

# HISPANICS/LATINAS

Developing Effective Cancer  
Education Print Materials





*Hispanics/Latinas: Developing Effective Cancer Education Print Materials*  
is a publication of the Susan G. Komen for the Cure.

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# Hispanic/Latino Advisory Group

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# Contents

<b>Hispanic/Latino Advisory Group</b>	<b>2</b>
<b>Foreword</b>	<b>4</b>
<b>Acknowledgments</b>	<b>5</b>
<b>Introduction</b>	<b>6</b>
<b>Step 1: Identifying Your Intended Audience</b>	<b>10</b>
Define the Hispanic/Latina population you want to reach. Tailor your materials.	
<b>Step 2: Researching Your Hispanic/Latina Audience</b>	<b>11</b>
Check existing sources of information. Conduct your own research. Work with other groups. Collaborate with experts. Use focus groups. Use the Internet.	
<b>Step 3: Determining the Objective of Your Educational Materials</b>	<b>15</b>
Focus on the message. Use themes relevant to the lives of your readers. Place information in context. Present medical information clearly. Use accurate medical material. Involve your readers.	
<b>Step 4: Developing the Content</b>	<b>17</b>
Organize the content in a logical manner. Choose words carefully. Maintain an appropriate vocabulary level. Working with Spanish. Keep it simple. Keep it positive. Use headlines and other titles to organize the content. Review and summarize your major ideas.	

## **Step 5: Developing the Visuals**

**21**

Match the format to the product's intended use.  
Use graphics that capture the reader's attention.  
Tailor the visuals to your audience.  
Organize the material to maximize visual appeal  
Position graphic elements with purpose.  
Choose a user-friendly type style.  
Organize and emphasize text with typographic markers.  
Check cost feasibility.  
Check for accuracy.

## **Step 6: Testing Your Materials**

**25**

Always pretest.  
Use focus groups throughout the process.  
Use the enclosed checklist.

## **References**

**27**

## **Breast Health Resources**

**28**

## **Checklist**

**34**

## Foreword

Susan G. Komen for the Cure, 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 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, Komen commissioned the production of guidelines for culturally relevant educational materials designed for medically underserved audiences. To develop these guidelines, we 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 Komen 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.

**Cheryl Kidd, M.P.H.**  
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The entire project involved the support and counsel of health professionals with extensive experience in working with Hispanic/Latina audiences on cancer prevention and control activities across the United States.

# Introduction

## This Guide and the Underserved Hispanic/Latina Audience

### About the Guide

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

**Development:** In preparing this guide, an expert review panel of cancer material developers was assembled. Their assessments identified aspects of the materials that influence their effectiveness among Hispanic/Latina readers. Their support and direction 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:

- That appropriate Spanish language materials do not exist, so new materials need to be created
- 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 to 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 Hispanic/Latina community.

### Diversity of the Hispanic/Latina Population

In working with Hispanics/Latinas, we must be ever mindful that this is not a homogeneous population. Differences in culture, living conditions, philosophy, attitude, behavior, education, income and the full spectrum of life experiences are represented under the umbrella term Hispanics/Latinas. In addition, heritage, country of origin and geographic location strongly influence the various Hispanic/Latina populations in this country. To develop breast health materials for a particular Hispanic/Latina 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 creating and tailoring breast health materials for women who are medically underserved. This segment of the Hispanic/Latina population, regardless of other distinctions, may reflect very different values, circumstances, cultural influences, belief systems, income and education levels. It is important that all Hispanic/Latina women receive regular screening.

### General Demographics

In 2002, the Hispanic/Latino proportion of the U.S. population was approximately 13.3%, or roughly 37.4 million people. The Hispanic/Latino population encompasses the complete racial spectrum: Anglo, African, Asian or Pacific Islander, and Native American. The diversity extends to country of origin, customs, religion, socioeconomic status and other factors. Of the total Hispanic/Latino population in the U.S., about 66.9% are Mexican American, 14.3% Central/South American, 8.6% Puerto Rican, 3.7% Cuban American and the remaining 6.5% from other countries.<sup>1</sup>

### Breast Cancer Prevalence

Breast cancer is the most common cancer among Hispanic women. Hispanic/Latina women show lower breast cancer screening rates than non-Hispanic/Latina White women and tend to seek and attain health care services less frequently than other ethnic groups.<sup>2,3,4</sup> Studies also show that even though Hispanic/Latina women have lower breast cancer rates (89.8 per 100,000), they are more likely to be diagnosed at a later stage than non-Hispanic women.<sup>5,6</sup> From 1996-2000, the average annual mortality rate for Hispanic/Latina women was 17.9 per 100,000.<sup>6</sup> This contradiction is due to the fact that Hispanic/Latina women are less likely to participate in breast cancer screening.

There are numerous reasons for the underutilization of breast cancer screening services among Hispanic/Latina women. Hispanic/Latina women frequently are poor, lack health insurance, have fewer years of formal education, and have higher unemployment rates, leading to fewer resources to pay for medical care.<sup>7,8,9</sup> The problems are compounded by limited knowledge about cancer-related risk factors and cancer screening procedures. Cultural and language barriers also keep Hispanic/Latina women from seeking health care or cancer-related services.<sup>9,10</sup>

Studies consistently show that low income, low educational attainment, lack of health insurance, inability to speak English, lack of awareness of breast cancer risks and screening methods, acculturation level and lack of physician referrals play important roles in the lower rates of screening utilization by Hispanic/Latina women.<sup>11,12,13</sup>

## Communicating Health Information to Hispanics/Latinas

One of the most effective and efficient ways to communicate breast health information to underserved groups, including Hispanic/Latina women, is through carefully developed, culturally relevant, concise and easily understood educational materials.

Language is clearly a major consideration for those producing health promotion materials for Hispanics/Latinas. For print materials to be effective, proper and accurate use of the Spanish language is critical. This is further complicated by variations in lexicon and idioms that are relevant to Hispanic/Latina groups. These variations may be due to country of origin, regional locations within the U.S., acculturation within the American culture, and other factors.

Literacy levels must carefully be observed through local research and testing of materials during development. Use of visuals also presents challenges, as colors and images may have different meanings for different Hispanic/Latina audiences. Again, tailoring messages to the unique culture, language usage, educational level, regional orientation and life experiences requires knowledge of the specific Hispanic/Latina audience(s) that you wish to reach with breast health and breast cancer information.

## Ethnic Identifiers

There is ongoing debate regarding the most appropriate terminology for identifying Spanish-speaking individuals who originate from Latin America: the Caribbean, Mexico, Central America and South America, as well as Spain. At this time, “Hispanic” is the most common term used among state and federal agencies.<sup>13</sup> Other terms that have gained popularity are specific to countries of origin (e.g., Mexican American, Puerto Rican, Cuban American). More recently, the term “Latino” has emerged as a front-runner in the search for a universal identifier that embraces the historical, political and geographic contexts of individuals who live in the United States but whose country of origin is in the Caribbean or Latin America.<sup>13</sup> For the purposes of these guidelines, the term “Hispanic/Latina” will be used to describe the heterogeneous groups that comprise this unique population.

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# Step 1: Identifying Your Intended Audience

## Define the Hispanic/Latina population you want to reach.

Prior to addressing any health communication needs of the Hispanic/Latina audience, you will need to understand the broader context of their everyday experiences as human beings. As you will learn, Hispanics/Latinas are a diverse group of people.

It will be necessary to define the audience, and this will require learning as much as possible about the characteristics they share — factors such as age, sex, geographic location, language, occupation, education, income, attitudes, behaviors, opinions, values, beliefs, information-seeking preferences and more.

Keep in mind not only what sets the Hispanic/Latina community apart from other groups but also the diversity that exists within the community itself — culture, living conditions and other differences, such as:

- National origin
- Social networks and family customs
- Socioeconomic status (income, education, occupation)
- Acculturation
- Health care beliefs, needs and practices (i.e., cancer, folk medicine, health systems)
- Regional/geographic differences (rural vs. urban)
- Prevalence of spiritual/religious practices
- Immigration status
- Language proficiency/preferences for speaking, reading, writing in Spanish and English
- Relative stability of the community (i.e., seasonal migration)

Defining your audience is the first and most important step in developing the most effective materials. The more you know about your audience, the better you will be able to adapt your materials.

## Tailor your materials.

The Hispanic/Latina population spans various racial groups and countries of origin, with many different variations in culture. For your print materials to achieve optimal effectiveness, each reader should feel that your product was developed with her and her family in mind. For this reason, an acute awareness of culture, language and sensitivity to the living conditions should be a guiding factor behind any materials you produce for Hispanics/Latinas.

What is the role of this sensitivity in selecting and developing print materials? It is recognizing the range of characteristics inherent in Hispanics/Latinas, then using language that reflects those characteristics, as well as sensitive graphics and appropriate situations that acknowledge those distinctions. The most valuable input regarding your

intended audience will be provided by representatives of that audience. Their participation in all phases of material development is critical.

Any discussion of health topics is very personal. An awareness of your Hispanic/Latina 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 sensitive, thoughtful and appropriate materials.

## Step 2: Researching Your Hispanic/Latina 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 Hispanics/Latinas. 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 (e.g., 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 Hispanics/Latinas

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

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.

Also, revise and update the information you find, using the following guidelines to make it appropriate for your audience. This will save both time and money. Keep in mind that there are limitations to all information resources. You may find little or no information on the group you're trying to reach. At that point you must decide what resources or strategies are available to conduct your own research.

### **Conduct your own research.**

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

- Lack of Hispanic/Latina health care professionals or of a bilingual staff
- Poor quality of existing education materials
- Unemployment, lack of insurance, immigration status, inability to afford care
- Language barriers, low literacy, lack of health information
- Need for child care or transportation
- Mistrust or difficulties when navigating the health care system
- Fears, fatalism, aversion to questioning authority
- Sexual and personal modesty
- Alternative medicines and treatments (folk medicine)
- Country of origin and specific variations in cultures and beliefs

You should conduct audience interviews and surveys, or assemble focus groups to refine collected information about the experiences, attitudes and behaviors of your Hispanic/Latina audience.

Other useful information regarding the content and/or visual appearance of your materials can be obtained by studying existing health-promotion, consumer-oriented print products aimed at Hispanics/Latinas. Even if these materials are not well produced, they may be useful as comparisons for what to avoid. These products also should be reviewed by audience members to help guide the development of your own materials.

### **Work with other groups.**

While conducting your research, keep in mind other groups or organizations whose goals might coincide with yours. Combining forces on a joint project can save time and money. Moreover, working with ethnic community agencies, organizations, churches and/or community gatekeepers

from the start will help you develop effective materials and establish a network that can assist with dissemination of materials. Such organizations include:

- Private and non-profit foundations
- Breast health organizations and coalitions
- Hispanic/Latina organizations and coalitions
- Federal and state government agencies
- Religious organizations
- Public health departments, community clinics, public hospitals

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

Depending on the goals of other groups, it may be possible to collaborate on materials production in some way that will further your own goals. Before collaborating, be sure that your intended audience's goals and interests in breast health are indeed similar. This will help ensure the appropriateness of your materials as well as preventing unnecessary duplication of resources.

### **Collaborate with experts.**

Seek out people who have experience and expertise in communicating and interacting with the Hispanic/Latina 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.

Seek help in researching existing materials and customizing them for the Hispanic/Latina population, as well as help in conducting new research. Members of the Hispanic/Latina 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 Hispanic/Latina 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 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. Depending on your resources, you can contract with local marketing research services or you can do the research yourself, using a guide such as *Listening to Your Audience*.

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

### **Use the Internet.**

The Internet is an excellent, low-cost avenue to information. There are many Web sites 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 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, perhaps even used a preliminary focus group. 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. These may be lists of risk factors or possible symptoms, for example. 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 academic, condescending or “preachy.” Also, incorporate what you learned from the focus group. For example, include words that members of the focus group used or identified with.

### Use themes relevant to the lives of your readers.

The Hispanic/Latina community, like other ethnic groups, has specific values, issues and concerns, and these should be addressed in the content of your material. Examples may include:

- Importance of the family for support and decision making
- Concepts such as fatalismo (fatalism), simpatia (preference for positive interpersonal behaviors and avoidance of interpersonal conflict) and respeto (deference to authority)
- Language preferences

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 and cultural differences when addressing the Hispanic/Latina population.

### Present medical information clearly.

Clear and understandable background information on your subject and cultural relevance to your audience comprise 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 subject matter. This will help avoid confusion and alienation.

For example, use of the term “breast cancer” should be avoided; instead, focus on “breast health.” Discuss breast health in the context of overall health, emphasizing the need for women to remain healthy so they can take care of their families.

As another example, referring to breast self-examinations or mammograms may result in various reactions, depending on education, cultural factors, acculturation and other influences.

Avoid including information that is not required for your reader to perform the desired behavior. Don’t confuse lengthy or complicated medical jargon with background information. Give your readers simple, comprehensible facts and figures without frustrating or overwhelming them. It is more important to focus on what you want the reader to do — that is, the desired health behavior.

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

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

### **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?

If you are adapting existing education materials, these may need to be updated or revised due to the circumstances of your specific audience. Consult with medical experts or others producing materials to review your initial and final drafts and to verify the accuracy of your content.

Contact local health departments, medical schools, research centers, teaching hospitals or community-based clinics to help identify potential experts and to confirm the latest medical advances and findings. The more specific resources and people are to your content area the better. See the Breast Health Resources section at the back of this guide to aid your search for medical experts and information.

## Involve your readers.

Your readers should see themselves as active participants in the subject of your materials. Your message should include a call to action that is clearly within their abilities and available resources. For example, rather than simply listing risk factors, emphatically encourage appropriate screening or tests.

Write from a reader's perspective. Think about what kind of questions the reader has and would like answered. Use practical and culturally sensitive “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 health care providers. Examples of questions women may need answered include:

- Why am I at risk?
- How often do I need screening?
- Is transportation or child care available?
- Are female health care providers available?
- Are Spanish speakers available to answer my questions?
- How will I learn about test results?
- Who do I call if I have more questions?

If your materials are intended for a limited geographic area, it is helpful to supply information about local resources, such as addresses and phone numbers of neighborhood clinics and other health care facilities. Be sure to include information about Spanish-speaking support services, if they exist. Check your contact information to ensure that it is current and accurate.

Strive to make your materials as interactive as possible. The reader should feel connected to your message and able to follow the course of action outlined in your 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 or wordy
- You assume that your reader already has considerable knowledge about the subject

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

### Choose words carefully.

The key to developing effective and culturally appropriate materials is to use clear and precise language. To avoid confusion or potentially insulting language, be aware of what certain words or phrases may represent to your audience.

For instance, the terms “Hispanic” and “Latina” are both widely accepted. However, some Spanish-speaking audiences don’t like either identifier. Another example of the cultural influence in word selection is the use of “*seno*,” “*pecho*”, “*mama*” and “*busto*” by different Hispanics/Latinas in referring to breasts.

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 Hispanic/Latina 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. You must thoroughly understand the literacy level of your audience. 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 (i.e., native) language.

Among lower-literacy 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 can make your print materials practically unreadable.

Explain each technical term, such as “screening” and “mammography,” so that readers understand the word or procedure before they visit a doctor or clinic. You may want to break content into a step-by-step format and support it with illustrations. In some instances, a more specific depiction of actual performance is necessary and a video format may provide a more effective educational tool.

For the English language, there are several readability tests that can show the literacy level of your materials. These include SMOG, FOG and Fry tests. At this time, no similar reliable tests are available for Spanish-language materials.

### **Working with Spanish**

This guide does not promote an exclusive approach to creating Spanish-language materials. Under ideal circumstances, developing materials “from scratch” in Spanish may be the best choice. However, this is not always feasible. Sometimes, it is not possible, or necessary for that matter, to make Spanish the only language used during the development process. Indeed, you will find that existing English-language materials often can be translated into Spanish and prove very effective for your purposes.

The development process should be based on 1) the realities of the resources available and 2) close adherence to the principles outlined in these guidelines for the creation of print materials. To be sure, extensive participation and review by experts and your intended audience will be necessary to assure that the format is acceptable and the content is understandable.

Due to the linguistic differences found throughout the various countries of origin of the Hispanic/Latina population, it is best to choose words and grammatical structure that are as generic or universally accepted as possible. When creating materials for a very specific

audience, such as women of North Mexican origin, you may be able to use terms unique to that region, but you may have difficulty sharing those materials with someone whose country of origin is Colombia.

As a general rule, use plain Spanish when possible, and select Spanish-language reviewers who represent a variety of countries of origin. With the advent of computer programs to accomplish specialized tasks, it is tempting to rely on “translation” software to create materials in Spanish. However, this is not advisable, because electronic translation techniques can introduce many of the problems described above.

Finally, carefully select translators based on experience and professional referrals. You may even find it necessary to get “second opinions” from additional translators or to employ a review committee of several well-seasoned professionals who can help you arrive at an acceptable consensus regarding terms or structure that are potentially controversial.

### **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 health care provider”), rather than the passive voice (“your health care provider should be consulted”). Using the active voice boosts your language’s effectiveness and engages the reader.

After writing your materials, test the reading level to make sure it is appropriate for your audience. Materials should be written at no higher than a 3rd to 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 Hispanics/Latinas, 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 organizing techniques 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 and simple and be placed near the relevant text. They are effective in helping to divide categories, introduce a change of topics, organize advice or accentuate a call to action. It also should be noted that Spanish-language documents typically avoid the use of all-capital letters in headlines and subheads.

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

### **Review and summarize your major ideas.**

Your readers have been introduced to numerous facts, ideas and suggestions connected with health information – some familiar to them, some not. A summary is fundamental to convey 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 specific 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 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 living conditions of the intended Hispanic/Latina 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. Covers especially should be bright and eye-catching. Avoid gloomy or pale colors, such as gray. Use active photographs, high-quality illustrations and colorful graphics.

In photographs and illustrations, present Hispanics/Latinas that mirror your intended audience. Depict scenes and situations that are similar to their own experiences and living conditions. For example, place subjects in everyday situations, such as talking with friends or family, or engaging in religious activities.

Pictures should realistically portray Hispanics/Latinas, reflecting diversity in anatomical features, skin color, hairstyles, clothes and so on. Make sure the portrayal is positive and avoids stereotypes. Try to present women of different ages engaged in different settings and activities. Use pictures of health care providers – as well as patients — who are Hispanic/Latina.

In other design elements, such as icons and logos, incorporate visuals that are appealing to your audience. Remember, appropriate or acceptable visuals may change from one Hispanic/Latina audience to another.

### **Tailor the visuals to your audience.**

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. For example, be sensitive to stereotypes associated with Hispanics/Latinas, such as young women with several children, individuals wearing excessive jewelry, or appearing economically disadvantaged.

Address sensitive topics directly but tastefully. Use 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, attitudes and life experiences of the Hispanic/Latina community.

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 that are direct, well-composed and free from “busyness.”

Remember that charts, graphs and diagrams usually have little appeal for audiences with limited literacy skills. If used, they should be simple, use common, non-technical language 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 conditions under which your Hispanic/Latina audience members live their lives.

Be realistic concerning budgets for writing, photography, illustration, production, printing and distribution.

### Choose a user-friendly type style.

Materials that are 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; San Serif typeface (i.e., Arial) 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 harder to read.

Watch for any font characteristics that may make reading your text an unpleasant chore. Avoid mixing font sizes, styles and colors.

- *This 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. Type that is at least 12 points is usually effective, with 16 point type preferred for an older audience. Here are examples of various type sizes:

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

### **Organize and emphasize text with typographic markers.**

Use typographic markers such as underlining, bulleting, different colors 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 symbols and other visual elements that have meaning to the Hispanic/Latina audience, reinforcing the message that your product is designed with the specific reader in mind. As a general rule, don't use ALL CAPITAL LETTERS in English and never use ALL CAPS in Spanish.

### **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 those that can be easily reproduced without copyright infringement. When designing your own materials, be aware that 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.

It is a good idea to employ an independent translator to perform a "back translation" from Spanish to English as a method of double-checking fidelity to the concepts and excessive or ineffective idiom usage.

Also, have a medical professional check the final version to confirm that the information is still medically accurate. Local chapters of national organizations or associations of certified translators are one source of professional language services. College or university language departments also can be a good resource for finding high-quality translation or editing support.

## Step 6: Testing Your Materials

### Always pretest.

Obtaining feedback prior to printing is essential for culturally-sensitive materials. This will measure your Hispanic/Latina 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? Focus groups with Hispanics/Latinas for whom this product is intended can help answer these questions. It is also helpful to receive input from health care experts who work with your population.

### When pretesting ask these four questions: Are your materials:

- Attractive to the Hispanic/Latina 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. 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 action or change your behavior? How? When? Why?
- 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 suggestions for revision.

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 Hispanics/Latinas.

## 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, 1994. <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](http://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>

*Multilingual Health Resource Guide 2nd Edition*. 1998. Center for Applied Linguistics, Washington, D.C.

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

# Hispanic/Latina Breast Health Resources

## **National Hispanic Medical Association**

1411 K Street NW, Suite 200  
Washington, D.C. 20005  
202-628-5895 phone  
[www.nhmamd.org](http://www.nhmamd.org)

## **National Council of La Raza**

1111 19th Street NW, Suite 1000  
Washington, D.C. 20036  
202-785-1670 phone  
[www.nclr.org](http://www.nclr.org)

## **National Alliance for Hispanic Health**

1501 Sixteenth Street NW  
Washington, D.C. 20036  
202-387-5000 phone  
[www.hispanichealth.org](http://www.hispanichealth.org)

## **National Hispanic Center on Aging (NHCOA)**

1341 Connecticut Ave.  
4th Floor, Suite 42  
Washington, D.C. 20036  
202-429-0787 phone  
202-429-0789 fax  
[www.nhcoa.org](http://www.nhcoa.org)

## **The Cross Cultural Health Care Program**

270 S. Hanford St., Suite 100  
Seattle, WA 98134  
206-860-0329 phone  
206-860-0334  
[www.xculture.org](http://www.xculture.org)

## **Latina Obstetrical and Gynecological Forum (OBGYN.netlatina)**

PO Box 18297  
Austin, TX 78760-8297  
512-418-2922 phone  
<http://latina.obgyn.net/espanol>

## Federal Government Contacts

### **The Office of Minority Health (OMH)**

P.O. Box 37337

Washington, D.C. 20013-7337

800-444-6472 phone

301-251-2160 fax

[www.omhrc.gov](http://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](http://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. Among other resources available at that site are The Minority Health Research Catalog, consisting of an annotated bibliography of studies relevant to the health of racial and ethnic populations, and The Minority Health Database Catalog which contains information about existing data sets that contain information on the health of racial and ethnic minorities. The project is sponsored by The National Center for Health Statistics, a component of Centers for Disease Control and Prevention.

OMH also provides a page of Federal Register Notices compiled from its reviews of the Federal Register on a periodic basis to identify general items of interest to racial/ethnic communities.

## 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

301-402-2594 fax

[www.cancer.gov](http://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)**

1600 Clifton Road

Atlanta, GA 30333

404-639-3311 phone

[www.cdc.gov](http://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](http://www.fda.gov)

### **National Center for Health Statistics (NCHS)**

Division of Data Services

3311 Toledo Road

Hyattsville, MD 20782-2003

301-458-4636 phone

[www.cdc.gov/nchs](http://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](http://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](http://www.nlm.nih.gov)

### **Office of Disease Prevention and Health Promotion**

1101 Wootton Parkway  
Suite LL100  
Rockville, MD 20852  
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](http://www.aarp.org)

### **American Cancer Society (ACS)**

1599 Clifton Road NE  
Atlanta, GA 30329  
800-ACS-2345 phone  
[www.cancer.org](http://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](http://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  
713-798-3990 fax  
[www.iccnetwork.org](http://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 Street NW, Suite 1300  
Washington, D.C. 20036  
202-296-7477 phone  
202-265-6854 fax  
[www.natlbcc.org](http://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](http://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 740A  
New York, NY 10036  
866-891-2392 phone  
212-869-3431 fax  
[www.sharecancersupport.org](http://www.sharecancersupport.org)

### **Susan G. Komen for the Cure**

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](http://www.komen.org)

Komen provides a 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](http://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 1100  
Chicago, IL 60607-3908  
800-221-2141 phone  
800-986-9505 (Spanish)  
312-294.8597 fax  
[www.y-me.org](http://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 Hispanic/Latina 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 Hispanic/Latina audience?
- Are sentences and paragraphs short, simple and written in the active voice?
- Is the vocabulary level appropriate for your Hispanic/Latina audience?
- Are there instructional, educational or format alternatives for low-literacy individuals?

## 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

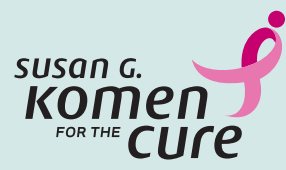
- Are visual elements colorful and eye-catching?
- Do photographs, illustrations and other graphic elements relate to the text?
- Do photographs, illustrations and other graphic elements relate to your Hispanic/Latina audience?
- Are Hispanic/Latina stereotypes avoided in your content and visuals?

## Format

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

## Cost

- Is the cost of the print product feasible?
- Does the format permit easy, low-cost reproduction by community partners?



1-800 I'M AWARE      [www.komen.org](http://www.komen.org)

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