

Test of Functional Health Literacy in Adults
Short Test of Functional Health Literacy in Adults (STOFHLA)

STOFHLA

Directions for Administration, Scoring & Technical Data

Short Test of Functional Health Literacy in Adults (STOFHLA)

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STOFHLA - English

Directions For Administration & Scoring

I. Introduction

A. Background

A review of existing literacy assessment instruments shows that most concentrate on word recognition or narrative text comprehension skills. To answer the need for a more comprehensive evaluation of literacy, and a different conceptual framework for understanding the impact of low literacy on health status and/or health care delivery, the Literacy in Health Care Project developed the Test of Functional Health Literacy in Adults (TOFHLA). TOFHLA is a functional literacy assessment tool designed to evaluate adult literacy in the health care setting. The instrument measures functional literacy on the assumption that more than classroom reading ability is necessary to understand and negotiate the health care system adequately. TOFHLA is especially directed toward capturing numeracy and reading comprehension skills in the middle to low levels of literacy ability.

B. Short TOFHLA

Initial use of the TOFHLA indicated that healthcare professionals found a need for a shorter version for screening patient literacy in clinical and educational settings. While the full TOFHLA provides a more complete estimate of patients' functional health literacy, the Short TOFHLA is a quicker, more efficient way of determining patient functional health literacy. It measures understanding of functional health literacy tests, a more effective measure of literacy than simple word recognition. It decreases administration time to 7 minutes (from 22 minutes for the full TOFHLA) and eliminates the need for visual acuity screening. Administration is also simplified as the tasks involve no manipulatives and may be given as a group test. Although the STOFHLA was originally developed to assess patient health care literacy it has been used to test health care literacy in Direct Service Providers (DSPs) and family caregivers for individuals with IDD. Health care literacy was linked to a person's ability to accurately administer medications in this study.

Special Considerations for Testing Individuals with Potential Low Literacy.

An important part of health literacy features personal ability. Those with few or reduced skills often feel vulnerable when literacy inability is brought to their attention or to the attention of those around them. The force of this vulnerability is heightened by peer and social pressure. Consequently, people with low literacy employ sophisticated mechanisms to conceal their literacy skill level and to prevent subsequent discovery or embarrassment, not to mention outright anger.

Low literacy associated behaviors may include

- pointing to the text with a finger, while reading
- lifting the text closer to be read
- claiming "the light's not good"
- complaining about "having trouble seeing"
- expressing fatigue
- explaining that they don't have time
- stating that they don't think the material is interesting

When you encounter signs of low literacy, soften the impact of unmasking by stating compassionately, "I am not here to embarrass you, frustrate you, or make you feel uncomfortable. I am willing to stop if you want to, but the information you can give me is very special and valued highly by all of us here. (PAUSE) May I continue?" Honor the dignity to which every human is entitled.

II. Preliminary Procedures

Visual Acuity: routinely, low literate persons will mask reading problems by saying that they cannot see the materials they are given. This test is printed in 14-point font (large print) appropriate for persons with visual acuity at least 20/50. If the respondent wears glasses, ask them to put them on for this test.

III. STOFHLA: Reading Comprehension

A. Description

STOFHLA (Reading Comprehension) tests a patient's ability to read passages using real materials from the health care setting. The test of 36 items uses a modified Cloze procedure. Passages are selected from instructions for preparation for an upper GI series and

the patient rights and responsibilities section of a Medicaid application form. The passages are ordered by increasing difficulty.

B. Directions for Administration

It is important to present the reading comprehension section verbatim from the scripted introduction. This is a timed test and should be stopped at the end of 7 minutes. When 7 minutes have elapsed, tell the respondent that "That should give us what we are looking for. Thank you for your cooperation." and remove the test materials.

C. Directions for Scoring STOFHLA: Reading Comprehension

You may score the results immediately on the spot, after the respondent has left. You will need to do six things to confirm and transcribe respondent data to appropriate boxes in the column of boxes appearing on the page opposite the text:

1. For each blank, circle the letter in the box corresponding to the letter selected by the respondent. .
2. Compare the answers by page and variable name to the appropriate scoring key provided below. .
3. Respondents receive "1" for correct or "0" for incorrect for each blank.
4. Sum correct answers for each page, and record total at bottom of page.
5. Sum the subtotals for all pages and record total on the last scoring column page as the Reading Comprehension Raw Score. Record in the appropriate box on the back cover of the test booklet (STOFHLA Total Score).

STOFHLA: Reading Comprehension Score Key

English: 14 Point Font

Passage A	Passage A	Passage A	Passage B	Passage B	Passage B
A1 a	A6 a	A12 c	B17 c	B24 d	B33 d
A2 b	A7 c	A13 b	B18 a	B25 b	B34 c
A3 d	A8 b	A14 c	B19 d	B26 c	B35 b
A4 a	A9 d	A15 d	B20 b	B27 d	B36 b
A5 c	A10 b	A16 a	B21 d	B28 d	
	A11 c		B22 c	B29 a	
			B23 a	B30 c	
				B31 b	
				B32 a	

IV. STOFHLA: Functional Health Literacy Level

A. Functional Health Literacy Level

Look up the Total STOFHLA Score on the table below. Record the persons Functional Health Literacy Level on the back sheet of the test packet

TOFHLA Functional Health Literacy Levels

Level	TOFHLA Score	Functional Health Literacy Description
Inadequate Functional Health Literacy	0-16	Unable to read and interpret health texts.
Marginal Functional Health Literacy	17-22	Has difficulty reading and interpreting health texts.
Adequate Functional Health Literacy	23-36	Can read and interpret most health texts.

B. Functional Interpretation of STOFHLA Scores

1. Individuals who have Adequate Functional Health Literacy should be able - to read, understand, and interpret most health texts.
2. Individuals who have Marginal or Inadequate Functional Health Literacy will have difficulty reading, understanding, and interpreting most health materials. They are not going to be able to read and understand directions for health

Remember that individuals with low functional health literacy often are ashamed of their literacy status. Low literacy does not mean low intelligence. Validation of an individual's worthiness despite literacy challenges is a value-based response to any difficulties with the testing.