

Practical recommendations emerging from Work Package 3

(Alessandra Rossetti's PhD thesis)

- Provide volunteer authors of simplified medical content with some form of technological assistance that can reduce their workload and further develop their writing skills:
 - Any form of technological assistance would need to be tailored and introduced gradually into the existing workflow;
- For authoring tasks that cannot be (semi-)automated, ask volunteer authors for feedback on the resources provided to them;
- Provide volunteer authors of simplified medical content with some form of technological assistance that reduces vagueness in the simplification guidelines and ensures their automatic and consistent application:
 - Any form of technological assistance would need to account for a broad range of text characteristics (including characteristics at the discourse level);
- Train volunteer authors to combine technological assistance with their intuition of what makes medical texts accessible;
- In addition to focusing on simple language, consider text segmentation and formatting:
 - Having technological assistance might help authors consider text segmentation and formatting;
- Do not focus the accessibility strategy on text format only — instead, make health content available online also in audio and visual formats;
- Translate health content into readers' L1;
- Introduce MT (followed by PE/validation conducted by volunteer health domain experts) into the translation workflow.

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