



Health Literacy Guidance

About 30 million Americans have below-basic literacy, which can hamper the understanding of research. The following are best practices for drafting consent forms that facilitate participant comprehension.

Formatting:

- Use 12 point font or larger. Also, do consider your audience (e.g., participants with low vision might benefit from a larger font size).
- Use a serif font (a serif is a small line attached to the end of a stroke, e.g., Times New Roman)
- Utilize subheadings
- Use left justification (keep the right margin jagged)
- Remove excessive blank spacing throughout the document.
- Use bullet points, when appropriate.
- Avoid using ALL CAPS. Instead, utilize **bolded** or underlined text to emphasize important information.
- Avoid splitting words across two lines

Prose:

- Write in plain, “every day” language. Consent forms intended for the general population should be written at a 7th to 8th grade reading level.
- Avoid the use of medical jargon, when possible. If you must use medical jargon, provide a lay definition or description after introducing it.
- Be concise! Remove unnecessary and repetitive information.
- Break up sentences joined with conjunctions, or semicolons into individual sentences.
- Try to keep sentence length to 15 words or less.
- Limit each paragraph to one main idea.
- Use active voice as often as possible. For example: “We will ask you questions about your health” is active rather than “You will be asked questions about your health”.
- Write out all acronyms with their first use

Other Aids

- Use graphics, pamphlets, videos, etc. if this may enhance participant comprehension

Regardless of the study condition or population, remember that laypersons may be unacquainted with concepts such as placebo, randomization, voluntariness, and the differences between the nature of research and the nature of standard, therapy-oriented health care. Communication that emphasizes these concepts in an accessible way can pave the way to truly informed consent.

Reference: Ridpath JR, Greene SM, Wiese CJ; PRISM Readability Toolkit. 3rd ed. Seattle: Group Health Research Institute; 2007.