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Patient education pamphlets

Medical information

“Simply Put”

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Why are health care settings unique for health education?

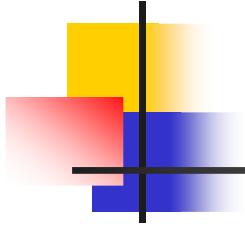
- *First:* improved health is the primary objective of activities in this setting
- *Second:* health care providers are considered credible sources of health information



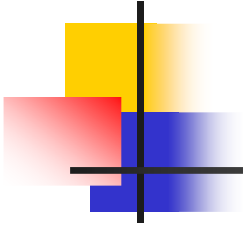
Usually patient education materials are designed to:

- Inform and educate: translating appropriate scientific knowledge into lay terms
- Assist patients: solve problems, cope, modify health related risks and behaviors, comply to recommendations of health providers

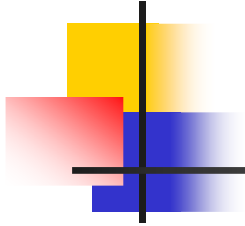
Both can be relevant to a wide range of patient education needs which include: increasing awareness, changing attitudes and beliefs, motivating and supporting behavior change efforts etc..



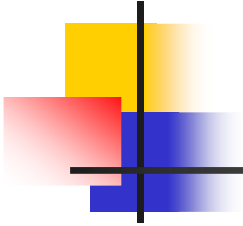
How can educational material stimulate the reader?



For patient education materials to stimulate changes in knowledge, attitudes or behavior patients must: pay attention to material & understand content
(materials don't work on their own)

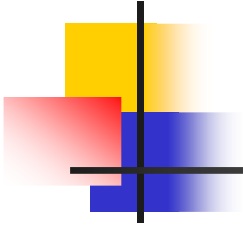


What are the limitation (s) of educational leaflets?



Limitations of print materials:

One size fits all, created for the general population (don't consider specific characteristics of patients)

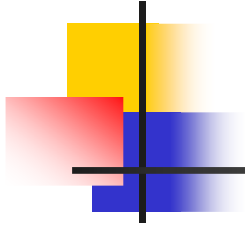


Patients ability to read and understand written information is influenced by both content and design; must consider literacy of clients and readability of content



How to write patient materials

- Step 1: Define the target audience: age, education, beliefs (of typical family & patient), what are some of their questions/ fears
- Step 2: define objectives for the material (knowledge, attitudes and behaviors)
“patient will recognize 3 warning signs of infections from a post surgical incision”
- Step 3: write an Outline (prepare and organize your information)



- *Step 4:* write a draft

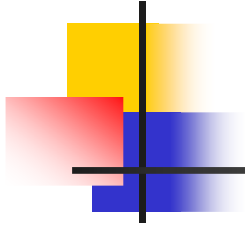
Message Content

- Include date: up to date information
- relevance
- Culture, gender & age appropriate
- Limit content “to need to know”; skip details “nice to know”
(if writing about lyme disease no need to tell about when and how lyme disease was discovered)
- Repeat and summarize main points
- Use concrete examples (**instead** of “dirt and other debris contaminate food”; **write** “cover food in the kitchen”)

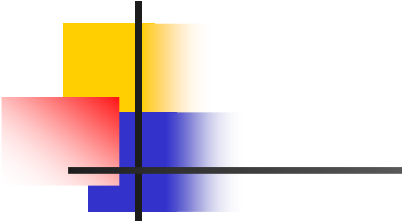


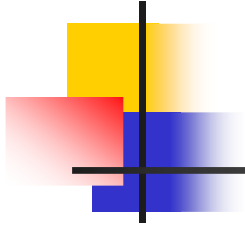
Cont'd

- Be positive; tell readers what they **should do** (not what they should **not do**)
- Tell readers what they gain/ benefit from material
- Avoid symbols: dirt + food =
- Avoid statistics: use most, many
- Keep writing simple and direct (short sentences/ paragraphs, define technical words
- Make text interactive: use you/ your; questions/ answers



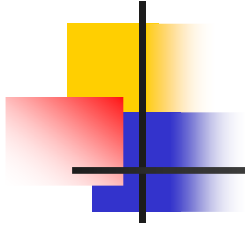
- *Step 5*: design/ visual appearance
 - Font: between 12-14
 - Bold letters/ bullets
 - Leave lots of white space
 - Illustrations (simple line drawings)
 - No diagrams/ tables/ graphs
 - Relevant
 - Familiar and easily recognized
 - Action graphics/ show desired behavior





Tips on translation:

- Avoid literal translation
- Use back translation
- Make sure its relevant/ culturally appropriate/ affordable/possible
- Field test



- *Step 6*: field test;
 - feedback from target group
 - Other health care providers

- *Step 7*: edit and revise
- *Step 8*: Arrange for printing/
distribution
- *Step 9*: evaluate (how?/?)

Critique the pamphlet you have by considering the following:

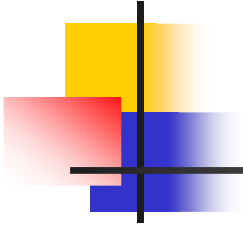


- Who is the audience, Characteristics
- What is/are the objectives
- Layout: spacing, font
- Visuals:
- Content
 - Organization
 - Clarity: words used, length/number of messages, tone
 - amount of information
 - is it culturally appropriate



What to you think ?

- Is placement of educational materials in waiting rooms an effective form of patient education ?
- Is this passive mean of education replacing a more active approach (clinician- initiated) ?
- Are clinicians assuming that patients are obtaining information in the waiting room and thus are not providing them with information?



The combination of these factors:

people who are more “than usual” receptive to health information (*patients*) interacting with professionals who are trusted (*health providers*) creates an environment conducive to effective patient education