Tips for Using a Trauma-Informed Lens to Develop or Select I&E Materials

Informational and educational (I&E) materials for clients are an important component of Title X services. Therefore, it is important for I&E materials to be of high quality and trauma-informed.

The goal in creating (or selecting) trauma-informed I&E materials is to provide information that feels trustworthy, accessible, engaging, relevant, helpful, and useful to the client. Overall, to be considered trauma-informed, I&E materials should:

- Be clear and easy to understand
- Use a friendly, respectful tone
- Avoid judgmental or stigmatizing language
- Incorporate inclusive language and images
- Approach the client as a partner in decision making and care
- Reflect input from the intended audience

This job aid for Title X projects offers tips and strategies for developing I&E materials—or selecting them from other sources—using a trauma-informed lens and approach.



Words Matter

Just as with spoken communication, in written communication it is important to think about both the words and tone of voice you use. Follow the tips below to ensure the content in your I&E materials is clear and respectful.

Write for understanding.

- Use plain language, and avoid jargon and technical terms. If technical or medical terms are important to include, define them.
- Keep sentences and paragraphs clear and concise. Cut out any extra information that isn't essential for clients to know.
- Pay attention to how content is organized: Use headers and bullets to guide the reader, and include call-out boxes to emphasize key information.

When writing about people, use respectful, person-centered language.

- Use person-first, non-stigmatizing language that does not equate a person with their health status. For example, say "a person with diabetes" rather than "a diabetic," and say "a person with a substance use disorder" rather than "a drug user."
- Use inclusive language that makes all of your clients feel seen. For example, use gender-inclusive language.
- Avoid judgmental or patronizing language, such as "no-show" or "non-compliant."

Use a friendly, respectful tone.

- Address readers directly using a humble, conversational "voice." Be mindful not to talk down to them.
- Avoid words or phrases that may have a violent connotation, such as "target" or "triggering."
- Be careful about including descriptions of violence or abuse. Although sometimes
 these descriptions are important to the main message—for example, in a material
 about intimate partner violence—consider how much detail is necessary to include
 and whether to add a warning statement to the reader.



Images Matter

Images have the power to engage the reader or to push them away; they can help the client decide whether the material is relevant to them. Images can also help to explain and reinforce key points. Follow the tips below to ensure the images in your I&E materials are helpful and inclusive.

- Make sure images of people are inclusive and reflective of the community or client population and its diversity.
- Use explanatory visuals to enhance understanding by demonstrating steps or actions to take, and drawing attention to main points. Many people have trouble understanding graphs, tables, and diagrams; if these types of visuals are included, ask your I&E Advisory Committee reviewers to provide input on them.
- Focus on the overall "look and feel" of the material. Materials that are too text heavy can feel intimidating. To make materials easier to read, incorporate ample white space, larger font size, and good contrast between text, images, and background. Be thoughtful about colors; for example, many people associate red with emergency, and some colors may be less accessible to people with visual impairments.



The Client is a Partner

An important aspect of a trauma-informed approach to care is recognizing the client as a person with strengths and agency, and as a partner in their health decisions and care. Follow the tips below to ensure the language and visuals in your I&E materials signal a commitment to working together with the client.

- Clearly, but gently, explain what the client can do. Many I&E materials will include a "call to action"—steps the reader can take to access services, prepare for visits, help prevent illness, or support their treatment plan. Phrase the action as a suggestion or recommendation rather than a command. Acknowledge external factors that may get in the way of the recommended action.
- Include contact information for additional assistance. Be sure to include a specific point of contact where clients can go if they have questions or concerns, or need further information.



Input from the Intended Audience is Essential

In accordance with Title X Program Regulations, I&E materials must be reviewed by members of the intended audience—in other words, clients and potential clients in your community or service area. Review of materials by your I&E Advisory Committee helps to meet this requirement, and can also serve as a way to check whether materials are trauma-informed.

On your I&E Advisory Committee review form, include questions about whether the material feels trustworthy, accessible, respectful, and inclusive, and whether it is easy to understand. (You can use the Reproductive Health National Training Center's I&E Advisory Committee Review Form, which includes these types of questions, or you can adapt your own review form to include such questions.)

If your Title X project is developing its own I&E materials, you can also ask for input from members of the intended audience right from the beginning. Getting the client perspective up front will help you to create meaningful I&E materials that meet the needs of the people you serve.



Additional Resources

Consult the resources below for additional guidance on developing and selecting trauma-informed materials.

- How You Write Is as Important as What You Say: A Guide to Trauma-Informed Writing
 - National Center on Domestic Violence, Trauma & Mental Health
- A Progressive's Style Guide Sum of Us
- Plain Language: Getting Started or Brushing Up National Institutes of Health