

Health Education Materials Assessment Tool

Use the items below to figure out if a material can be designated as “easy-to-read.”

See page 5 for an annotated sample material that can be designated as “easy-to-read.”

A few tips before you get started

- If it’s your first time using the tool, read through the items before you begin assessing the material.
- You may find it helpful to read the whole material before you assess it.
- Mark each item as either “yes” or “no.”
- You must **score items 1 through 6** for every material.
- Only score **item 7** if the material has visual aids. Only score **item 8** if the material has numbers.
- Materials must get a “yes” on all required items to be considered “easy-to-read.”

A note on cultural relevance

In addition to using this tool to determine if materials are “easy-to-read,” it’s important to make sure materials are culturally relevant for readers. Any time you’re assessing a material, keep cultural considerations in mind. For example:

- Does the material use language and examples (of activities, foods, etc.) that would be familiar to the audience?
- Are images representative of the audience’s race, ethnicity, age, gender, and ability?
- Does the material avoid perpetuating stereotypes?

1. The material makes its purpose completely evident.

The material has an obvious main message near the top. Think of the main message as the most important thing for the audience to remember after reading the material. You need to be able to tell at a glance what the main message is.

Yes

No

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2. The material does not include information or content that distracts from its purpose.

The material includes need-to-know information only — it skips the nice-to-know details. The idea is to focus on key information readers need in order to take action. Ask yourself whether any of the information would distract or overwhelm you if you were unfamiliar with the material’s topic.

Longer materials are more likely to have distracting information, but there’s no set maximum length for materials to get a “yes” on this item. Keep in mind that the material **does** need to include all the content that’s relevant to understanding the main message.

Yes

No

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3. The material uses common, everyday language. Medical terms are used only to familiarize the audience with the terms. When used, medical terms are defined.

The material uses plain language that everyone can understand (e.g., “high blood pressure,” not “hypertension”). When unfamiliar terms are necessary, the material explains them in context and provides an in-text definition using easy-to-understand language. (Think: a reader just diagnosed with diabetes probably needs to learn the term “glucose.”) Ask yourself whether you’d understand all of the terms in the material if you didn’t know anything about the topic.

Yes

No

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4. The material uses the active voice.

The material mostly uses active voice and avoids passive voice. Ask yourself: Is the subject of the sentence **doing** the action (e.g., “experts recommend that you get a flu shot”)? If so, it’s active voice. Or is the subject **receiving** the action (e.g., “getting a flu shot is recommended by experts”)? That’s passive voice.

Yes No

5. The material breaks or “chunks” information into short sections.

The content in the material is divided into short chunks of information **with headings**. Think about whether you can quickly scan the material and find the information you’re looking for. Does the amount of content in each section feel manageable, or is it overwhelming?

Yes No

6. The material uses visual cues (e.g., arrows, boxes, bullets, bold, larger font, highlighting) to draw attention to key points.

The material signals where to find important information and emphasizes it with visual elements. Scan the material and ask yourself: Is it clear where you’ll find key takeaways before you even read the words? Also check that the material uses these visual cues selectively — they can become less effective if they’re overused.

Yes No

7. The material’s visual aids support the main message or represent the intended audience. (score only if material includes visual aids)

Visual aids like photos, illustrations, and graphics can make health education materials easier to understand, more engaging, and more relatable. Think about whether the material’s visual aids could help the intended audience understand the content better — or help them relate to the material. For example, in a material with a main message about taking steps to prevent lead poisoning in children, a photo of peeling paint in an older home could help readers understand what to look for. (Keep in mind that it’s best for all health education materials to have visual aids.)

Yes	No	N/A
<input type="text"/>		

8. Numbers appearing in the material are clear and easy to understand. (score only if material includes numbers)

Check that the material uses simple numbers — like whole numbers rather than fractions and decimals. Keep in mind that frequencies (e.g., 3 out of 10) are generally easier to understand than percentages (e.g., 30%). And make sure the material uses numerals (e.g., 3, 2nd) rather than spelled-out numbers (e.g., three, second).*

Context for numbers — in the form of words or additional numbers, like a range — can also indicate clear use of numbers. So can **visual metaphors** (e.g., “1 ounce of cheese is about the same size as 3 dice”).

Finally, check that the material always does the math for the readers. Make sure it doesn’t ask them to add, subtract, multiply, divide — or do any other kind of calculation.

Yes	No	N/A
<input type="text"/>		

Material gets a “yes” on out of relevant items

*Keep in mind that some style guides (e.g., APA style) recommend spelling out numbers under 10. Use your judgment on how to assess materials that include spelled-out numbers for this reason but would otherwise get a “yes” on all items in the assessment tool.

Annotated example

This material gets a “yes” on all items in the assessment tool. The callouts explain why the material gets a “yes” on the items.

The clear main message at the beginning makes it easy to understand the material’s purpose (#1)

Includes need-to-know information only — there’s no content that distracts from the purpose (#2)

Get Rid of Unused Opioids Safely

Help keep your family and pets safe by getting rid of unused or expired (out of date) opioid medicines as soon as possible. Opioid medicines are prescription drugs used to treat pain.

Uses common, everyday language, and key terms like “opioid medicines” are clearly defined in easy-to-understand language (#3)

Why is it so important to get rid of unused opioids safely?

Opioids are powerful medicines, and they can be very dangerous when people use them incorrectly. If a person misuses or accidentally takes an opioid meant for someone else, a single pill could cause death. In fact, opioids were involved in about 47,000 overdose deaths in 2018 — that’s nearly 7 out of every 10 drug overdose deaths.



The visual makes the material more engaging by supporting the main message (#7)

So it’s very important to take them exactly as prescribed and get rid of them right away when you no longer need them.

Uses active voice (#4)

Uses whole numbers and numerals — and numbers support a key message (#8)

How can I get rid of my unused opioids safely?

There are a few ways you can get rid of opioid medicines that you no longer need:

- The best way to get rid of medicines is to use a medicine take-back program. At medicine take-back sites, professionals will take your medicine and get rid of it safely. You can find a take-back site near you by calling 1-800-882-9539 or visiting <http://disposemy meds.org>.
- Depending on what type of opioid you need to get rid of, you may be able to flush it down the toilet. Ask your doctor or pharmacist about what’s safe to flush.

Information is “chunked” into short sections with headings (#5)

Visual cues like bullets and bolding help draw attention to key information (#6)

Where can I learn more about getting rid of medicines safely?

If you want to learn more about how to safely get rid of medicines in your community, call your doctor, pharmacist, or local police station.

Remember, it’s important to get rid of unused opioids safely as soon as you no longer need them.

About the Health Education Materials Assessment Tool

NLM's assessment tool is based on the understandability items from the Patient Education Materials Assessment Tool for Printable Materials (PEMAT-P), developed by the Agency for Healthcare Research and Quality (AHRQ).

In 2019, NLM engaged health literacy subject matter experts (SMEs) to discuss the development of the PEMAT-P and other understandability assessment tools. The ultimate goal was to create an abridged tool that NLM can use to designate health education materials as "easy-to-read." The SMEs helped NLM identify a subset of PEMAT-P understandability items that may be the most useful for measuring understandability. To assess and refine the subset items, NLM conducted a series of qualitative studies with consumers who have limited health literacy skills.

In 2020, NLM completed additional research aimed specifically at increasing understanding of numeracy best practices in health education materials. Based on the results of this research and existing best practices, NLM expanded the numeracy guidance in its assessment tool, adding more detailed tips and additional examples.

Then, in 2021, NLM completed research to learn about best practices related to using visual aids in health education materials. Based on the research results and existing best practices, NLM revised the visual aids item and guidance in its assessment tool. NLM also added considerations for assessing materials for cultural relevance.

This multiphase research yielded the items above — and together, they form a tool for reviewers to quickly assess the understandability of health education materials.

Learn more about the PEMAT-P and how it measures understandability in consumer-facing health education materials:

- [PEMAT and User's Guide](#)
- [PEMAT for Printable Materials \(PEMAT-P\)](#)