a sense of fatalism (i.e., the perception of cancer diagnosis as an automatic death sentence) and belief in folk medicine are significant influences among many lower-income African Americans.¹⁰

Studies have shown that one of the most effective and efficient ways to communicate breast health information to underserved groups, such as specific African American audiences, is through low-cost, culturally appropriate, concise and easily understood educational materials. Several members of the expert panel that contributed to these guidelines agreed that such materials produced locally with input from local health and communication authorities would be more effective than those developed regionally or nationally. Those experts also said they believed that appropriateness of format and audience interaction capability are key ingredients in the likelihood of print materials being used in African American groups.

Developing health-promotion print materials for a medically underserved African American audience may pose some challenges. Low literacy is a problem among a significant proportion of this segment of the population. To be effective, materials should be written at a 5th grade level or lower and ideas conveyed through illustrations and photos as much as possible. As noted, African Americans are a diverse group, so it is of paramount importance to make the message relevant to your specific audience. This can only be accomplished through careful attention to the language, design, photography and graphics of your materials.

References

1. U.S. Bureau of the Census. *The Black Population in the United States: April 2003*. www.census.gov
2. American Cancer Society. *Breast Cancer Facts and Figures 2003-2004*. Atlanta, GA: 2001.
<http://www.cancer.org/downloads/STT/CAFF2003BrFPWSecured.pdf>

3. American Cancer Society. *Cancer Facts & Figures for African Americans 2005-2006*. Atlanta, GA: 2005.
www.cancer.org/downloads/STT/AFAMFF00.pdf
4. Ries, L., et al (2000). *The Annual Report to the Nation on the Status of Cancer, 1973-1977, with a Special Section on Colorectal Cancer*. *Cancer* 88(10), 2398-2424.

Step 1: IDENTIFYING YOUR INTENDED AUDIENCE

Define the African American population you want to reach.

The African American audience is a diverse group of people. How do you define the audience you want to reach with your message and materials? By learning as much as possible from community data about the characteristics they share — demographic factors such as age, sex, geographic location, occupation, education and income; and by psychographic factors and lifestyles — attitudes, behaviors, opinions, values, beliefs, and media exposure and preferences.



Keep in mind not only what sets the African American community apart from other groups, but the diversity that exists within the community itself — cultural, lifestyle and other differences, such as:

- ▶ Ancestry
- ▶ Family customs
- ▶ Socioeconomic status
- ▶ Priorities, perceptions and experiences
- ▶ Role models
- ▶ Health care beliefs and needs
- ▶ Regional/ geographic biases
- ▶ Spiritual/ religious practices
- ▶ Community leadership/involvement
- ▶ Communication networks

Defining your audience is the first and most important step in developing effective materials. It is very important to work with the targeted community throughout all phases of the process. This may help to gain further insights on demographics and other factors known to influence health behaviors and health outcomes. Working with the targeted community at the beginning of the project is essential to building trust and participation.



The more you know about the people you're trying to reach, the better your educational materials will be at delivering your message.

Tailor your materials.

For your print materials to achieve optimal effectiveness, each reader will feel that your product was developed with her and her family in mind. For this reason, cultural and lifestyle sensitivity should be a guiding factor behind any materials you produce for African Americans.

What is the role of this sensitivity in selecting and developing print materials? It is recognizing the range of characteristics inherent to African Americans, and then using familiar language, sensitive and respectful graphics, and appropriate situations to acknowledge those distinctions.

Any discussion of health topics is very personal; an awareness of your African American audience's unique perspective will make readers more at ease with the subject and more receptive to your message. This guide will assist you in preparing, producing and selecting relevant, thoughtful and appropriate materials.

Step 2: RESEARCHING YOUR AUDIENCE

Check existing sources of information.



The more you know about the people you are trying to reach, the easier it will be to design educational materials that communicate the appropriate message. For example, it is important to research cancer-related statistical data specific to African Americans. First, locate sources that already have useful information, such as:

- ▶ Libraries, Internet databases (i.e., U.S. Census, Cancer Registries, National Library of Medicine)
- ▶ Government agencies (i.e., National Cancer Institute, Centers for Disease Control and Prevention, Health Research Services Administration, Office of Minority Health Resource Center)
- ▶ Health statistics from hospitals and health clinics
- ▶ Local health departments and state agencies
- ▶ Non-profit organizations or local cancer centers (i.e., local Komen Affiliate)
- ▶ Health science centers, medical schools, schools of public health
- ▶ Local American Cancer Society (ACS) units or state divisions
- ▶ Community-based organizations serving African Americans

Pay special attention to discussions regarding your audience's perceptions of the severity of breast cancer, their sense of personal risk of developing breast cancer, the barriers that prevent them from reducing their risk and the benefits identified by those who have reduced their risk.

Conduct your own research.

After locating as much existing data as possible on the African American community, it's time to launch your own search for additional — and much more specific — information. Start by taking a close look at the needs of the readers to ensure that the materials you develop are appropriate. For example, since fear is a major cancer-related issue for many African American women, you may wish to address commonly held fears — in a matter-of-fact, non-threatening manner. Focus on the barriers to health care that apply directly to African Americans, such as:

- ▶ Unemployment, lack of insurance or inability to afford care
- ▶ Need for child care
- ▶ Transportation needs
- ▶ Lack of African American health care professionals
- ▶ Mistrust of the health care delivery and research system
- ▶ Inability to navigate managed care organizations/hospitals
- ▶ Embarrassment
- ▶ Insensitivity of health systems and providers
- ▶ Fear of cancer tests and outcomes (i.e., belief that cancer diagnosis is a death sentence)
- ▶ Lack of knowledge of early cancer warning signs and the need for seeking medical attention early

You may need to conduct audience interviews and surveys to refine collected information about the experiences, attitudes and behaviors of the African American population you're trying to reach. Other useful information regarding the content and/or visual appearance of your materials may be obtained by studying existing health-promotion, consumer-oriented and other print products aimed at African Americans. A listing of specific resources can be found on page 23 of this booklet.

Work with other groups.

While conducting your own research, keep in mind other groups or organizations whose goals might coincide with yours. Combining forces on a joint project saves time and money. Such organizations include:

- ▶ Private and non-profit foundation
- ▶ Breast health organizations and coalitions
- ▶ African American organizations and coalitions
- ▶ Federal and state government agencies
- ▶ Religious organizations
- ▶ Public health departments, community clinics and public hospitals

**A listing of specific groups and organizations can be found in the Breast Health Resource section of this guide.

Determine the overall objective of your educational materials, and plan the most effective and appropriate method of presentation to achieve that goal.

In communicating with other organizations, you should learn about both their long-term and short-term goals. It's also helpful to determine the nature of their interest in breast health. This could improve your own strategic planning and prevent unnecessary duplication of resources. Joint efforts may lead to larger goals of social change.

Before collaborating, be sure that your intended audiences are indeed similar; this will help guarantee the appropriateness of your materials. Be aware of differences in African American lifestyle behaviors, such as:

- ▶ Specific myths and beliefs about treatment (i.e., alternative medicine) or cureability
- ▶ Dietary practices
- ▶ Exercise habits
- ▶ Parenting skills
- ▶ Sexual orientation
- ▶ Geographic variances (i.e., urban, rural, Northern, Southern, Caribbean, South American, West Indian)

Clearly define your goals and be sure you understand the goals of your collaboration.

Collaborate with experts.

Seek out people who have experience and expertise in communicating and interacting with the African American community. Some of these may be individuals with technical expertise, such as physicians and other health professionals. Others may have specialized marketing and educational expertise in key characteristics, preferences and practices of your audience.

Community members themselves can offer useful information. Look for individuals who are knowledgeable of, active in and representative of your audience. Consult with them as you plan the project and prepare your materials. Many cancer related organizations have community representation on advisory boards to provide additional guidance and insights related to your audience. Since 1999, a diverse group of African American health care providers, survivors and advocates have served on an advisory council for the Susan G. Komen Breast Cancer Foundation. The council works with Komen to address issues related to breast cancer in the African American community.

Seek help in researching existing materials and customizing them for the African American population, as well as help in conducting new research. Members of the African American community can:

- ▶ Help develop the concept, content and design of materials.
- ▶ Review the materials and compare them to an evaluation checklist, such as the one included at the end of this guide.
- ▶ Assist with pretesting materials among the intended audience.

Use focus groups.

A technique known as focus group testing is vital to the development of effective educational materials. A typical focus group consists of 8 to 10 individuals representing your intended audience — in this case, a selected segment or all of the African American community living in a specific geographic region. Individuals in the group would be asked to discuss and evaluate different formats, graphics and/or content elements of materials.

Focus group testing is a common research tool. The information gained from the reactions and evaluations provided by members of these groups is used in the process of developing new products or in shaping strategies, such as those being designed for advertising or political campaigns.

Focus group techniques and considerations are numerous. Group testing can be used to learn more about specific attributes of the target audience, to pretest materials or to redesign existing materials.

Professional skills and experience are necessary to successfully design and conduct focus groups and to analyze the results accurately. This guide presents only general information about this research tool. An excellent resource for more information is *Listening to Your Audience: Using Focus Groups to Plan Breast and Cervical Cancer Public Education Programs*. This resource is a free publication from the Centers for Disease Control and Prevention and the AMC Cancer Research Center (see the References section) and is located on the web at <http://www.cdc.gov/cancer/nbccedp/bccpdfs/amcliste.pdf>. This in-depth and practical guide provides step-by-step information for organizing and conducting focus groups.

Use the Internet.

The Internet is an excellent, low-cost avenue to information. There are many websites that offer information on breast health and, in some cases, your intended audience. Of course, finding this information requires access to the Internet. If you don't have use of a home or business computer, you can usually access the Internet at your local public library.

Next, you'll need to learn how to seek information on the Internet. Search engines are quite easy to use and navigate to find out what you're looking for. Many search engines have online help programs that explain research techniques and strategies. You can find more information on Internet use at your local library. See the Breast Health Resources section to get started.

Step 3: DETERMINING THE OBJECTIVE OF YOUR EDUCATIONAL MATERIALS

Focus on the message.



You've conducted your research, consulted with other groups or individuals and used preliminary focus groups. Your next important step is to clearly define what you want your materials to say, and how you want your readers to respond to that information.

What key information points are the most important? When presenting main points, keep them to 3-5 main points. A list of risk factors or possible symptoms are two examples. What then should the reader do? Performing a breast self-examination, scheduling a doctor's appointment, seeking more information — these are examples of desired actions. Determine the overall objective of your educational materials, and plan the most effective and appropriate method of presentation to achieve that goal. In the process, however, avoid creating materials that are too academic, too wordy or too "preachy."

Use themes relevant to the lives of your readers.

The African American community has specific values, issues and concerns, and these should be addressed in the content of your material. These include:

- ▶ Importance of religion and spirituality
- ▶ Concepts of honor and respect
- ▶ Trust (or the lack of trust)
- ▶ Survival
- ▶ Health concerns as family issues (i.e., staying healthy for your family/children)
- ▶ Individual and community responsibility

If the material does not reflect common themes, philosophies, practices or life situations — or worse, ignores or stereotypes behaviors — your message and objectives will be ineffective and potentially offensive to your readers. Above all, respect personal, cultural and lifestyle differences when addressing the African American population.

Present medical information clearly.

Clear and understandable background information on your subject is the foundation for your product and the most reliable route to achieving your objectives. Although some readers will be familiar with common terms, it is safer to assume that most have minimal knowledge of the topic; this will help avoid confusion and alienation. Referring to breast self-examinations or mammograms, for example, may result in various reactions, depending on education levels and other factors.

Don't confuse lengthy or complicated medical jargon with background information. Give your readers enough simple, comprehensible facts and figures without frustrating or overwhelming them. Illustrate the most important points.

Finally, the use of some complex terms and/or their abbreviations may be unavoidable. A glossary should always be included to define technical terms and abbreviations.

Use accurate medical material.

The credibility and effectiveness of your product will depend greatly on the accuracy of the medical background provided. Readers need to know that they can trust you and your information. Are the facts correct, current and specific to your intended audience?

Information found in existing health promotion materials must be updated and revised. Consult with medical experts to review your final draft and verify the accuracy of your material. Contact local health departments, medical schools, research centers, teaching hospitals or community-based clinics to help you identify potential experts.

Check with African American organizations for additional information, such as:

- ▶ Myths that must be addressed
- ▶ Common misconceptions about cancer
- ▶ Local referrals for financial assistance for screening and other services
- ▶ Educational materials (i.e., effective audiovisuals)
- ▶ Current surveys and community-specific data
- ▶ Availability of transportation and child care to allow individuals to keep their appointments
- ▶ Experience with health care delivery

Involve your readers.

Your readers should see themselves as active participants in your product. Your message should include a call to action that is clearly within their capabilities. Rather than simply listing risk factors, for example, emphatically encourage appropriate screenings or tests and participation in community health education programs.

Write from the readers' perspective. Think about what kind of questions the reader has and would like answered. Use practical and culturally appropriate "how to" advice to engage readers in achieving the desired behavioral objectives, whether it's calling a free information line or encouraging them to ask questions of their physicians. Offer interesting and helpful suggestions.

Supply information about local contacts (i.e., neighborhood clinics and other health care facilities), including phone numbers. If your material is not interactive — that is, if the reader feels disconnected from your message or unable to follow a realistic course of action — your objectives will not be met.

Using clear and precise language is key to developing effective and culturally appropriate materials.

Step 4: DEVELOPING THE CONTENT

Organize the content in a logical manner.



For effective print materials, ideas offered in any one piece should be limited to the main theme and presented to the reader in a logical sequence. Keep main points to 3-5 maximum. Begin and end with the most important and impressive facts. You can provide additional information in any of the following ways:

- ▶ Numerical order (steps 1, 2, 3...)
- ▶ Chronological order (time of day, month or year)
- ▶ Topical order (headlines and subheads)

Materials are least effective when:

- ▶ Ideas are presented in no particular order.
- ▶ The information is disorganized, and not succinct.
- ▶ You assume that your reader already has considerable knowledge about the subject.
- ▶ They are culturally insensitive.

Choose words carefully.

Using clear and precise language is key to developing effective and culturally appropriate materials. To avoid confusion or potentially insulting language, be aware of what certain words or phrases may represent to your audience. For instance, the term “African American” is widely accepted today, while “Black” is considered appropriate by some within the community and not by others. Another example of the cultural influence in word selection is the use of the term “blood disease” by some African Americans in referring to cancer or hypertension.

A word can have multiple meanings or connotations. Be sure that the words you choose cannot be interpreted as offensive or non-inclusive. Problems often arise when using jargon that is regionally acceptable but may not have the same meaning when used in other locales. Also, when using examples of behavior, be sure they are relevant and appropriate to your readers’ experiences.

To ensure that the language you use is clear, appropriate and sensitive, consult with members of the African American community you are trying to reach. Focus groups are an efficient way to pretest your material’s comprehensibility with your intended audience. When feedback suggests some difficulty with comprehension or terminology, or if focus group testing reveals words and examples that are more realistic and applicable, always reconsider your choice of words or language and keep modifying your text until it is acceptable.

Maintain an appropriate vocabulary level.

In any health communication, medical terminology is unavoidable. However, excessive technical jargon can obscure your message and objectives, particularly when preparing materials for underserved groups.

You must thoroughly understand the literacy level of the group you're trying to reach. Most materials that try to reach all audiences don't reach any of them adequately. It is critical that you characterize your audience by education level, degree of literacy and primary language. After your copy is written, check it with a literacy formula such as SMOG, FOG or Fry tests to determine the level of readability and comprehension. See *Clear and Simple: Developing Effective Print Materials for Low-Literate Readers* in the reference section or view online at <http://www.cancer.gov/cancerinformation/clearandsimple>.

Among lower-literacy ("easy reader") audiences, the use of four or more technical terms per page may be excessive. Additionally, failing to provide definitions or using many polysyllabic words when shorter ones would do — all of these can render your print materials practically unreadable. It is important to explain each technical term, such as "screening" and "mammography," so that readers understand the word or procedure before they visit a doctor or clinic.

Keep it simple.

Because you are working with medical information and terminology, the most effective sentences and paragraphs are simple, short and direct. Use shorter words and shorter sentences (10-15 words per sentence). Use the active voice ("consult your healthcare provider"), rather than the passive voice ("your healthcare provider should be consulted"). Using the active voice boosts your language's effectiveness and engages the reader. Avoid run-on sentences and long, complicated paragraphs. After writing your materials, test the reading level to make sure they are appropriate for your audience. Materials should be written at no higher than a 5th grade level.

Keep it positive.

Language that is positive, supportive and encouraging produces the best results. Invite your audience to try a new behavior while pointing out the benefits to them. Playing heavily on readers' fears can have a counterproductive effect by scaring your audience away from reading your materials. Present positive statistics and outcomes whenever possible.

Avoid overuse of commanding ("don't do the following") or condescending wording ("you shouldn't..."). In addition, try to build on the values that are significant to African Americans, taking great care to avoid perpetuating negative or offensive stereotypes.

Use headlines and other titles to organize the content.

Good organization provides ideas and information to your reader in a smooth, continuous flow. Use headlines ("headers"), subheads or other advance organizers to carry the reader from one topic to the next. This breaks up long copy blocks and helps highlight particularly important facts.

Headers should be kept short, simple and close to the relevant text. Use headers to divide categories, introduce a change of topics, organize advice or accentuate a call to action.

Reviewing and reinforcing essential facts and courses of action help ensure that the message reaches your audience.

Inappropriately formatted materials can be awkward, inconvenient or even offensive. Materials that don't fit into the lifestyle of the intended African American reader are unlikely to be used or remembered.

Review and summarize your major ideas.

Your readers have been introduced to numerous ideas, facts and suggestions connected with health information — some familiar to them, some not. A summary is fundamental in conveying that information. Reviewing and reinforcing essential facts and courses of action help ensure that the message reaches your audience. For the most effective communication:

- ▶ First, tell your readers what they will learn.
- ▶ Next, provide the facts.
- ▶ Then, encourage a course of action.
- ▶ Finally, restate the essential points or take-home messages.

Step 5: DEVELOPING THE VISUALS

Match the format to the product's intended use.



The format is the physical appearance and construction of your material, and it should always match the objectives of the educational content. How will the materials be used? Will they be placed in a pocket or handbag, posted on a wall, or hung on a door?

How will your materials be distributed? Will they be displayed in a clinic waiting room or handed out at shopping malls? Will a presentation accompany them, or will they have to stand on their own?

Inappropriately formatted materials can be awkward, inconvenient or even offensive. Materials that don't fit into the lifestyle of the intended African American reader are unlikely to be used or remembered.

Use graphics that capture the reader's attention.

Each day thousands of images compete for the eye of your reader. Educational materials, particularly on health topics, must stand out to catch the attention of the intended audience. Avoid gloomy colors, such as gray. Use active photographs, precise illustrations and colorful graphics.

In photographs and illustrations, use African Americans that mirror your intended audience, and depict familiar scenes and situations readers can relate to. For example, place subjects in everyday situations, such as talking with friends or family, or engaging in religious activities. Pictures should realistically portray African Americans, reflecting diversity in anatomical features, skin color and hair styles. Try to include photos that show women of different ages and in a positive light. Use pictures of health care providers — as well as patients — who are African American.

In other design elements, such as icons and logos, consult your community advisory group. With your particular audience, it may or may not be appropriate to incorporate Afrocentric visuals (i.e., Kinte cloth prints, using bold, vibrant colors).

Avoid negative graphic connotations.

With culturally appropriate materials, special attention must be paid to graphic representations. Negative stereotypes can be conveyed by pictures as well as with words, and an inappropriate illustration or photo can have an especially harsh impact. Be aware of existing stereotypes associated with African Americans and studiously avoid them. For example, pictures of African Americans eating watermelon or fried chicken may demean and alienate your audience.

Address sensitive topics directly but tastefully (a subtle illustration of a woman's breasts, for example, rather than a stark frontal photo). Avoid themes that may conflict with the values, beliefs, lifestyles, attitudes and activities of the African American community. Examples include depicting African American families without a father and using photos or illustrations of African American women with large breasts. Pretesting your materials with your audience is the best way to ensure sensitivity to local customs and conditions.

Organize the material to maximize visual appeal.

Although you want your graphics to stand out, it is equally important to refrain from cluttering your materials with too many images. Effective illustrations and photographs are those which are direct, well-composed and free from being too busy.

Remember that charts, graphs and diagrams usually have little appeal for audiences with limited literacy skills. If used, they should be simple and clearly illustrate one central point. Complicated charts that are difficult to decipher and photos that contain too many elements detract from the core message.

Position graphic elements with purpose.

How words and graphics are arranged on the page has a strong effect on the reader's comprehension of the message. High-quality graphics contribute to the material by reinforcing information and improving understanding. Keep the following in mind:

- ▶ Each visual should relate directly and explicitly to one message.
- ▶ In most cases, each illustration should have a caption.
- ▶ Tables, charts and diagrams should be simple and placed near their corresponding text.
- ▶ Avoid using graphics simply for decoration.
- ▶ Balance words and graphics with ample "white space" on the page.
- ▶ Use reverse print sparingly (white or light print on a dark background).
- ▶ Again, check that your illustrations fit the culture and lifestyle of your African American audience.

Choose a user-friendly type style.

Materials that are visually difficult to read will not be read. There are thousands of available fonts; be careful in making your selection. Serif typeface (i.e., Times, Bookman, Garamond) is generally easier to read for print materials; Sans-Serif (i.e., Arial) typeface works best for titles and headers as well as on-line materials. As with language and graphics, simpler is usually safer. Unadorned type styles in a dark print may seem mundane, but they are usually the best choice. Italic type and ALL CAPITAL LETTERS are both hard to read.

Watch for any font characteristics that may make reading your text an unpleasant chore:

- ▶ *This scriptwriting font is hard to read.*
- ▶ **This font is too academic.**
- ▶ *This font is too light and condensed.*
- ▶ **This font is clear, simple and easy to read**

Avoid too-small type, which can be frustrating, especially for older readers or others with poor vision. Type that is at least 12 point is usually effective, with 16 point preferred for an older or visually impaired audience. Here are examples of various type sizes:

- ▶ 16 point type
- ▶ 14 point type
- ▶ 12 point type
- ▶ 10 point type

As a general rule, use all capital letters sparingly, if at all, and avoid inappropriate capitalization of everyday words. Notice the difference:

ALL CAPITAL LETTERS ARE
MORE DIFFICULT TO READ.

A mixture of upper- and lower-case letters is easier to read.

Organize and emphasize text with typographic markers.

Use typographic markers such as underlining, bulleting and boldface type to emphasize important terminology, questions or summary information. Other graphic elements, such as circles, boxes, arrows and icons, can highlight key points and help break up text for easier reading.

Use visual elements that have meaning to your African American audience (i.e., African color prints), reinforcing the message that this is designed with the specific reader in mind.

Check cost feasibility.

Expensive materials don't always have higher appeal among your intended audience. Even when they do, the materials may be too expensive to mass produce or to be reproduced by others who wish to use your product.

Be realistic concerning budgets for writing, photography, illustration, production, printing and distribution. Think about future uses of your materials and recognize that production budgets may be smaller when the time comes to reprint materials.

When researching existing materials, look for products that can be easily reproduced without copyright infringement. When designing your own materials, those that are easy to photocopy help ensure widespread and effective distribution.

Check for accuracy.

When your materials have reached a finished stage with both text and visuals, enlist the help of a professional editor, proofreader or competent volunteer who can check for accuracy in grammar, syntax, punctuation and spelling. Awkward sentence construction, misspelled words, incorrect grammar and typographical errors will distract the reader from the message and diminish the credibility and effectiveness of the piece.

Step 6: TESTING YOUR MATERIALS

Always pretest.

Obtaining feedback prior to printing is essential for culturally-sensitive materials. This will measure your African American audience's response and evaluate your product's effectiveness.

Did you meet your objectives? Did your product tell your readers what they need to know and do? These questions can be answered by the African Americans for whom this product is intended. It is also helpful to receive input from African American health professionals and other health care experts who work with the African American population.

When pretesting ask these four questions: Are your materials:

- ▶ Attractive to the African American audience?
- ▶ Comprehensible to this audience?
- ▶ Acceptable and appropriate to this audience?
- ▶ Relevant to their daily lives?

If not, this is the time to find out — and make necessary revisions.

Use focus groups throughout the process.

Just as you may have used focus groups in the earlier stages of material research, development and testing, you should use them to evaluate your finished draft. In asking the following types of questions, remember that some cultures may find direct queries imposing. In these cases, a useful technique may be to phrase questions in the third person (i.e., Is there anything about these materials that a person similar to yourself may not understand?). Ask these types of questions:

- ▶ Is there anything you don't understand? (If so, what and why?)
- ▶ Is there anything you would like to change? (If so, what and why?)
- ▶ What do you like most about this product?
- ▶ What do you like least about this product?
- ▶ Is this something you would pick up and read?
- ▶ Would you recommend it or pass it to other individuals like yourself?
- ▶ Would this product cause you to take any action or change your behavior?
- ▶ Is there anything that you don't believe or don't trust?
- ▶ Are there any other things that you would like to tell us (questions, comments)?

Review the responses and suggestions with your production team and make necessary changes. If numerous alterations were suggested, pretest the materials again after your next draft. Continue this process until your audience provides few or only minor revision suggestions.

Focus groups, while highly effective for learning about your audience's perceptions, are not the only way to test for effectiveness. Other methods for obtaining feedback include:

- ▶ **Bounce-back cards.** These are usually pre-addressed, pre-paid postcards included with the publication that ask readers to answer several questions about the materials and then mail the cards back.
- ▶ **Intercept interviews.** These are brief one-on-one interviews usually conducted in high-traffic areas, such as shopping malls, churches and grocery stores.
- ▶ **Web-based questionnaires.** These questionnaires, along with your materials, would be posted on a Website.

For more information on the various ways to gather feedback from your audience, refer to *Clear and Simple: Developing Effective Print Materials for Low-Literate Readers*. This resource is located on the web at <http://www.cancer.gov/cancerinformation/clearandsimple>.

Use the checklist on the inside back cover of this booklet.

The checklist included in this booklet is a convenient way to guide the development and production of your materials. Encourage others to use and reproduce the checklist when developing materials for African Americans.

References for Information on Materials Development

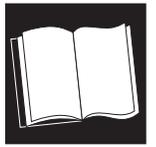
Beyond the Brochure: Alternative Approaches to Effective Health Communication, 1994. AMC Cancer Research Center and the Centers for Disease Control Prevention.
<http://www.cdc.gov/cancer/nbccedp/bccpdfs/amcbeyon.pdf>

Clear and Simple: Developing Effective Print Materials for Low-Literate Readers, National Institutes of Health, National Cancer Institute, 2003.
<http://www.cancer.gov/cancerinformation/clearandsimple>

Listening to Your Audience: Using Focus Groups to Plan Breast and Cervical Cancer Public Education Programs, 1994. Centers for Disease Control and Prevention. www.cdc.gov/cancer/nbccedp/bccpdfs/amcliste.pdf

Making Health Communication Programs Work: A Planner's Guide, National Institutes of Health, National Cancer Institute, 2002.
<http://cancer.gov/pinkbook>

Theory at a Glance. National Institutes of Health, National Cancer Institute, 1997. <http://www.cancer.gov/cancerinformation/theory-at-a-glance>





Breast Health Resources

African American Resources

Breast Cancer Resource Committee (BCRC)

2005 Belmont Road NW
Washington, D.C. 20009
202.463.8040 phone
202.463.8015 fax
www.afamerica.com/bcrc

BCRC provides breast cancer awareness and education programs and presentations, a speaker's bureau, videos and other educational materials, and advocacy. The organization also offers support for women diagnosed with breast cancer, providing prostheses and surgical garments to low-income women, conducting peer counseling and sponsoring a support group for survivors.

Howard University Cancer Center

2041 Georgia Ave. NW
Washington, D.C. 20060
202.806.7697 phone
www.huhosp.org/hucc/

The cancer center conducts basic, clinical and epidemiological research, and offers cancer education for the medical and lay communities, free and low-cost screening, and up-to-date cancer treatment and prevention programs.

National Black Leadership Initiative on Cancer II: Network Project

720 Westview Drive SW
Atlanta, GA 30310
800.724.1185 phone
www.nblic.org

Black Women's Health Imperative

600 Pennsylvania Ave. SE, Suite 310
Washington, D.C. 20003
202.548.4000 phone
202.543.9743 fax
www.blackwomenshealth.org

The Black Women's Health Imperative is a health advocacy organization committed to improving the health status of African American women.

**National Caucus and Center
on Black Aged, Inc.**

1220 L. Street, NW, Suite 800
Washington, D.C. 20005
202.637.8400 phone
www.ncba-aged.org

This is a national organization dedicated exclusively to improving the quality of life for African American and other elderly minorities. Its services include health research, public policy and advocacy, and a wellness promotion/disease prevention program.

Sisters Network® Inc.

8787 Woodway Dr., Suite 4206
Houston, TX 77063
713.781.0255 phone
713.780.8998 fax
www.sistersnetworkinc.org

An African American breast cancer survivor's organization involved in emotional support, research, cancer prevention programs and advocacy efforts.

The Witness Project

4301 W. Markham St., Dept. 820
Little Rock, AR 72205
800.275.1183 phone
501.686.6479 fax
www.acrc.uams.edu/patients/
witness_project/default.asp

This is a health program for African American women in churches and community centers. It offers breast and cervical cancer education, screening awareness, and information about low/no-cost screening locations.

Federal Government Contacts

The Office of Minority Health (OMH)

P.O. Box 37337
Washington D.C. 20013-7337
800.444.6472 phone
www.omhrc.gov

The OMH maintains comprehensive databases on minority health issues and resources. It also identifies links to other organizations which serve minorities. OMH offers many of its publications without charge. For free customized service, contact the Resource Center OMH.

Some of the materials available through OMH:

For a complete list, please call The Office of Minority Health (OMH) at 800.444.6472.

Other Sources

► **Another source** for minority health information is the Minority Health Project (www.minority.unc.edu) which is maintained by the University of North Carolina Department of Biostatistics in collaboration with the National Center for Health Statistics and the Association of Schools of Public Health. The Minority Health Project maintains a comprehensive database on minority health and health disparity issues. The Minority Health Project also provides an extensive set of links to other resources, agencies and organizations devoted to minority health and eliminating health disparities. The project is sponsored by The National Center for Health Statistics, a component of Centers for Disease Control and Prevention.

Other Federal Contacts

Cancer Information Service (CIS) National Cancer Institute (NCI)

NCI Public Inquiries Office
Suite 3036A
6116 Executive Blvd. MSC 8322
Bethesda, MD 20892-8322
800.4.CANCER or 800.422.6237
www.cancer.gov

The Cancer Information Service provides accurate, up-to-date information on cancer to patients and their families, health professionals and the general public. This service provides the latest information on cancer treatments, clinical trials, tips on how to detect cancer early, tips on how to reduce your risk of cancer and community services for patients and their families. Your questions about cancer are always welcome, and all calls are confidential. Spanish-speaking staff members are also available to help you. Free booklets on cancer can be ordered.

Centers for Disease Control and Prevention (CDC)

Division of Cancer Prevention and Control
4770 Buford Highway, NE
MS K-64
Atlanta, GA 30341-3717
888.842.6355 phone
770.488.4760 fax
www.cdc.gov

Food and Drug Administration (FDA)

5600 Fishers Lane
Rockville, MD 20857-0001
888.INFO.FDA (888.463.6332) phone
www.fda.gov

National Center for Health Statistics (NCHS)

Division of Data Services
Hyattsville, MD 20782
301.458.4000 phone
www.cdc.gov/nchs

National Health Information Center

P.O. Box 1133
Washington, D.C. 20013-1133
800.336.4797 phone
www.health.gov/nhic

National Library of Medicine

8600 Rockville Pike
Bethesda, MD 20894
888.346.3656 phone
301.402.1384 fax
www.nlm.nih.gov

Office of Disease Prevention and Health Promotion

1101 Wootton Parkway
Suite LL400
Rockville, MD 208
240.453.8280 phone
240.453.8282 fax
<http://odphp.osophs.dhhs.gov>

Non-Profit Agencies and Research Centers

American Association of Retired Persons (AARP)

601 E St. NW
Washington, D.C. 20049
800.424.3410 phone
www.aarp.org

American Cancer Society (ACS)

1599 Clifton Road NE
Atlanta, GA 30329
888.687.2277 phone
www.cancer.org

The ACS is a national organization with local offices throughout the U.S. It provides information and referrals to numerous local and community support services as well as maintaining a library of cancer education publications available to the public.

AMC Cancer Research Center

1600 Pierce Street
Denver, CO 80214
800.321.1557 phone
303.239.3400 fax
www.amc.org

The AMC Cancer Research Center provides information on symptoms, diagnosis, treatment, psychosocial issues, support groups and other valuable resources, such as financial aid and transportation services.

Intercultural Cancer Council (ICC)

6655 Travis, Suite 322
Houston, TX 77030-1312
713.798.4617 phone
713.798.6222 fax
www.iccnetwork.org

The Intercultural Cancer Council is comprised of a number of national minority and non-minority organizations. The mission of the ICC is to develop policies and programs that address the high incidence rates of cancer among minority populations.

National Breast Cancer Coalition

1101 17th St. NW
Suite 1300
Washington, D.C. 20036
202.296.7477 phone
202.265.6854 fax
www.natlbcc.org

The coalition advocates increased funding for breast cancer research, improved access to high-quality breast cancer screening, diagnosis and treatment, particularly for the underserved and underinsured.

National Women's Health Network

514 10th St. NW, Suite 400
Washington, D.C. 20004
202.347.1140 phone
202.347.1168 fax
www.womenshealthnetwork.org

The network provides newsletters and position papers on women's health issues and concerns.

Self-Help for Women with Breast or Ovarian Cancer (SHARE)

1501 Broadway, Suite 704A
New York, NY 10036
866.891.2392 phone
212.869.3431 fax
www.sharecancersupport.org

The Susan G. Komen Breast Cancer Foundation

5005 LBJ Freeway, Suite 250
Dallas, TX 75244
1.800 I'M AWARE® (1.800.462.9273),
9 a.m. to 4:30 p.m. CST,
Monday - Friday.
972.855.1600 phone
www.komen.org

The Komen Foundation provides a Toll-Free Breast Care Helpline that is answered by trained, caring volunteers whose lives have been personally touched by breast cancer. They can provide the latest breast health information. *Se habla español.* TDD is also available.

YWCA Encore Plus Program

1015 18th Street NW, Suite 1100
Washington, D.C. 20036
202.467.0801 phone
202.467.0802 fax
www.ywca.org

Encore Plus is a breast and cervical cancer outreach and screening program for women over 50.

Y-ME

212 West Van Buren St., Suite 500
Chicago, IL 60607
800.221.2141 phone
800.986.9505 (Spanish)
312.294.8597 fax
www.y-me.org

Y-ME provides peer support and information to women and men who have or who suspect they have breast cancer.

Checklist for Developing Effective Cancer Education Print Materials



CONTENT

- Is the content relevant to the practices or lives of your African American readers?
- Is the content organized in a logical, easy-to-follow sequence?
- Are all major ideas summarized or reviewed to reinforce key concepts?
- Is the material medically accurate?
- Is the material interactive, promoting audience involvement?
- Is the tone positive and encouraging?

COMPREHENSION

- Is word choice appropriate for your African American audience?
- Are sentences and paragraphs short, simple and written in the active voice?
- Is the vocabulary level appropriate for your African American audience?

DESIGN

- Does the material use advance organizers (i.e., icons, headers or subtitles) that are related to the text?
- Are underlining, bulleting and bolding of type used for emphasis and organization?
- Are type style and size easy to read?
- Is the material well-organized to enhance visual appeal?

GRAPHICS

- Are visual elements colorful and eye-catching?
- Do photographs, illustrations and other graphic elements relate to the text?
- Do photographs, illustrations and other graphic elements relate to your African American audience?
- Are African American stereotypes avoided in your content and visuals?

FORMAT

- Is the format appropriate for the intended use of the materials?

COST

- Is the cost of the print product feasible?



The Susan G. Komen
Breast Cancer Foundation

5005 LBJ Freeway, Suite 250, Dallas, Texas 75244

Tel: 972.855.1600 Fax: 972.855.1605

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www.komen.org