

**National Eye Health Education Program
Hispanic Eye Health Campaign**

**Focus Group Report
Washington, DC, and Milwaukee**

May 31, 2002

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Executive Summary

During the month of May 2002, IQ Solutions conducted seven focus groups for the Hispanic eye health campaign sponsored by the National Eye Institute (NEI). Two focus groups were held in Washington, D.C., and five were held in Milwaukee, Wisconsin. These focus groups comprised a total of 71 participants, ranging in age from 21 to 65 or older, and included several subpopulations including Central American, South American, Mexican, Puerto Rican, Cuban, and other Spanish-speaking nationalities.

We presented each of the focus groups with four messages and visual images. We assessed overall eye health awareness, the impact of messages and images, and where participants received most of their health information. Several trends and overarching themes consistently emerged across these groups: the understanding that eye health is important and poor vision can drastically impede their lives, the importance of getting eye exams, and confirmation that television is the most popular venue for receiving health-related information. In addition, we tested participants' understanding of the frequency of eye exams and found that, although the majority knew about eye exams, very few knew how often they should have their eyes examined, regardless of age.

Overall, participants indicated that simple, straightforward messages are the most productive and informative. Our results also show a strong need for a general eye health awareness message. Across the board, participants expressed a strong interest in eye health and eye exam information, regardless of whether they had already developed any type of eye disease. In addition, our study found that the majority of participants were motivated to get their eyes examined after viewing our messages and concepts.

Although our results show an appreciation for general eye health information, we need to consider NEI's message focusing on eye disease. Whether a general message will be developed will need to be determined with NEI.

Task Description

IQ Solutions has been tasked with creating effective and motivating messages to increase awareness of getting a comprehensive, dilated eye exam among our target population of Hispanics over age 45, Hispanics with Medicare over age 65, Hispanics with diabetes, and Hispanic women. IQ Solutions developed four messages based on input from the National Eye Health Education Program (NEHEP) Hispanic Work Group and on a creative session conducted with members of the target audience. To fully understand the impact of the messages and how they resonate with the audience, IQ Solutions received approval from NEI to conduct focus group testing of the messages with the target audience. This preliminary step in creating campaign elements allows us to determine whether the messages and associated images are accepted or rejected by the target audience and to tailor the messages according to audience feedback to ensure a more successful campaign effort.

Methodology

The testing approach consists of sharing the four messages and associated images with members of our target audience for this NEI effort. Our goal was to recruit participants for six focus groups—with three groups in Spanish and three groups in English, with bilingual English and Spanish speakers and a preference for English. IQ Solutions examined the necessity of testing the messages with Hispanic subpopulations such as Mexican Americans, Caribbean (including Puerto Rico, Cuba, and the Dominican Republic) and Central Americans and South Americans. We also wanted to determine how age relates to message awareness and adoption.

We developed four print messages with visual images for focus group testing for the NEI's Hispanic eye health campaign. The messages were developed in Spanish and then adapted in English.

Test Sites

IQ Solutions selected two test sites for testing the NEI messages. On May 3-4, 2002, we conducted two focus groups at La Clínica del Pueblo located in the culturally diverse Mount Pleasant area of Washington, D.C. These groups comprised 22 Hispanics, primarily from Central American countries. IQ Solutions collaborated with Dr. Juan Romogaza to secure the test location and recruitment effort.

On May 16-18, five focus groups were held at the 16th Street Clinic and the Beecher Residence Center in Milwaukee. These groups had a total of 49 participants. Milwaukee was selected as a test site based on the availability of testing facilities, recruitment options for our target audiences with diverse subpopulation makeup, and status as a test-market site for the NEI local outreach effort for the campaign. A trained moderator facilitated each of the focus group discussions. We intended to conduct six focus groups in Milwaukee, but only completed five groups due to recruitment issues. IQ Solutions collaborated with Zoilo Melendez with the Latino Health Organization for recruitment and test site locations.

Recruitment

IQ Solutions planned to recruit 120 participants for the focus groups in both test cities. We succeeded in recruiting 71 participants who represented our intended audience for age, subculture, and gender. The following tables provide an overview of the focus group participants.

Table: Demographics of the Participants (n=71)

Age

	Percentage
21-39	39%
40-64	44%
65 or above	17%

Hispanic Origin

	Percentage
Cuban	3%
Mexican	22%
South American	7%
Central American	34%
Puerto Rican	28%
Other	6%

US Residency – 10 years or more

	Percentage
More Than 10 years	65%
Less Than 10 years	35%

Gender

	Percentage
Male	35%
Female	65%

Moderator Guide Approach

The line of questioning with the focus groups started with a general understanding of eye health, beliefs about the frequency of eye exams, and familiarity with different eye diseases. The questioning path then led to presenting and reviewing the four print messages and their corresponding images. The groups were asked what they liked, what they did not like, and general opinions about the messages. They were asked to rank their preferred choices and identify additional venues for receiving health information (e.g., television vs. print ads).

Results

During the seven focus groups conducted in Washington and Milwaukee, several trends and themes emerged and resonated across the groups. Although participants came from various Spanish-speaking countries and backgrounds, they were presented with the same messages and images and asked to give their opinions on each. Described below are reactions, opinions, and thoughts on eye health in general and on the messages presented.

Each group was asked about the importance of eye health. All groups agreed that eye health, as they understood it, was important.

“Eye health is very important.”

“The eyes are one of the most important parts of the body.”

“Eye health is important because it gives you independence.”

“It’s essential. Imagine if you can’t see. When I can’t find my glasses, I get desperate.”

There was also significant mention across the groups on the importance of getting eye exams. However, when probed about the frequency, there was no consensus: several participants thought once a year was appropriate, regardless of whether or not they have eye disease. Others suggested every 6 months, and a few believed it was necessary to get eye exams every 3 months, especially if a person has eye problems.

“You should get checkups on a regular basis.”

“You should go every year, but every 6 months if you have problems.”

When asked about whom they turn to for information, the majority of the participants agreed they would ask their doctor for information. Some specifically mentioned their optometrists.

“I get my information from my doctor.”

“Ophthalmologist.”

“I go to the optometrist and that’s where I get my information.”

When asked about what eye diseases they had heard of, participants most frequently mentioned glaucoma and cataracts. About half had heard of diabetic eye disease. Pink eye and dry eye were also mentioned.

Reactions to the Five Boards

(Please see Appendix A for samples of boards)

Board 1: "Children"

As a whole, participants reacted well to the images used on the "Children" board. They liked the diabetes message and thought it was important for people who have diabetes to get their eyes examined.

"Diabetics must check their eyes."

"I think that people who have diabetes should go check their eyes."

"For those who have diabetes this is good to encourage them to get their eyes examined."

"This is correct. You should check your eyes but not only those with diabetes."

"Is a good message for people who have diabetes. I don't have diabetes."

However, the majority of participants across the seven groups thought this message was about children with diabetes and the importance of getting children's vision examined.

"This message is geared towards children and their parents."

"We need to have our kid's visions examined."

"I like the link between prevention and the importance of keeping your children's eyes healthy."

"This is a good message because we should keep our children healthy."

"The prevention message here is good and the symbolism of the children is also good because you should take care of your eyes since childhood."

Several mentioned that it was crucial for parents to take their children in for regular exams to avoid losing their sight. They also suggested that the images reflected what the children with diabetes were seeing.

"Hey parents, get your kids checked, look what can happen to them."

"Parents should have their children's eyes checked."

Many participants found the obstructed vision images particularly effective and attention-grabbing. They appeared to have a better sense of what a person with diabetic eye disease actually sees.

"I understand that the message means someone with normal vision and someone with the disease. I like the images because it tells people who don't have diabetes how it feels for a person with diabetes. My husband has diabetes and I think that he sees that way. I wonder if he sees like that. Now I know how he probably sees that way. I did not know. He's never had his eyes checked."

Several participants also mentioned that although the diabetes message was an important one, they would not pay attention to it because they do not have diabetes and, therefore, they did not

think that it pertains to them. Several participants agreed that a general message on eye exams is necessary for everyone, not just people with diabetic eye disease. They indicated that seeing this board would motivate them to get their eyes examined.

"I think is a very good message. I don't have diabetes so I don't understand what it means to have diabetes. But I think that people who have diabetes should go check their eyes."

"I see well so I won't have my eyes checked because I don't have diabetes, but for those who have diabetes this is good to encourage them to get their eyes exam."

"This is correct. You should check your eyes but not only those with diabetes."

"Is a good message for people who have diabetes. I don't have diabetes."

Board 2: "Eye Exam"

The overall response to the "Eye Exam" board was very positive. Nearly all participants agreed that this message was straightforward, clear, and motivational.

"The message tells you what you should do in a very direct way."

"Is very clear, you can see that the person is getting an eye examination."

"The message is well focused."

They liked the image of the doctor giving an eye exam and mentioned that they felt the doctor smiling was very welcoming and nonintimidating.

"I like the attitude of the doctor, she's a nice doctor and that's nice because not all doctors are the same."

"The doctor looks happy to check the eye sight of the patient, it is nice and pleasant."

"Nice and comfortable with the doctor."

"The person in the picture looks pleasant and shows that you are important to her, she represents knowledge and training because she has an uniform."

"The face of the doctor is nice. She's smiling. Makes it feel you a warm feeling. You feel welcome."

Most participants mentioned that they really liked the question "When was the last time you got your eyes examined?" Many said that it made them stop and think about their last exam. Several participants suggested that this message would motivate them to go and get an eye exam.

"It makes you think that you just have to have an appointment with your eye doctor every year. It makes you stop to think that you have to go to the eye doctor, when was the last time you went to the doctor, and if it has been a long time, it makes you react and say, okay it's time to go. Sometimes adults let a long time go by without going to the doctor, 2 or 3 years . . . It motivates me to take action."

“This board is a reminder that you should get your eyes examined. I already got my appointment.”

When probed about changes they would recommend to this message, many participants suggested adding more colors to the image, having a brighter photograph, and showing more of the patient as well as the doctor.

“Needs more color in the picture, brighter, more attractive, need to show the patient’s face more.”

“I don’t like the color in the picture; it looks too dark.”

“I would like to see more colors.”

“Make this board more colorful and attractive.”

Once again, nearly every group reiterated the concept that everyone, not just those with eye disease, should have an eye exam.

“It should not be conditioned to only those having diabetes. It is being too specific. But I agree that it should mention it somewhere. It should also say AT LEAST every year you should get an eye exam.”

“I do not have diabetes and so I think so what . . . This does not apply to me.”

“I don’t have diabetes so I don’t think I would get an eye exam.”

“I don’t have diabetes, but maybe I can encourage those who have diabetes to check their eyes.”

Board 3: “Ojos Que No Ven”

Although participants, in general, liked the image of the smiling woman, nearly every single participant disliked the message of “Ojos que no ven, corazón que no siente” (“Eyes that don’t see, heart that doesn’t feel”). They felt that although it was a popular Spanish saying/song, it was inappropriate for the eye exam message and did not go with the concept. Several participants also noted that the message suggested that people who were visually impaired did not “feel,” and they did not agree with that.

“It has a double meaning. It is not the right message.”

“That expression is a very popular one, but it doesn’t go with the message. People who can’t see can still feel.”

“This expression is a song, a very popular song but in this message it doesn’t make sense.”

“To me the woman in the picture can’t see and that’s why she can’t feel. You can’t say that if you don’t see you can’t feel. Because blind people can feel.”

“The picture and the expression don’t go well together. It doesn’t click.”

The majority of the participants did not like this concept and did not feel motivated by it. They expressed that it did not make sense to them.

"It doesn't make sense to me."

"This picture would not motivate me."

"I do not feel motivated by this message because it doesn't make any sense."

"The picture of the women is fine but the phrase in that context doesn't motivate me."

When asked about changes they would make to it, several suggested removing the "ojos" phrase, and a few suggested using the image of the woman, but adding more color to the photograph.

"It needs to look clearer, brighter."

Board 4: "Driving"

The "Driving" board was particularly popular across the seven focus groups. The majority of participants liked the phrase "We don't appreciate what we have until we lose it." They stated that this concept made sense and made them appreciate their vision. Nearly all participants believed this message would motivate them to get an eye exam.

"You're independent until you lose your vision. It's hard to depend on others."

"I won't feel the same if I lose my vision."

"Not being able to see limits what we can do. It shows the important things that we can lose. It's important to check your eyes."

"It makes you want to appreciate what you have and the privilege of driving and how you need good vision."

"This message motivates people to get an eye exam."

"I like it because we see the picture and makes me want to go to the doctor and get our eyes examined."

Participants again suggested that the message should encourage everyone to get an eye exam, not only people with diabetic eye disease. They suggested that people who had healthy eyes, or people who *thought* they had healthy eyes, might ignore the message because they did not suffer from any eye disease. A very small number of participants said they did not relate to this board because they did not drive, so they did not find it to be motivational.

"Is a good message for people who have diabetes primarily but is good for everyone to remember about their eyes and driving because they can loose their license and have accidents."

"Some Hispanics don't drive, so we don't get it."

When asked about changes they would make to this board, the majority of the participants said they liked the text, but would include more detail in the image, a clearer view of what an actual driver would be seeing as he or she drove. Some suggestions included adding a blue sky, more trees, flowers, and clearer road signs. Several participants mentioned that they would like to see more color and a brighter image.

“The picture is too dark, needs more color.”

“This picture needs more of a view.”

“The signs are out of focus, it would be nice to show the signs clearer. What is she looking at?”

“Show some trees or mountains or something so we know what is she looking at other than a blurry road.”

“Show something you would want to see like blue skies, a landscape, bright colors.”

Several participants also noted that they preferred the message on this board, but thought it should be placed on the “Eye Exam” board instead. They felt that this message made more of an impact when coupled with the information and image already on the “Eye Exam” board.

Preferences:	Number of votes:
Board One: “Children”	25
Board Two: “Eye Exam”	17
Board Three: “Ojos”	3
Board Four: “Driving”	24
Total	69*

** 2 participants did not vote.*

Board 5: “Glaucoma Message”

In the next phase of the testing, the diabetes text on the “Eye Exam” board was covered by an alternate glaucoma message. Most of the participants had heard of glaucoma; only a few had not. It was suggested that symptoms for glaucoma be included. All the focus groups mentioned that age should not be included in the message. Participants seemed to agree that people younger than age 60 should also be tested for the disease because they knew of younger people who had developed glaucoma. They also did not think that getting an eye exam every 2 years was often enough, especially for people with glaucoma. They suggested that the recommended frequency of the eye exam should be changed to every year.

Several participants mentioned that they would probably ignore the message because they were under age 60 and had not been diagnosed with glaucoma. They again suggested that everyone needs to get an eye exam to see if their eyes are healthy.

Preferred venues for information

The majority of participants indicated receiving most of their health news from television. Most said they watch news programs or talk shows to get information. About half of all participants said they watched both Spanish-language and English-language news. The rest preferred either Spanish-only or English-only television. Talk shows such as *Primer Impacto*, *Al Rojo Vivo*, and *Sábado Gigante* were mentioned as frequently watched programs.

Several participants said they also turn to magazines or newspapers for health information. Many participants who turned to print for information said they read both Spanish- and English-language materials. Among the magazines mentioned were *Family Circle*, *People en Español*, *Vanidades*, *Reader's Digest*, and *Time*.

Very few participants said they turned to the radio for health news. Most said that they did not pay attention to health shows.

Language

No significant language issues were apparent with the wording used in the messages. Participants agreed that they understood and were comfortable with the language on each board. In addition, literacy level did not appear to be an issue with these focus groups.

Brochure

Across the board, participants liked having print materials that they could take home and read. Many stated that they wanted to have more reliable information available to them.

When asked what type of print material they preferred, most participants liked a brochure or pamphlet. When asked about what they would want to see in a brochure, they were very clear about what they wanted:

- Clear and concise brochure, 5 or 6 pages long
- Information on eye disease, symptoms, and available treatments
- Information on nutrition and how it affects eye health
- Diagrams of the different parts of the eye
- Information on the dilated eye exam
- Information resources
- Colorful artwork and layout—not too text-heavy
- Information in Spanish as well as bilingual information
- Brochure made available in schools, clinics, churches, and pharmacies.

Recommendations

Based on the results of the seven focus groups and our understanding of NEI's mission with outreach to the Hispanic population, IQ Solutions recommends producing several products to support the Hispanic eye health campaign with a concise, simple message.

Message

Focus group participants were familiar with eye health professionals and where to go to get care. What they were uncertain of was the frequency of the exams and compounding the message with age as referenced with the alternate message for glaucoma. Participants were satisfied with the importance of the message being directed toward people with diabetes, but understood the importance of getting an eye exam regardless of whether one has diabetes. The participants strongly recommended having a general eye awareness message with the overall recommended frequency for getting a comprehensive, dilated eye exam.

The majority of participants favored a general eye health awareness message over a disease-specific message. When the message of the importance of getting an eye exam was presented in the context of a specific eye disease, participants reacted by questioning the focus on people with the disease and exclusion of the rest of the population. They felt that encouraging the entire community to get an eye exam was a most effective way to get individuals to get their eyes examined, regardless of whether they have diabetes or are age 60 or older. Participants felt that getting an eye exam was too important to exclude people who are of Hispanic ethnic background who do not have diabetes and are not age 60 or older. The majority of participants demonstrated some awareness but limited knowledge about diabetic eye disease and glaucoma; therefore, the disease-specific message sometimes was confusing and irrelevant to their health behavior practices.

IQ Solutions recommends developing a disease-specific eye health message combined with a general awareness message. Participants stated that an alternative to creating a general awareness message over a disease-specific message might be to combine text that encourages all people who are of Hispanic ethnic background to get their eyes examined and alerts people with diabetes and risk factors for glaucoma to be even more concerned.

Based on the prepared messages presented to the focus groups, participants overwhelmingly liked the messages "We don't appreciate what we have until we lose it" and "When was the last time you had an eye exam?" We recommend combining those two lines to create the overall message. Using this as the message, language for the diabetic eye disease message can be incorporated into the content as well as a general eye health message if that is the direction NEI wants to take.

Products and Approaches—Broadcast

Participants mentioned that they get most of their health information from the news and through commercials. IQ Solutions proposes developing a television public service announcement (PSA) that can be aired during key programming times with strategic placement and media pitching. We recommend packaging the PSA for targeted broadcast journalists to incorporate into their health stories during news programming. We also recommend preparing the PSA in both English and Spanish based on the preferences referenced in the focus groups, and individual stations can determine which language works best with their audiences.

Products and Approaches—Print

IQ Solutions pursued discussion with the focus group participants regarding use of print products to provide health information on eye exams. It was reported that people are interested in print materials to reinforce what they are hearing from television and from their doctor. They want a colorful and attractive brochure that is concise and includes eye disease definitions, information resources, and anatomy of the eye. Participants did not like having both Spanish and English text on the same product; IQ Solutions agrees with this recommendation.

We also recommend pursuing print ads with the message and visual component. Our preliminary market research and focus group research identify *Reader's Digest*, *Family Circle*, *Time*, and *People en Español* as strong avenues for article placement and print ad placement.

Appendices

Appendix A: Print Messages

The following are the five boards that were tested by the seven focus groups in Washington, DC, and in Milwaukee. Each board was created in both English-language and Spanish-language versions.

Board One: **“Children”**

Board Two: **Eye Exam”**

Board Three: **“Ojos Que No Ven”**

Board Four: **“Driving**

Board Five: **“Glaucoma Message”**

Appendix B: Moderator's Guides English-Speaking Version

I. Welcome

Thank participants for joining the group. (2 minutes)

- Introduce Mari, Claudia, and Karen
- Reinforce the fact that we do not represent the agency
- Welcome all participants, and assure their comfort throughout the session.
- Orient participants regarding name tents, coffee, food, facilities, etc.
- Explain what a focus group is and why they are important.

II. Process and Ground Rules

Write these on the board. (5-10 minutes)

- There are no right or wrong answers; we are not trying to obtain consensus. We want to hear individual opinions.
- The session is about 90 minutes long. People can take coffee and bathroom breaks, as needed. In the interest of time, we will not take an official break.
- In order for all to participate, response time should be short (less than 2 minutes). No one should monopolize the discussion.
- Everything said during the session is strictly confidential.
- It's OK to be critical of the boards, but not of each other. We must refrain from putdowns.
- We are tape-recording the conversation to assure we don't miss important statements. We are more interested in what is said than in who says it.
- Be mindful that I might interrupt what is being said to move onto another topic.
- Do not let others influence your perspectives about your feelings on any issue. Don't be concerned about pleasing us. We are not looking for any predetermined answers.

III. Introductions (10 minutes total—less than 1 minute per person)

Participants should introduce themselves by providing their name and stating something special about their family or loved ones. The moderator will model the process and also introduce the note-taker and Karen as observers.

IV. Purpose of Session (5 minutes)

We are developing a national campaign focusing on eye health. Specifically, the purpose of this session is to:

- *To better understand what you know about eye care*
- *To learn how you react to certain messages and images regarding eye care*
- *To solicit opinions on how messages can be expanded to other media (e.g., TV, radio) and other ways in which the messages can be delivered*

V. Task 1—Baseline Data (20 mins total—3-5 minutes per question)

The purpose of this task is to obtain basic information on client knowledge about eye health care.

- *How important is eye health care relative to other illnesses?*
[Aim: Understand what clients think about prevention of vision loss.]
- *What do you think you can do to keep healthy vision?*
[Aim: Understand what clients think they can do about eye care.]
- *How often should you get an eye exam? How often do you get your eyes examined?*
[Aim: Find out how much they know about eye care.]
- *Can you name some eye diseases that you or your family members may have, and I will write them on the board?*
[Aim: Determine what participants know, and query from that base of knowledge. It is not likely they will say “glaucoma,” “macular eye degeneration,” “diabetes and eye disease” (retinopathy), or “cataracts.” Ask: “What have you heard about these terms (or diseases)?”]
- *Who do you listen to about health? About eye care?*
[Aim: Find out about influencers.]

VI. Task 2—Message Reactions and Preferences (30 minutes)

Present four boards with images and bylines for participants’ reactions.

- Have all four boards prearranged around the room so that participants can rank-order them by preference. (Participants will do this by a show of hands for each board.)
- Afterwards, discuss each board and have participants collectively react to each, starting with the highest ranking. The moderator will use the same set of questions to

guide the discussion around each board. [Specific probes may vary for each board.]
The general questions are as follows:

BOARDS

- *What do you like about the board?* (e.g., the image, the message, the overall presentation)

- *How do you think the images relate to the messages?* [Probe for feelings.]

- *Do you understand what the message is saying?* [Prompt: What does the message mean or imply to you?]

- *How does the image make you feel?* [Probe as to why.]

- *If you saw this board as an ad, what would it cause you to do?* [Modification: Does this message motivate you to take care of your eyes or to get an eye exam? (e.g., talk to your mother, see your doctor, seek help)]

- *Is there anything that you do not like, or anything that bothers you about the board?* [Probe for wording, image, etc.?]

- [To be done with the “eye exam” board, as *velcro sticker* is affixed.] *Now, what do you think if we changed the message to glaucoma? We are at risk of eye disease and we need to do something about it. Does message bring the point across? How about if we changed the message based on age? Does the message bring the point across?* [Probe: Does this increase your awareness that you need to prevent vision loss? What would be the right kind of message to get this point across?]

VII. Task 3—Message Delivery and Preferences (15 minutes)

- *Through what means of communication are you most likely to pay attention for information about health care ?*
-What radio programs do you listen to? What newspaper and magazines do you read?

- *If the message is on TV, are you more likely to watch health care information if it is presented in a commercial, a regular entertainment program, a talk show, or the news? Which programs do you watch?*

- *Do you actually pay attention to commercials?*

-If so, which kind of commercials do you watch?

-Which ones attract you the most?

-Do you remember any commercials about health?

- *Do you watch news programs? If so, which ones do you watch? If news programs contained information about health, would you pay attention to them?*

- *If we put this message on TV, which would you pay attention to more the news (e.g. Jorge Ramos), an entertainment show (e.g. Primer Impacto, Sábado Gigante), or a TV commercial?*

- *What kind of brochure would you like to have?*

-What kind of information would be most helpful? (Probe: symptoms, treatment, where to go for help?)

-What would you want it to look like?

-What kind of images would you like to see?

-Would you like to see a magazine article? A printed advertisement? Would you like to see the message on a billboard? Would you like the information in both Spanish and English or separated for each language group?

VIII. Concluding Statements

In closing, thank the participants for coming. Emphasize the payment and sign-out process. (Note-taker, please assure the equipment is safe.) *Note: Consent process is still being considered for the Milwaukee group.*

Guía del Moderador **Versión en español**

I. Bienvenida

Agradezca a los participantes por formar parte del grupo. (2 minutos)

- Preséntese usted mismo y presente (a Claudia ó a Mari) y a Karen.
- Resalte el hecho que no representamos la agencia.
- Dé la bienvenida a todos los participantes, y asegúrese de su bienestar durante toda la sesión
- Brinde una orientación a los participantes sobre los rótulos con sus nombres, el servicio de café, comida, las instalaciones, etc.
- Explíqueles qué son los grupos de enfoque y por qué son importantes

II. El Proceso y las Reglas del Juego

Escriba las siguientes reglas en la pizarra. (5-10 minutos)

- No hay respuestas correctas ni incorrectas; no estamos tratando de obtener un consenso. Lo que queremos es escuchar sus opiniones individuales.
- La sesión dura alrededor de 90 minutos. Ustedes pueden tomar descansos para prepararse un café o ir al baño cuando así lo deseen pero por razones de tiempo, no tomaremos un descanso oficial.
- Para que todos puedan participar, su tiempo de respuesta deberá ser breve (menos de 2 minutos). Una sola persona no debe monopolizar la discusión.
- Todo lo que se diga en la sesión será estrictamente confidencial.
- Ustedes pueden criticar los tableros pero no se puede criticar a los demás. Debemos evitar desaires.
- Estamos grabando la conversación para asegurarnos de no perder ninguna declaración importante. Estamos más interesados en lo que se diga que en quien lo dice.
- Tomen en cuenta de que tal vez yo tenga que interrumpir lo que están diciendo para continuar con otro tema.
- No dejen que los demás influyan su perspectiva con relación a sus impresiones en cualquiera de los temas. No se preocupen por complacernos. No buscamos respuestas predeterminadas.

Pida a los participantes que contribuyan con más reglas del juego. Déjeles saber que tanto usted como ellos pueden añadir más reglas -según sea necesario- durante la sesión.

III. **Introducciones** (10 minutos en total—menos de 1 minuto por persona)

Los participantes deberán introducirse dando su nombre e indicando algo especial sobre su familia o seres queridos. Los moderadores harán igual y también introducirán, en calidad de observadores, a la persona que toma las notas y a Karen.

IV. **Propósito de la Sesión** (5 minutos)

Estamos desarrollando una campaña nacional sobre la salud de los ojos. Esta sesión tiene tres propósitos:

- Comprender mejor lo que ustedes saben del cuidado de los ojos.
- Conocer cómo ustedes reaccionan a ciertos mensajes e imágenes con relación al cuidado de los ojos.
- Procurar sus opiniones sobre cómo se pueden extender los mensajes a través de otros medios de la comunicación (por ejemplo, televisión, radio) y sobre otras maneras en que se pueden hacer llegar los mensajes al público.

V. **Tarea 1—Datos de Línea de Base** (20 minutos total—3-5 minutos por pregunta)

El propósito de esta tarea es el de obtener información básica sobre los conocimientos del participante sobre el cuidado de la salud.

- ***¿Qué tan importante creen ustedes que es la salud de los ojos con relación a otras enfermedades?***

[Propósito: Comprender lo que los participantes piensan sobre la prevención de la pérdida de la vista.]

- ***¿Qué piensan ustedes que pueden hacer para mantener su visión saludable?***

[Propósito: Comprender lo que los participantes piensan sobre lo que pueden hacer con relación al cuidado de los ojos.]

- ***¿Qué tan a menudo se debe hacer un examen de la vista? ¿Qué tan a menudo se hacen un examen de la vista?***

[Propósito: Averiguar cuánto saben del cuidado de los ojos.]

- ***¿Puede nombrar algunas de las enfermedades de los ojos que usted o alguien de su familia tienen?*** Yo las escribiré en la pizarra.

[Propósito: Determinar lo que los participantes saben y hacer preguntas a partir de esa base de conocimientos. Es probable que no digan “glaucoma,” “degeneración macular,” “diabetes y enfermedad ocular” (retinopatía), o “cataratas.” Pregunte: “¿Qué ha escuchado o qué sabe de estos términos (o de estas enfermedades)?”]

- **¿A quien escuchan ustedes para cuestiones de la salud? ¿Y sobre el cuidado de los ojos?**

[Propósito: Averiguar quien tiene influencia sobre los participantes.]

VI. Tarea 2—Reacción a los mensajes y preferencias (30 minutos)

Presente los cuatro tableros con imágenes y mensajes para ver la reacción de los participantes.

- Con anterioridad coloque a los tres tableros alrededor del cuarto para que los participantes los puedan clasificar por orden de preferencia. (Los participantes los clasificarán alzando las manos para indicar su preferencia por cada tablero.)
- Después, inicie una charla sobre cada tablero y haga que los participantes reaccionen a cada uno de manera colectiva. Comience con el que tuvo mayor preferencia. El moderador utilizará el mismo conjunto de preguntas para guiar la discusión sobre cada tablero. [Las indagaciones específicas pueden variar para cada tablero.] Las preguntas generales son las siguientes:

TABLEROS

- *¿Qué les gusta de este tablero? (Ej., la imagen, el mensaje, la presentación en general)*
- *Según su parecer, ¿cómo se relacionan las imágenes a los mensajes? [Indague para averiguar los sentimientos.]*
- *¿Comprenden lo que el mensaje está diciendo? [Indague a fondo: ¿Qué significa o que implica el mensaje para usted?]*
- *¿Qué les hace sentir la imagen? [Indague el por qué.]*
- *Si usted viese este tablero en forma de anuncio, ¿qué le motivaría a hacer? [Modificación: ¿Les motiva este mensaje a que cuiden sus ojos o a que se hagan un examen de la vista? (por ejemplo, hablar con su madre, visitar a su médico, buscar ayuda)]*
- *¿Hay algo que no le guste ó algo que le moleste de este tablero? [Indague las palabras, las imagines?]*
- *Ahora, ¿qué pensarían si cambiamos el mensaje para que sirva para la enfermedad del glaucoma? Estamos a riesgo de desarrollar enfermedades de los ojos y debemos hacer algo al respecto. ¿Creen que estos mensajes logran*

dar a entender este punto? Ahora, ¿qué pensarían si cambiamos el mensaje basado en la edad? [Indague más a fondo: ¿Esto le concientiza más de que debe prevenir la pérdida de su visión? ¿Cuál sería la clase correcta de mensaje para lograr que se comprenda esta idea importante?

VII. Tarea 3—Entrega del Mensaje y Preferencia (15 minutos)

- ***¿Usando cuál medio de comunicación (por ejemplo, radio, televisión, revistas, periódicos, carteleras) es más probable que ustedes presten atención a la información sobre el cuidado de la salud?***
 - ¿Cuales son los programas de radio que ustedes escuchan?
 - ¿Cuales son los periodicos o revistas que ustedes leen?

- ***Si el mensaje sale en la televisión, ¿es más probable que ustedes miren la información sobre el cuidado de la salud si se la presenta en forma de comerciales, en programa de novedades o de entretenimiento, en un programa de charlas, o en las noticias?***
 - ¿Cuales son los programas de televisión que ustedes ven más amenudo?

- ***¿Ustedes realmente prestan atención a los comerciales?***
 - ¿Que tipo de comerciales de televisión miran?
 - ¿Cuáles son las que más les atraen?
 - ¿Se recuerdan de algun comercial de la salud?

- ***¿Ustedes ven programas noticieros?***
 - ¿Cuáles ven más?
 - Si los programas noticieros contienen información sobre la salud, ¿ustedes les prestarían atención?

- ***Si sacamos el mensaje en la televisión, ¿cuál de los siguientes formatos les llamaría más su atención: noticieros (por ejemplo, Jorge Ramos), programas de entretenimiento (por ejemplo, Primer Impacto, Sábado Gigante) o un comercial de televisión?***

- ***¿Que tipo de folleto prefieren? [Indague información sobre síntomas? Sobre tratamientos?]***
 - ¿Como Les gustaría que luzca?
 - ¿Qué tipo de imagenes Les gustaría?
 - ¿ Les gustaría un artículo de revista?
 - ¿ Les gustaría un aviso impreso?

-¿Prefieren ver la información en un artículo de una revista? ¿Les gustaría ver el mensaje en una cartelera? ¿Les gustaría que la información venga en inglés y en español al mismo tiempo o prefieren por separada para cada grupo idiomático?

VIII. Cierre

Al cerrar, agradezca a los participantes por haber venido. Recuérdeles el proceso de pago y firma de salida.

(Para la persona que toma notas, por favor compruebe que el equipo esté seguro.)

[Todavía está bajo consideración el proceso de consentimiento para el grupo de Milwaukee.]

Appendix C: Raw Results

The raw results are the full compilation of comments and feedback received during the focus group testing. These results provided the basis for the synthesis of the results and recommendations.

Task 1—The purpose of this task is to obtain basic information on client knowledge about eye health care.

How important is eye health care relative to other illnesses?

- “75 percent of the information we receive is through the eyes. What would we do without our eyes?”
- “Eye health is very important. Years ago I couldn’t see, and it was a very bad experience. I hurt my eyes in a soccer game. I couldn’t read, and I was scared. I went to the doctor, and he analyzed the situation. But now I need to go again because I am having a hard time reading and seeing. Since I go to school, it is difficult for me not to be able to read.”
- “Three years ago my daughter had an accident and got an eye exam and got glasses.”
- “The eyes are one of the most important parts of the body.”
- “No one wants to lose their vision, but I think that a lot of people might lose it.”
- “We take our eyes for granted.”
- “Eye health is important because it gives you independence.”
- “I don’t know what kind of care we are supposed to give eyes.”
- “Vision (eyes) is one of the most important organs we have.”
- “We need much more information on eye health.”
- “We feel useless if we lose our vision.”
- “We ignore that our eyes have problems.”
- “It’s essential. Imagine if you can’t see. When I can’t find my glasses, I get desperate.”
- “I can barely see at all.”
- “I work at a daycare. Without vision, I can’t work.”
- “It’s imperative. Everything we do in this world is done through our sight/vision.”
- “It’s important to go to ophthalmologist.”
- “Must have clean hands. Wash your face if you get something in your eyes.”
- “When you get dizzy, it affects your eyes.”
- “Vision is the most important thing.”
- “Diabetes affects eyes. Can cause you to lose your vision.”
- “Vision is indispensable. We couldn’t get around without our vision.”
- “If we compare, there are other diseases that are very serious, but in my point of view our eyes are important because they guide us, they are a mechanism through which we see.”
- “They are extremely important to me. I am very interested in learning more.”
- “Insurance companies pay very well when you lose your sight. It is so important that, when compared to when you lose other parts of our bodies like your arms or legs . . . that they pay 100 percent. You lose half of your life when you lose your eyes.”
- “For me, eyesight is very important, we need it to see. When our eyesight bothers us, we become concerned. It worries us. Eyesight is vital. I would prefer to have a broken arm than for my eyes to be sick. For me, eyesight is number one.”

- “The eye is the most important organ because it is through them that we can see what is going on around us. I think it is so important that we must take care of them and have our eyes checked regularly to maintain our eyes healthy.”

What do you think you can do to keep healthy vision?

- “Iridology and other alternative medicine.”
- “Good hygiene.”
- “Use drops for your eyes to clean pollen.”
- “Take vitamins, eat fruits. Drink fruit and vegetable juices.” (Three participants agreed.)
- “Read newspaper to learn about the eye diseases.”
- “We need to know symptoms—for example, clouding of eyes with cataracts.”
- “It’s important to go to doctor when you have symptoms.”
- “Staring at computer is bad. You need to rest your eyes.”
- “I don’t know anything about eyes.”
- “An annual eye exam is important.” (Four participants agreed.)
- “Pollution can affect the eyes.”
- “Depending on the air quality, your eyes can be affected.”
- “I get artificial tears to keep my eyes moist.”
- “When the air is cold outside and you get out of the house which is warm into that cold air, that affects your vision. You have to protect your eyes.”
- “Avoid watching TV.”
- “Be more aware of our body.”
- “Bad vision is like cancer: we need to take care of it or it will get worse.”
- “Vision is very fragile.”
- “Taking care of your eyes.”
- “Protect your eyes from the sun.”
- “Go to the doctor. Get your eyes examined.”
- “Rest your eyes.”
- “Protect your eyes. Use protective eye wear.” (Three participants agreed.)
- “To be better informed. There is little information on how to adequately care for your eyes.”

How often should you get an eye exam? How often do you get your eyes examined?

- “You should get check ups on a regular basis.”
- “Go to get your eye exam every 6 months to 12 months.”
- “I think that every 2 years is okay, but if you have problems you should do it more frequently.”
- “Eye exams should be done every year to find out if you have any problems.”
- “You should get once a year a regular exam at the optometrist.”
- “Eye exams are recommended every year.”
- “I don’t go, but maybe should go once a year.”
- “You should go every year, but every 6 months if you have problems.”
- “Every 2 to 3 months.”
- “If you have vision problems (eye injury), you should go right away.”
- “Every year would be good.”
- “Anytime there are changes or headaches. If you have high pressure of the eyes.”
- “You should go when doctors advise you to go.”

- “If you have problems with your health, often you have symptoms with your vision.”
- “I go and have an annual exam because I wear glasses so I need to check my glasses.”
- “If you don’t have vision problems, you should go once a year. If you wear glasses/lenses you need to go every few months. Maybe every 3 to 6.”
- “I don’t know how often you should go. I’ve never gone to an eye doctor.”
- “Experts say that what doctors naturally say is that when you need glasses, it should be once a year, but I think it should be at least once a month that we get our eyes checked. Because, I think because of my age, as one gets older, the eyesight becomes weaker . . . so I think it would be better to go more often than once a year. I go every year.”
- “In the case of children, as soon as possible. There is a cumulative effect, and they force their eyesight, they read in the dark. I do not know how the mechanism of the eyes work, they dilate, muscles contract . . . My son needs glasses, but he would never tell the teacher that he could not see or that his eyes hurt.”
- “Every 6 months would be better, even though the doctors say every year. But as a parent, well, I think it is hard for parents to know if their children have problems. I think every 6 months because in modern times, we all watch TV and this can affect our eyesight.”
- “I don’t think every 6 months, but rather every time you detect a problem with your eyesight. It may be several times in 1 month. For example, if my eyesight is not working well at the beginning of this month, I have to go to the eye doctor and if at the end of the month I still have problems, I have to visit him again. I think it is necessary to go whenever we have a problem.”
- “I had an eye exam a few years ago, and the eye doctor recommended that I use glasses, but sent me to CVS. And I spent 2 years using those glasses, and I felt that they did me more harm than good because I read a lot at night and need the glasses for this reason. And my eyes hurt, so I went again to the doctor who prescribed new glasses, which are the ones I now use, but I think that the cheap glasses hurt my eyes.”
- “Each case is different. I really don’t need them except when my vision gets blurry when I take my medication. So I only use those from the dollar store, which are cheaper—\$1.25—and only when I need them because those from CVS are expensive: they cost between \$7 and \$15.”

Can you name some eye diseases that you or your family members may have?

- “Scabies.”
- “Cataracts.”
- “Myopia.”
- “Glaucoma.”
- “Macular degeneration.”
- “Retinopathy/diabetic eye disease.”
- “Conjunctivitis.”
- “Partial vision loss.”
- “High blood pressure affects eyes.”
- “Lazy eye.”
- “Nearsightedness.”
- “Blurred vision.”
- “Stigmatism.” [astigmatism]
- “Infections . . .”
- “Sties in children, they are pretty common in kids.”
- “Pain or burning in the eyes . . .”

Who do you listen to about health? About eye care?

- “I get my information from my doctor.” (Nearly all participants agreed.)
- “Television programs, primarily through the news and communication channels such as newspapers and radio.”
- “I read the health section of the *Washington Post*.”
- “I go to the optometrist, and that’s where I get my information.”
- “I get my information from television and magazines.”
- “I get my information through the Internet.”
- “My insurance company provides me with health information.”
- “Eye specialist.”
- “Eye doctor.”
- “Radio talk shows.”
- “Schools give a lot of information.”
- “People who have diabetes have to get examined by a specialist in diabetes.”
- “TV ads.”
- “Health magazines (*Natural Health*).”
- “Ophthalmologist.”
- “Optometrist.”
- “TV news.”
- “On the street (neighbors, friends), but it is not always accurate.”
- “Someone professional is reliable.”
- “Often times friends diagnose, and they are wrong.”
- “Close family members.”
- “Friends.”
- “Other people’s experiences.”
- “We also like to look for written information to learn more. We find information at the clinics or library, or we ask at the clinic.”
- “I always go to my mother, but if she does not know or what she says does not work, then I have to go to the doctor.”
- “Generally the radio and television announce doctors, but they do not talk about diseases.”
- “I think it would be good, just like the pamphlets they have on HIV, some information like that, some orientation on what to do when we have something wrong with our eyes, when your eyes are all red, because there are many diseases, but we don’t know about them, because we don’t read about them so we cannot learn about them.”
- “I think eye doctors are very expensive, so we are afraid to go to them. They seem to hide the information, too.”

Task 2—Message Reactions and Preferences

Board 1: “Children”

What do you like about the board?

- “This is a good message because we should keep our children healthy.”

- “The prevention message here is good, and the symbolism of the children is good because children are the most important priority if you take care of your eyes since childhood.”
- “I do not know what is in the damaged image. I do not understand what is in the image on the right side. It looks like one side is clear and the other one is not, but it is difficult to understand what is going on.”
- “I think is a very good message. I don’t have diabetes so I don’t understand what it means to have diabetes. But I think that people who have diabetes should go check their eyes.”
- “I see well so I won’t have my eyes checked because I don’t have diabetes, but for those who have diabetes this is good to encourage them to get their eye exam.”
- “This is correct. You should check your eyes but not only those with diabetes.”
- “Is a good message for people who have diabetes. I don’t have diabetes.”
- “It is a little confusing. What’s on the right side? What’s in that picture?”
- “I am not a diabetic, but I check my eyes once a year. Everybody should do that even if they are not diabetics.”
- “I think it is important to have an exam even if you don’t have diabetes, but if you have diabetes even more.”
- “I like the link between prevention and the importance of keeping your children’s eyes healthy.”
- “That it says ‘diabetes.’ Because when you go to the doctor, you ask for all sorts of exams, but you never ask for a diabetes exam and that is important.”
- “Can I ask a question? Can diabetes produce eye diseases?”
- “Don’t see things clearly. Losing part of life.”
- “Children can’t enjoy life if they can’t see.”
- “Geared towards children and their parents.”
- “We need to have our kids’ visions examined.”
- “Calls attention to vision—kids often complain of vision problems.”
- “Hey parents, get your kids checked, look what can happen to them.”
- “Geared towards adults and their loved ones.”
- “It’s important to take care of your eyes. It shows that you have to take care of yourself.”
- “No one wants to see like Marta. It scares you.”
- “Diabetics must check their eyes.”
- “Take care of your eyes. Get your eyes checked.”
- “Teachers are usually the first ones to see that kids can’t read.”
- “It says that it is sad to lose your vision.”
- “It’s correct that we should have a dilated eye exam.”
- “It is motivational. Good message.”
- “It greatly motivates me. It is a warning sign, it should be everywhere (magazines, newspapers, etc.) so that everyone sees it—especially diabetics who don’t always take care of themselves.”
- “I had never heard of pupil dilation.”
- “People only react when their vision is affected. Insurance is a big factor: they think it is going to be expensive if they have a problem.”
- “It shows you the difference.”
- “It’s good for the people that will listen.”
- “It may not be clear about what the message is. There are many Hispanics who are not educated about this.”

How do you think the images relate to the messages?

- “I think this is realistic, it is good to show how people who have diabetes see. Maybe people think that they see like that because of their age and not due to their diabetes.”
- “It focuses on getting a diabetes eye exam. It focuses on what is an eye exam.”
- “Both pictures are blurry, and they both need to be clearer.”
- “If you see blurry you need to get an eye exam.”
- “The picture tells me that only if I have diabetes I should get an eye exam.”
- “The children look happy when they can see clear.”
- “Health of the body is all integral. When there is a problem with health, it affects your vision.”
- “The diabetes is the problem.”
- “This will tell people to get an exam.”

Do you understand what the message is saying?

- “This message is for the parents to take care of the sight of their kids.”
- “The message here is that we want to prevent problems since childhood.”
- “I think the message is that since the person didn’t take care of their sight that’s the reason for them not to be able to see.”
- “The message here is ‘Do you want to see like this, or like this?’ ”
- “The message is that young people and those who are not ill see well and those with diabetes see differently. This message is for parents to take care of their children.”
- “This is an awareness message, but not only for people with diabetes.”
- “I understand that the message means someone with normal vision and someone with the disease. I like the images because it tells people who don’t have diabetes how it feels for a person with diabetes. My husband has diabetes, and I think that he sees that way. I wonder if he sees like that. Now I know how he probably sees. I did not know. He’s never had his eyes checked.”
- “The message here is informative, but it only tells you to get a diabetic eye exam. It is incomplete. It doesn’t tell you where to get the exam. The message needs to be clearer—more information about where and what to get.”
- “Is a good message and lets you think that you should check if you have diabetes.”
- “This message encourages people who have diabetes to get an eye exam.”
- “The message also encourages us to encourage those who have diabetes to get their eye exam. I will encourage people who have diabetes to get an eye exam.
- “I think that this is for kids who have diabetes.”
- “A diabetic patient has problems with their eyes and can’t see well.”
- “You should check your eyes if you have diabetes.”
- “Diabetes can damage your vision.”
- “I think it is terrible for someone with diabetes to have to see that way. It is sad that they see that way. We don’t think about it. People with diabetes should check their eyes.”
- “If we take care of our eyes, we see the world clearly.”
- “This will tell people to get checked. I don’t have diabetes, so I’d ignore it. We need more general information.”
- “Many people need to get their eyes checked, not just people with diabetes.”
- “Some people may not know what diabetes is. So they may not get it, that it could happen to them.”

- “Should be more open/general message.”
- “Wouldn’t use the name of a disease.”
- “It is conditioning us because the board says if you have diabetes. I do have diabetes, and I know that the effects it can have on my eyes are progressive, degenerative, and irreversible. So it is degenerative. Diabetes affects blood pressure, the pupil cannot dilate at the same rate, so the injury it is causing cannot be reversed.”
- “It should not be conditioned to only those having diabetes. It is being too specific. But I agree that it should mention it somewhere. It should also say AT LEAST every year you should get an eye exam.”

How does the image make you feel?

- “There’s too much to read in here, and I don’t think that it motivates.”
- “It is too complicated, too much information.”
- “One simple phrase would be better, more practical.”
- “It makes me feel that I should check my blood sugar.”
- “It is good to have your eyes checked in case we have something wrong with our eyes.”
- “That it is worth checking my eyes like we check the rest of our bodies. It is good to have a general checkup.”
- “Maybe if you check your eyes, you’ll find out that you have diabetes also. I’m going to check to see maybe I have diabetes.”
- “I don’t have diabetes, so I don’t know what it feels to see like that.”
- “By checking your eyes, you can find out if you have diabetes.”
- “I don’t have diabetes so I don’t need to check my eyes for that disease, but I should check my eyes.”
- “This image is good.”

If you saw this board as an ad, what would it cause you to do?

- “Parents should have their children’s eyes checked.”
- “All participants agree with this statement.”
- “I’ll check my blood sugar.”
- “I think that maybe I have diabetes and I don’t know it because my vision is blurry.”
- “I don’t have diabetes, so I don’t think I would get an eye exam.”
- “I don’t have diabetes, but maybe I can encourage those who have diabetes to check their eyes.”
- “People who have diabetes should check their eyes.”
- “It makes me think of my family.”
- “If there is a family history of diabetes, it really makes you want to get checked.”
- “It is inviting. I would benefit from exam.”
- “It’s for kids. I see kids on it, so it doesn’t say anything to me.”
- “I would not be motivated because it’s a message for diabetics.”
- “Regardless of whether you have diabetes, it should say to get an eye exam.”
- “This image would remind me to get an exam.”
- “Should say that you need to get checked.”
- “She looks happy, so you’d go to get an exam. She’s a happy doctor.”
- “Colors that call attention.”
- “The patient is too dark.”

- “I am worried because I want to know who this is directed to. Children? Young people? Adults? Children can be suffering from eye problems, but cannot explain what is happening to them; they don’t know what is happening to them. How can a little one explain?”
- “Yes, if I have diabetes and I don’t know it, this could help diagnose it.”
- “Yes, but I would check my glucose first.”
- “I wouldn’t do it because I know I don’t have diabetes.”
- “It would worry me. It would make me want to know more.”

Is there anything that you do not like, or anything that bothers you about the board?

- “Less words in the picture.”
- “The message needs to be clearer. More information about where and what to get.”
- “I think that the pictures on both sides need to be clearer. They are both blurry.”
- “I would get rid of the picture with the disease because it is confusing.”
- “I would encourage everybody to get his or her eye exam.”
- “I would say that everybody needs to get an eye exam, but those who have diabetes should do it even more.”
- “Even if you don’t have diabetes, you should check your eyes once a year.”
- “We should tell those who have diabetes to get their eyes exams.”
- “The message is well focused.”
- “It makes you think that you just have to have an appointment with your eye doctor every year. It makes you stop to think that you have to go to the eye doctor, when was the last time you went to the doctor, and if it has been a long time, it makes you react and say, okay it’s time to go. Sometimes adults let a long time go by without going to the doctor, 2 or 3 years. . . . It motivates me to take action.”
- “I like it.”
- “No, on the contrary, it’s very clear.”
- “I’d rather see adults, young people.”
- “One side is happy, the other is sad.”

Board 2: “Eye Exam”

What do you like about the board?

- “This message is very simple.”
- “The message tells you what you should do in a very direct way.”
- “Is very clear—you can see that the person is getting an eye examination.”
- “That’s a clear picture and tells you that everyone who has diabetes should get his or her exam.”
- “Is a reminder that once a year you should check your eyes.”
- “It is important to see the picture because it reminds you to check your eyes.”
- “It reminds me of getting an eye exam.”
- “I like the picture. The setup is clear. I haven’t been at the doctor for a while, and this picture makes me think that I should go.”
- “I haven’t gotten my eyes checked in a long time because I think that I see well, but you never know. After looking at this board, I think I should.”
- “This board is a reminder that you should get your eyes examined. I already got my appointment.”

- “This board makes me want to check myself for diabetes to make sure that I don’t have it. I’m having trouble seeing this board, so I should check my eyes.”
- “I like the attitude of the doctor. She’s a nice doctor, and that’s nice because not all doctors are the same.”
- “The doctor looks happy to check the eyesight of the patient. It is nice and pleasant.”
- “What are the first symptoms that you have when your vision is failing you? Maybe you should add that.”

How do you think the images relate to the messages?

- “The person in the picture looks pleasant and shows that you are important to her. She represents knowledge and training because she has an uniform.”
- “She’s in an environment that shows advanced technology: there’s hope.”
- “The woman complements the message in a very simple way.”
- “They are showing a patient, and that’s nice because it shows that the patient is part of it.”
- “This picture shows communication between patient and doctor.”
- “Has lots of information.”
- “The picture is very important.”
- “This one catches my attention. Makes you want to ask yourself those questions.”
- “This one tells you that there are people out there with the necessary tools to help you. This picture tells you whom you can go to.”
- “I don’t like the color in the picture: it looks too dark.”
- “The picture looks faded.”
- “The bottom of the picture is all black; the text reminds you of blindness. I would like to see more colors.”
- “Make this board more colorful and attractive.”
- “I didn’t know diabetes affected the eyes.”
- “It’s time to get an eye exam.”
- “It tells me I need to go get my eyes examined. I need stronger glasses.”
- “You should get an exam whether you have diabetes.”
- “This is for diabetics.”
- “This should say get an eye exam—whether you have diabetes or not.”
- “Should be for adults and children.”
- “Maybe use an illustration with more color.”
- “Message should be for everyone.”
- “Patient should be more visible.”
- “Vision is always last. We take it for granted. Message should be for all, so that everyone gets checked.”

Do you understand what the message is saying?

- “That there is help out there and you should get your eyes checked.”
- “The message is the most important thing in that board.”
- “The message is that people should obey, they should get their eyes checked.”
- “People don’t think about their health, and they should.”
- “Everyone should go get the exam, but this is mostly for people with diabetes.”
- “It seems to be for people with diabetes.”
- “Since I don’t have diabetes, I don’t ask for the dilation of pupils.”

How does the image make you feel?

- “It makes me feel that the professional can help me.”
- “It makes me feel that I should check my blood sugar.”
- “It is good to have your eyes checked in case we have something wrong with our eyes.”
- “The face of the doctor is nice. She’s smiling. Makes it feel you a warm feeling. You feel welcome.”
- “I feel nice and comfortable with the doctor.”

If you saw this board as an ad, what would it cause you do to do?

- “I would not be motivated.”
- “I’ll check my blood sugar.”
- “I think that maybe I have diabetes, and I don’t know it because my vision is blurry.”
- “I don’t have diabetes, so I don’t think I would get an eye exam.”
- “I don’t have diabetes, but maybe I can encourage those who have diabetes to check their eyes.”
- “I don’t have diabetes, but I should get my exam anyway.”
- “If I don’t have diabetes, then I’d ignore it and wouldn’t get an eye exam.”
- “I’d ask my doctor if I needed to get an exam. What are the consequences of diabetes?”
- “Since I don’t have diabetes, I won’t get an exam.”
- “This seems to be only for those with diabetes.”
- “Everyone should get an eye exam, not only diabetics. Some people will ignore it because they don’t have diabetes.”

Is there anything that you do not like, or anything that bothers you about the board?

- “The girl should look more directly at the patient.”
- “I like it better if she looks at me not at the patient.”
- “I would change the bottom part of the board to the top. I think the bottom is ‘the message.’ Switch the question to the bottom.”
- “The image is fine, but the patient needs to be clearer. More color in the picture.”
- “I won’t change anything. The picture is fine, and the doctor is warm and welcoming.”
- “I like the words more highlighted. That would make me more motivated, would encourage me more to go see a doctor for diabetes and other diseases.”
- “Needs more color in the picture, brighter, more attractive, need to show the patient’s face more.”
- “The message is OK.”
- “Add, ‘Even if you don’t have diabetes.’ ”
- “Specify that vision loss is caused by diabetes, etc.”
- “Explain that people with diabetes need to often get eyes checked.”
- “Should make people want to get checked.”
- “I like the image—you can trust the doctor.”
- “It shows a responsible person getting their vision checked.”
- “I don’t like the patient—you can’t see her.”
- “It shows only the doctor. Need to see patient more.”
- “Maybe use another word for pupils.”

- “I think it would be important to change the board and take out ‘if you have diabetes’ to put ‘if you feel your vision is failing’ or ‘if you notice a change in your vision,’ or you can explain the first stages of eye disease, then say consult your eye doctor.”

Board 3: “Ojos Que No Ven . . .”

What do you like about the board?

- “The heart can feel even if you can’t see.”
- “This phrase is incorrect in this context because those who can’t see feel just like everyone else.”
- “The message is offensive although the intention is another.”
- “This phrase doesn’t go with the message of eye health.”
- “This phrase is not communicating what we want to convey.”
- “It has a double meaning. It is not the right message.”
- “I don’t like the expression. It doesn’t go.”
- “That expression is a very popular one, but it doesn’t go with the message. People who can’t see CAN feel.”
- “I don’t get it. This phrase doesn’t go there.”
- “To me, that’s not a good message. It doesn’t go.”
- “It has various meanings.”
- “This is a wrong message because it tells you that if you don’t see you don’t feel.”
- “Everyone has heard the phrase—but it means something else.”
- “When you see, everything is great; when you don’t, you need to go to the doctor.”
- “You can’t see the beautiful things, so you don’t feel happy.”
- “It makes you sad to think you won’t see your kids.”
- “Message is geared towards diabetes.”
- “It’s confusing.”
- “It mixes things that have nothing to do with vision.”
- “The phrase doesn’t go with message.”
- “Image and phrase are confusing.”
- “The phrase is nice, but that’s all I’d read.”
- “I like the saying and image, but not the message.”
- “Maybe use blind person with cane—so you can see what will happen.”
- “Image doesn’t send correct message. I’d like something different.”
- “Don’t like the top. Needs to get something that will get your attention.”
- “Different people—person already affected.”
- “Do you know what the consequences are of not taking care of your vision?”
- “Don’t wait until you are here (blind) to take action.”
- “That’s wrong. You’ll still feel even if you can’t see. That is not a good message to go by.”
- “I’d like to donate my eyes when I die, so I can let someone else see.”
- “It’s sad. It makes me feel sad.”
- “I’d change everything. I don’t like any of it.”
- “Needs a more positive message—very contradictory.”
- “It doesn’t go with message of eye exam.”
- “It’s a saying, but it doesn’t mean that.”
- “It doesn’t go. I’d say something like, ‘Eyes that see, heart that feels.’ ”

- “Vea el verdo de la naturaliza.”
- “Importancia de la visión.”
- “Viendo el camino se ve como debe andar.”
- “This one is good.”
- “Good job.”
- “If I don’t see, I don’t feel.”
- “It’s not right—it says you won’t feel if you can’t see.”
- “It is not motivational.”
- “The text below should be larger.”
- “Vea con amor y color. (Instead, it could this).”
- “I think it’s true—if you can’t see, you don’t feel.”
- “I wouldn’t get an exam from this. It has nothing to do one thing with the other.”
- “Vista sana.”
- “Like the image, but not the phrase.”
- “Message is below in black box—image doesn’t go with it.”
- “The image of woman looks healthy, so it looks like her eyes are well.”

How do you think the images relate to the messages?

- “This picture doesn’t mean anything.”
- “The picture of the women is fine, but the phrase in that context doesn’t motivate me.”
- “It doesn’t make sense to me.”
- “This expression is a song, a very popular song, but in this message it doesn’t make sense.”
- “The statement that if they don’t see it they can’t feel it is wrong.”
- “The picture is fine, but the statement is not clicking with me.”
- “To me, the woman in the picture can’t see and that’s why she can’t feel. You can’t say that if you don’t see you can’t feel. Because blind people can feel. “
- “The picture and the expression don’t go well together. It doesn’t click.”
- “The picture doesn’t tell you anything—is just a woman talking to a man. There’s no message.”

Do you understand what the message is saying?

- “This tells you that people with diabetes should get a dilated eye exam. I don’t have it, so I won’t go.”
- “There are many meanings to this phrase, but in this case it doesn’t go. The bottom part of the board is fine, but the statement and the picture are not.”
- “This phrase and this message can be applied in two ways: that if you don’t see something, you can lose or miss something.”
- “That phrase is very popular, very familiar. It says that what you don’t see it won’t hurt you. It is a very popular phrase. It is like kids: if you don’t hear them, you don’t see them. But in this message, it doesn’t go.”
- “This is an old Spanish theme, but it doesn’t belong there. It doesn’t really match.”

How does the image make you feel?

- “This picture would not motivate me. “
- “I don’t like the layout. “

- “I still think that this doesn’t make any sense.”
- “This picture doesn’t go and doesn’t motivate me.”
- “The picture is too blurry; it needs to look clearer, brighter, although this picture is brighter than the other ones.”

If you saw this board as an ad, what would it cause you to do?

- “I don’t think I would get an eye exam.”
- “I don’t have diabetes, but maybe I can encourage those who have diabetes to check their eyes.”
- “I would not feel motivated by this message because it doesn’t make any sense.”

Is there anything that you do not like, or anything that bothers you about the board?

- “This doesn’t make any sense.”
- “I don’t understand it, and the picture don’t tell you anything.”
- “Put glasses on the woman. Make her look like she can’t see. And she doesn’t want to lose her feelings.”

Board 4: “Driving . . .”

What do you like about the board?

- “This is a good message. I like it.”
- “That message goes with the eyesight theme and other health problems as well.”
- “The message matches the phrase, the saying.”
- “I agree with this message.”
- “It makes you want to appreciate your vision.”
- “I like phrases, old sayings.”
- “The message is clear—go get your eye exam right away for the rest of your life, or you can go blind.”
- “It is a nice poster. A person with diabetes must be able to see the road. They need to check their eyes.”
- “I like the phrase a lot because makes a person think about what they have, good vision.”
- “The phrase is good.”
- “Too much emphasis on diabetes.”
- “I would like a more general message: get checked annually, even if you don’t have diabetes.”
- “I’d take out diabetes, or at the end—something like, you should do it, especially if you have diabetes.”
- “This one tells me to focus more on my health.”
- “Message is clear. This should be for the general public, not just diabetics.”
- “We need to take care of our eyes—vision is important to drive and for driving test.”
- “This message is directed at people with diabetes.”
- “The view should be brighter, maybe a sunnier view.”
- “Needs brighter colors—more vivid photograph.”
- “If you take care of your eyes, you can drive better and avoid accidents.”
- “You’re independent until you lose your vision. It’s hard to depend on others.”

- “It scares me because it makes me worry I won’t be able to drive one day.”
- “I won’t feel the same if I lose my vision.”
- “I think it’s fine.”
- “If you want to drive well, get your eyes checked.”

How do you think the images relate to the messages?

- “Not being able to see limits what we can do. It shows the important things that we can lose. It’s important to check your eyes.”
- “The picture and the message works well.”
- “I like the picture.”
- “This one is very good—image and phrase are good.”
- “I like the picture. This reminds me of how my husband has eye problems, he doesn’t wear glasses, and he sees badly. He needs an exam. I don’t think that he can see well while he’s driving.”

Do you understand what the message is saying?

- “I think the message it is clear.”
- “This message motivates people to get an eye exam.”
- “Driving is very important, and this message makes it very real.”
- “This message talks to people who are ill already, but it motivates them to take care of their vision.”
- “The message should be for everyone, not only for people who have diabetes.”
- “Is a good message for people who have diabetes primarily, but is good for everyone to remember about their eyes and driving because they can lose their license and have accidents.”
- “I like the message—it is clear. Sometimes we don’t think about it until you lose your vision. It can cause accidents, blindness.”
- “This message tells us that sometimes we don’t pay attention.”
- “I understand that you take for granted what you have until is gone, like driving is very important.”
- “It is a strong message.”
- “Real and very specific message.”
- “Driving is important to everyone, even those who don’t drive, because you still need someone to drive you around.”
- “The phrase is very popular, and the message is very strong.”

How does the image make you feel?

- “I like it because we see the picture, and it makes me want to go to the doctor and get your eyes exam.”
- “The picture is okay.”
- “It makes you want to appreciate what you have and the privilege of driving and how you need good vision.”
- “You have to always make the effort to take care of yourself.”

If you saw this board as an ad, what would it cause you to do?

- “I would consider an eye exam if I were a diabetic, although I think that I should still get an eye exam.”
- “I would also have an eye exam if I were a diabetic.”
- “The board motivates me to take action.”
- “It is motivational.”
- “Have much more respect for your eyesight.”
- “I like the phrase. It is very motivating.”
- “I agree with this message. If I saw that, I would get an eye exam.”

Is there anything that you do not like, or anything that bothers you about the board?

- “Add more colorful, brighter picture.”
- “Add picture of trees, flowers, clear signs, mountains, clearer view of the road
- Show more of the pretty road.”
- “Change the phrase to ‘Valoremos lo que tenemos . . . para no perderlo en el futuro’—more positive.”
- “The picture is too dark, needs more color.”
- “This picture needs more of a view.”
- “The signs are out of focus; it would be nice to show the signs clearer. What is she looking at?”
- “Show some trees or mountains or something so we know what is she looking at other than a blurry road.”
- “I think the phrase should be bigger.”
- “Add glasses to the driver.”
- “Diabetes wording is a problem.”
- “Don’t permit diabetes to leave you blind.”
- “The message should be more general, not just for diabetes.”
- “ ‘Diabetes’ could be replaced with any eye disease.”
- “It’s geared for people who drive.”
- “Many Hispanics don’t drive, so we don’t get it.”
- “These images and text do work together. They make sense.”
- “If you drive, you need to check your vision.”
- “It makes more sense—it’s more focused.”
- “People who don’t drive will ignore it.”
- “I wouldn’t change anything.”

Board 5: “Glaucoma Message on Eye Exam Board . . .”

What do you like about the board?

- “Glaucoma is not very well known; the term is not that known. This message is too specific to age. It is confusing.”
- “There are many other diseases that you suffer when you are 60. Why focus on this one?”
- “Putting the age range discourages anyone outside that age to get an exam.”
- “Is more specific to that age of 60 years—for them is okay to go for not for others who are younger. Since I’m not that age I won’t go.”

- “For people who are 60, they should get an eye exam, get more information. Anyone else is going to think that if they are not 60, they are okay and don’t need to hear or go to the exam.”
- “I disagree with that message because the doctors are saying that you should check your eyes every 6 months or once a year, not every 2 years.”
- “That board should not say every 2 years.”
- “This message is wrong because you should not wait to be 60 to get your eyes examined. This message should be for everybody, not only for people 60 years old.”
- “This message should apply to everybody. I would stop reading once I see the age 60; it doesn’t apply to me.”
- “The message should be more general or you should change the order of the statement to “Get a dilated eye exam, once year, if you are at risk” “You are at greater risk for glaucoma if you are 60 years and older.” Switch the statement.”
- “I don’t like this board because it tells younger people that they don’t need to pay attention. No matter if you are over 60 you can get the disease. I would get rid of the age 60.”

Do you understand what the message is saying?

- “This message tells you that if you are 60, you should be even more concern with your eyes, but I don’t think that you should exclude others because they don’t know much about glaucoma.”
- “You should write something about prevention before age 60.”
- “The two terms glaucoma and the age are confusing.”
- “I think that everyone is at risk, but those 60 even more; therefore, that’s what you should say.”
- “You should tell the community at large that they should take care of their sight; age 60 is too late. Why emphasize on those who are already ill?”
- “This message motivates people who are 60 years old to get an eye exam.”
- “I think that 60 is too late to get an exam. You should do it earlier.”
- “The message is not clear because they should go more frequent, at least once or twice a year.”
- “This message motivates people who are 60 years old to get a eye exam.”
- “I think that 60 is too late to get an exam. You should do it earlier.”
- “The message is not clear because they should go more frequent—at least once or twice a year.”
- “I think that if you are over 60, you should get checked more often than every 2 years.”
- “I understand the message, but I disagree. I think that 2 years is a long time to get an eye exam.”

Is there anything that you do not like, or anything that bothers you about the board?

- “This only targets one group of people.”
- “I have seen people with glaucoma at an earlier age than 60. Change the age.”
- “I would change the age.”
- “I would describe what is glaucoma and say that it is because the majority of people don’t know what it is.”
- “I would use the phrase of this one on number 1 board with the kids. That would make it better.”

Task 3—Message Delivery and Preferences

Through what means of communication are you most likely to pay attention for information about health care?

- “Detailed brochures.”
- “Television news and entertainment shows.”
- “Radio shows are key sources of information.”
- “Posters in the doctor’s office, information at clinics.”
- “TV health programs.”
- “Radio is OK but not as effective.”
- “Web not considered effective because not everyone has access.”
- “I go to the library and get books and the Internet. I don’t watch much television.”
- “Billboards are good for me. I do a lot of driving, and I see all kinds of messages about churches and other things ,but the message is short—only the main idea. I like those a lot. Very simple message that catches your attention.”
- “I prefer newspapers because you can get articles about health issues. I read in both languages so I read both newspapers.”
- “I watch television shows, and they have a channel exclusively for the doctor’s office where they have television programs about health.”
- “I get most of my information through Web TV and newspapers.”
- “The Internet is a good source of information—you can get just about everything.”
- “Spanish- and English-language newspapers and magazines.”
- “Billboards on buses and on the road are very good; they catch my attention.”
- “I like reading magazines in both languages.”
- “Commercials.”
- “Educational programs.”
- “Inserts (with bills, etc.)”
- “Direct mail (send with mail carrier).”

What radio programs do you listen to? What newspaper and magazines do you read?

- “I get my information from the newspapers like *USA Today* because it covers more than just Milwaukee but the whole country.”
- “I read the local Milwaukee paper and the Hispanic papers. Some are in English, but I read both languages, too.”
- “I read various magazines such as the *Readers Digest*, *Newsweek*, *Chicago Tribune*, *US Today*, *Milwaukee News* and almost all the Hispanic papers in Milwaukee including Spanish papers.”
- “Brochures.”
- “*Parents* (Spanish).”
- “*Family Circle*.”
- “*Reader’s Digest*.”
- “*People* (Spanish).”
- “*Women’s (Vanidades)*.”
- “*Selecciones*.”

If the message is on TV, are you more likely to watch health care information if it is presented in a commercial, a regular entertainment program, a talk show, or the news?

Which programs do you watch?

- “Almost everybody, 95 percent, watches the news.”
- “The news is more attractive.”
- “On Saturdays I watch soccer, and the commercials would be a good venue for me.”
- “I prefer written information.”
- “I watch Spanish news.”
- “I watch both Spanish and English news.”
- “I watch doctor’s programs on television.”
- “I only watch English because I don’t speak Spanish well, but Spanish is just as useful to others in my house who watch the news.”
- “The news is the best way to reach me because I am busy and don’t have time to sit and watch, but I do watch the news.”
- “I prefer an hour program usually on channel 10, the local station.”
- “I watch Spanish television and usually the news and novellas, but mostly the local news.”
- “I watch news all the time. I don’t like to watch commercials. That’s usually when I get a break and miss out on the commercials.”
- “I watch advertising on television, both English and Spanish.”
- “I don’t watch commercials because I, like many other friends of mine, program Web TV to skip over the commercials.”
- “I prefer the news.”
- “The news is the first thing I turn on every day, even before I make coffee. The news is important to me because I’m always in need to know about the weather. I check the weather every day.”
- “I check the weather every day as well and watch the news in the morning, at 6 p.m. and again at night. It is pretty much the only thing I watch—occasionally a movie.”
- “I think that commercials are good because you don’t have to hear it more than once. You hear the message once, and that’s it. You don’t have to pay attention again and again, that’s it. I remember one heart commercial about an ambulance and calling emergency right away if you are having a heart attack. That was very informative and catchy.”
- “I like some commercials like the one with the lady having a heart attack. I remember it because of the fear the commercial instills in you. I saw that commercial in both languages English and Spanish. I watched both commercials in both languages.”
- “The news is best for me. I prefer news in English.”
- “I watch the news, mostly the local news, and also entertainment shows such as *Sábado Gigante*.”
- “I prefer the news because that’s what I watch mostly. I watch both English and Spanish; that’s the best way to catch me.”
- “*Despierta America*.”
- “*De mañanitas*.”
- “*Primer Impacto*.”

Do you actually pay attention to commercials? If so, which kind of commercials do you watch? Which ones attract you the most? Do you remember any commercials about health?

- “I watch some commercials, but I prefer news.”
- “I don’t watch commercials—mostly news.”
- “I catch a commercial here and there before I catch the news.”
- “Commercials are more eye-catching, but I don’t remember any commercials. But I do watch them.”
- “I don’t really like commercials. I watch mostly news and shows.”
- “I remember the commercials about the allergies. I like the way they show people, lots of people and faces. Makes you stop and look at those people. I can’t remember specific commercials but that one.”
- “If it is a good commercial I’ll watch. Like the Viagra commercial, which is funny and catches my eyes. The herpes commercial also catches my attention.”
- “Commercials make you think.”
- “I tape shows and the F.F. so they don’t have to watch ads.”

Do you watch news programs? If so, which ones do you watch? If news programs contained information about health, would you pay attention to them?

- “I watch the news and talk shows such as *Primer Impacto*.”
- “I prefer half and hour news shows. I don’t watch a lot of television, but I like the news shows on the Christian stations, *Oprah*, and the local news.”
- “It is good to have something on a special program like on Web TV because you can program what you want to watch. If it is health I usually program it so I can watch it.”

What kind of brochure would you like have? What kind of information would be most helpful? What would you want it to look like? What kind of images would you like to see?

- “I prefer a brochure that is not too long.”
- “Make an attractive brochure.”
- “Don’t make the brochure too long, and make it easy to read.”
- “Make a brochure short with just a few pages with the most important information. Use simple language.”
- “Something that calls your attention.”
- “I like short brief brochures that explain the subject and say it short.”
- “Perhaps a threefold is sometimes even too much. Maybe just don’t use too many words to say what you are trying to say. Don’t overdo it. Otherwise they do me no good.”
- “I don’t pay attention to brochures. I rather read a magazine.”
- “I don’t like them either, but if you want to do one, make it short and simple. Very specific. Use persuasion style.”
- “Make it eye-catching. On the cover, ask a question. Make it sound important enough so people would want to pick it up and read.”
- “Most brochures are boring. Make yours short and to the point.”
- “Don’t make too many brochures on one topic. Just say what you have to say in a few words.”
- “Put a question on the front of the brochure. Make people with diabetes want to pick up the brochure. Make a beautiful design that catches your eyes.”

- “I like brochures with lots of pictures and a brief statement. Maybe make it a birthday card so you can read and pass on to others for their birthdays with the message about getting an eye exam every year. In this manner you don’t throw away the pamphlet after you read it, but you pass along to others. It makes you feel like you are helping others.”
- “Make it attractive with beautiful pictures and a sample of what is glaucoma but a brief statement. Have some simple messages.”
- “I prefer on the cover of the brochure a picture that catches my eyes and a question about what do I have lose.”
- “Make sure the letters are large, but don’t make the brochure too long.”
- “Don’t make me wonder what the brochure is about. Tell me right away what is the point. Perhaps something like ‘If you don’t take care of your eyes, you can lose it.’ ”
- “Write a convincing statement, and also add options, add places you can go if you don’t have insurance, so people who don’t have insurance can see a doctor.”
- “Write a good message, a strong statement. Make the brochure cover and the inside pages colorful. Write down a telephone number to call for more information. Don’t make the brochure too long.”
- “Make a brochure short with just a few pages with the most important information. Don’t try to write everything. If it is a big pamphlet, people will throw it away.”
- “Write a message that talks to you directly—for example, “Does this concern you?” or “Is your vision important to you?”
- “Have brochures in separate languages—English and Spanish. A lot of people don’t read both languages.”
- “Make a brochure with a message that is very specific such as “Do you have this?” like the U.S. Army commercials—‘We need you.’ ”
- “Bright colors, short text.”