### Instruments to Assess Health Literacy

<table>
<thead>
<tr>
<th>Tool Acronym</th>
<th>Tool’s Full Name</th>
<th>Time to Administer</th>
<th>Pros</th>
<th>Cons</th>
<th>Scoring</th>
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| FSSQ         | Duke-UNC Functional Social Support Questionnaire | Depends on Clinician | • Identifies social support issues.  
• Assesses a person’s need for and perception of their social support.[^2] | • Does not resolve social support issues.  
• Does not include other barriers to medication adherence.[^2] | Questions scored on a 1-5 scale.  
• Scores from all 8 questions are tallied and divided by 8 to get an average.  
• The higher the score, the greater is the need for social support[^2] |
| Medication Knowledge Survey | Medication Knowledge Survey | Depends on Clinician | • Assesses a person’s knowledge of each medication they are taking  
• Helps in developing a plan for improving knowledge[^2] | The patient needs to bring all their medication bottles to the appointment at the time of the test[^2] | Mark each correctly answered question. Incorrectly answered questions should be used to identify knowledge gaps and develop a knowledge improvement plan.[^2] |
| MMAS-8 | Morisky Medication Adherence Scale | Depends on Clinician | • Identifies adherence problems[^5]  
• Used to monitor adherence over the course of treatment[^5]  
• Measures specific medication-taking behavior[^5] | Subject to recall bias[^3]  
Subject to overestimation of adherence[^5] | 1 point for every yes.  
Score of 8 = Highly adherent  
Score 6-8 = Medium adherers  
Score 0-6 = Low adherers[^5] |
| NVS | Newest Vital Sign | 3 minutes[^3] | • It is available online  
• It is in English and Spanish[^3]  
• Correlates with TOFHLA  
• The test is limited to 6 items[^3] | • It can only be validated in primary care settings[^4]  
• It only assesses reading nutritional labels, not general written text[^3] | 0-4 questions correct= low literacy  
5-6 questions correct= patients likely do not have low literacy[^4] |
<p>| Readiness Ruler | Readiness Ruler | Depends on Clinician | • Assess readiness to change (motivation) for a specific activity[^2] | Does not specifically discuss how to address barriers[^2] | The patient marks their own readiness on a scale of 0-10. A score above 5 shows that a person is ready to change.[^2] |</p>
<table>
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<tr>
<th>Test Name</th>
<th>Description</th>
<th>Administration Time</th>
<th>Characteristics</th>
<th>Scoring System</th>
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<tbody>
<tr>
<td>REALM-R</td>
<td>Rapid Estimate of Adult Literacy in Medicine, Revised</td>
<td>Depends on Clinician</td>
<td>- There is a long version and a short version&lt;br&gt;- Assesses adult literacy related to health&lt;br&gt;- Only available in English&lt;br&gt;- Can only be used to test adults&lt;br&gt;- Limited to word recognition, not reading comprehension&lt;br&gt;- Tally of the correctly pronounced words. A score of less than 6 may indicate poor health literacy.</td>
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<td>SAHLSA-50</td>
<td>Short Assessment of Health Literacy for Spanish Speaking Adults (Based on the REALM-R)</td>
<td>5 minutes</td>
<td>- This test is designed for Spanish speakers&lt;br&gt;- It is only for adults&lt;br&gt;- Tally of correct Answers. A score below 37 indicates poor health literacy.</td>
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<tr>
<td>TOFHLA</td>
<td>Test of Functional Health Literacy in Adults</td>
<td>Long: 22 minutes</td>
<td>- There are English and Spanish versions&lt;br&gt;- It has been used in numerous clinical trials&lt;br&gt;- It is more effective than word recognition alone&lt;br&gt;- It can gauge a person’s understanding of a health-related passage by assessing reading comprehension and numerical ability&lt;br&gt;- The original version is too lengthy&lt;br&gt;- One point per correct answer. In the long version:&lt;br&gt;0-59=Inadequate health literacy&lt;br&gt;60-74= Marginal Literacy&lt;br&gt;75-100= Adequate Literacy&lt;br&gt;In the short version:&lt;br&gt;0-53= Inadequate health literacy&lt;br&gt;54-66= Marginal health literacy&lt;br&gt;67-100= Adequate health literacy.</td>
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<td>STOFHLA</td>
<td>Short Test of Functional Health Literacy in Adults</td>
<td>7 minutes</td>
<td>- It is a shorter version&lt;br&gt;- It has a shorter administrative time&lt;br&gt;- It was tested on diverse populations&lt;br&gt;- Even the shorter version has a longer administration time than other tools&lt;br&gt;- One point per correct answer. The 36-point scale of the S-TOFHLA is divided into three categories of functional literacy: Inadequate (0-16), Adequate (17-22) and Functional (23-36).</td>
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1. Agency for Healthcare Research and Quality. [SAHLSA](#).
4. HIV Clinical Resource. [Health Literacy Screening Tools](#).
7. Resources Centers for Minority Aging Research. [Health Literacy](#).