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# Writing effective pamphlets: a basic guide

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# Writing Effective Pamphlets



## A Basic Guide



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**(June 1996)**

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## **Should I Use a Pamphlet At All?**

The first step to designing an effective pamphlet, is to decide whether it is an appropriate intervention for what you hope to achieve.

Pamphlets are relatively easy and cheap to produce. They can also be distributed widely fairly cheaply. Therefore, they have become a very popular and widely-used intervention, especially in the health promotion field. The NSW Cancer Council alone distributed over 1.3 million written education materials during the 1992-93 financial year. However, in many situations, pamphlets are likely to have little effect.

The table below summarises some situations where pamphlets are more or less likely to be effective. Although by no means definitive, you can use it as a guide to the likely effectiveness of your pamphlet. For example, if you're hoping to achieve a behavioural change among the last 15% of people to adopt the behaviour, a pamphlet is unlikely to be successful. On the other hand, if you're hoping to increase knowledge levels about a newly-discovered disease, a pamphlet is more likely to prove successful.

Situations where pamphlets are <b><u>MORE</u></b> likely to be effective.	Situations where pamphlets are <b><u>LESS</u></b> likely to be effective.
<ul style="list-style-type: none"> <li>• You aim to improve knowledge levels.</li> <li>• You aim to change people's attitudes.</li> <li>• They are used in conjunction with other interventions.</li> <li>• They are used for educating patients.</li> <li>• They are aimed at specific high-risk groups.</li> </ul>	<ul style="list-style-type: none"> <li>• You aim to change people's behaviour.</li> <li>• They are used alone.</li> <li>• They are used for educating the general population.</li> </ul>

## **What Should I Consider When Developing a Pamphlet?**

If you do decide to use a pamphlet as all or part of your intervention, the rest of this guide aims to help you to produce the pamphlet with the highest chance of achieving your aim. But there are no guarantees!

According to McGuire's Communication Persuasion Model, there are eight steps involved in the process of using an educational message to achieve a behavioural change: your target audience need to:

1. Be exposed to the message.
2. Attend to be message.
3. Be interested in the message.
4. Comprehend the message.
5. Acquire any skills necessary to yield to the message.
6. Yield to the message.
7. Retain and retrieve the message.
8. Engage in the behaviour.

Therefore, you need to consider how your pamphlet will tackle each of these steps. Fortunately, McGuire's eight steps can be simplified into four key issues:

1. Maximising the likelihood that ALL members of your target group receive and read the pamphlet.
2. Maximising the likelihood that ALL members of your target group understand the pamphlet.
3. Maximising the likelihood that ALL members of your target group can identify and remember the main message of the pamphlet.
4. Maximising the likelihood that ALL members of your target group adopt the desired behaviour.

Some advice about how to achieve each of these goals is provided in the rest of this manual.

## **How Do I Maximise Receipt and Readership of My Pamphlet?**

The two most commonly-used methods of distributing pamphlets are mailing them out or having health care professionals give them to patients. Although relatively little research has been done in this area, there is some evidence that:

- Distribution by health care professional tends to result in higher proportions of people recalling receiving the materials. This difference is likely to be largely due to the fairly high rate of inaccuracies in most of the databases used for mailing materials.
- Distribution by health care professional tends to result in higher proportions of people reporting having kept the materials.
- Distribution method tends to have little impact on the proportion of people who report having read any of the materials.

Therefore, in many cases, getting health care professionals to distribute pamphlets is likely to result in higher rates of receipt and readership. However, it is usually a much slower method of distribution than mailing the pamphlets: only about 70% of the Australian population visit a general practitioner, the most-visited health care professional, within a 12 month period.

Therefore, you will need to weigh up these issues when considering how to distribute your pamphlets. You will also need to consider your target group and whether there are any other convenient methods of distributing the pamphlets to them. For example, if your pamphlet is aimed at children, you may consider asking schools to distribute them for you.

## **How Do I Maximise the Comprehensibility of My Pamphlet?**

Four key factors have been found to improve the comprehensibility of written education materials:

1. **Using short words and sentences:** in standard writing, there are an average of 17 words per sentence and 147 syllables per 100 words.
2. **Using the active voice:** ie - "Your family doctor can check your blood pressure." as opposed to "Your blood pressure can be checked by you family doctor."
3. **Using the positive voice:** ie - "You should quit smoking." instead of "You shouldn't smoke."
4. **Ensuring the pamphlet requires a low reading level:** this tends to be a natural result of following the three former pieces of advice. But you should always check the readability of your pamphlet, as described in the next section.

## **How Do I Assess the Readability of My Pamphlet?**

Microsoft Word includes a program which can assess the required reading age of any document. So, all you need to do is to follow these easy steps:

1. Either prepare or convert your pamphlet into Word.
2. Select the "Tools" menu (single click).
3. Select "Grammar" (single click).

Word will then check all the spelling and grammar of the pamphlet, prompting you about a variety of potential problems, such as: incorrect spelling, use of the passive voice, use of sexist language, long sentences, etc. Not all of the comments will be relevant - if not, you can just click "Ignore".

When you get to the end of the spelling and grammar check, a table entitled "Readability Statistics" will appear on the screen. The only problem is that you can't print this (or, at least I haven't found a way to!) - so you need to write down the readability information for future reference - or you have to go through the grammar check again.

The Readability Statistics include the following pieces of information:

- The number of words, characters, paragraphs and sentences in your pamphlet.
- The average number of sentences per paragraph, words per sentence and characters per word in your pamphlet.
- The percentage of sentences written in the passive voice in your pamphlet.
- Four readability estimates: Flesch Reading Ease, Flesch-Kincaid Grade Level, Coleman-Liau Grade Level and Bormuth Grade Level. Each estimate is calculated by slightly different formulas.

The main bits of information that should concern you are the number of words per sentence (aim for less than 17), the percentage of sentences written in the passive voice (aim for 0%) and the Flesch-Kincaid Grade Level (aim for 6 or less). The Flesch-Kincaid Grade Level is based on the average number of syllables per word and of words per sentence. The grade levels roughly correspond to years of schooling. For example, people would need at least a Grade 8 level of education to be able to read a pamphlet with a Flesch-Kincaid Grade Level of 8. The table over the page indicates the proportion of the general adult population considered capable of reading pamphlets of each Grade Level.

Flesch-Kincaid Grade Level	Reading ease description	% population expected to understand
4	Very easy	90%
5	Easy	86%
6	Fairly easy	80%
7 - 8	Standard	75%
9 - 10	Fairly difficult	40%
11 - 14	Difficult	24%
15 - 16	Very difficult	2%

### **How Do I Emphasise the Main Message of My Pamphlet?**

The best way to ensure that people grasp the main message of your pamphlet is to keep it very simple. Don't include too much information. Before you start writing, sit down and consider the key points: try to keep it to a maximum of five - and write a brief piece of information addressing each key point.

Seven techniques have been found, in the literature, to have a positive effect on readers' ability to identify and/or remember the main messages of written materials:

1. Having a title which explains the materials.
2. Putting the key point first in the materials.
3. Repeating the key points within the materials.
4. Using question-based paragraph headings.
5. Visually emphasising the key points - ie: bolding, underlining, using colour, etc.
6. Avoiding the use of symbols.
7. Using illustrations - try to make them as appropriate to your target group and topic as possible.

These techniques have been tested and found effective. However, you should also use your common sense when developing a pamphlet. For example, don't use anything less than a 12 pitch font - if you can't fit all your text onto the page, reduce the text, not the font size. If you are targeting elderly people, you may need to use a larger font size - to allow them to read it without straining their eyes. Similarly, it's best to try to use 1½ spacing and to spread out your paragraphs - if it's too cluttered, people just won't read it.



## **How Do I Maximise Behaviour Change?**

As with any other attempt at behaviour change, the standard behaviour change models can be applied to written education materials. Two of the most commonly-used models are discussed below.

### **Health Belief Model**

The Health Belief Model states that an individual's preparedness to engage in a desired health behaviour is related to the perceived severity of the related disease (or other consequence of not doing so), their perception of personal susceptibility to the disease (or other consequence) and the perceived trade-off between the costs and benefits associated with engaging in the behaviour.

Therefore, in your pamphlet, you should include information addressing each of these issues. Common ways of doing this are to say how many, or what proportion of people develop the disease (severity); the types of people who are more likely to develop the disease (susceptibility); emphasising the benefits that can be expected from engaging in the desired behaviour (benefits); and minimising the costs (money, time, side effects, etc) associated with engaging in the desired behaviour (costs).

### **PRECEDE-PROCEED Model**

The PRECEDE-PROCEED model of health promotion suggests that three types of factors influence the uptake and maintenance of any health behaviour. These are predisposing factors, which increase or decrease the individual's motivation to change; enabling factors, which help or hinder the individual's attempts at behavioural change and reinforcing factors, which increase or decrease the likelihood of a behavioural change being maintained.

Therefore, in your pamphlet, you should include information addressing each of these issues. Common ways of doing this are to highlight the potential benefits of engaging in the desired behaviour (motivating); telling people where, when and/or how they can engage in the desired behaviour (enabling); and telling people of the longer term benefits of maintaining the behaviour (reinforcing).

## **References for More Information**

Most of the information for this seminar and manual have been extracted from Chris Paul's and my own PhD theses, which are available from the Resource Centre. Some of the thesis chapters have also been written up as papers - I'm sure they all will be one day! - so check the Publications list.

**Well - That's All Folks!**

**Now all you have to do is write the pamphlet and start using it.**

**GOOD LUCK!**