HEALTH LITERACY
MONTH WEBINAR

MULTI-REGIONAL
CLINICAL TRIALS
THE MRCT CENTER OF
BRIGHAM AND WOMEN'S HOSPITAL
and HARVARD

Applied Health Literacy:

Using Teach-back in Conversations About Clinical Research

October 30th, 2025 | 12 PM ET

Welcome!

HEALTH LITERACY MONTH 2025

MULTI-REGIONAL CLINICAL TRIALS

THE MRCT CENTER OF BRIGHAM AND WOMEN'S HOSPITAL and HARVARD

Applied Health Literacy:

Using Teach-back in Conversations about Clinical Research

MODERATED BY:

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Program Director, The MRCT Center

10/30/2025

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Objectives

By the end of the session, attendees should be able to:

- ❑ Explain what teach-back is, its importance, and why to use it;
- ❑ Describe approaches that support incorporating teach-back into clinical research conversations across the clinical trial life cycle;
- ❑ Identify and access resources that explain how to use teach-back.

Session Overview

- Welcome
- Introduction to Health Literacy
- The What, Why, and How of Teach-back
- Teach-back in Clinical Research
- Additional Teach-back Resources
- Panel Discussion and Audience Q&A

Meet the Panelists

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About Us

MRCT Center is an applied policy center focused on addressing the conduct, oversight, ethics and regulatory environment for clinical trials around the world.

Our Vision

Improve the integrity, safety, and rigor of clinical trials around the world.

Our Community

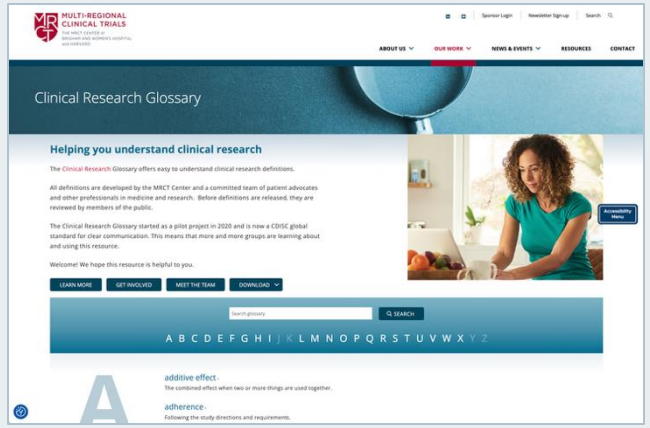
We engage diverse stakeholders to define emerging issues in global clinical trials and to create and implement ethical, actionable, and practical solutions.

Long-standing Commitment to Health Literacy

https://mrctcenter.org/resource/return-of-aggregate-results-to-participants-guidance-document-version-3-1/

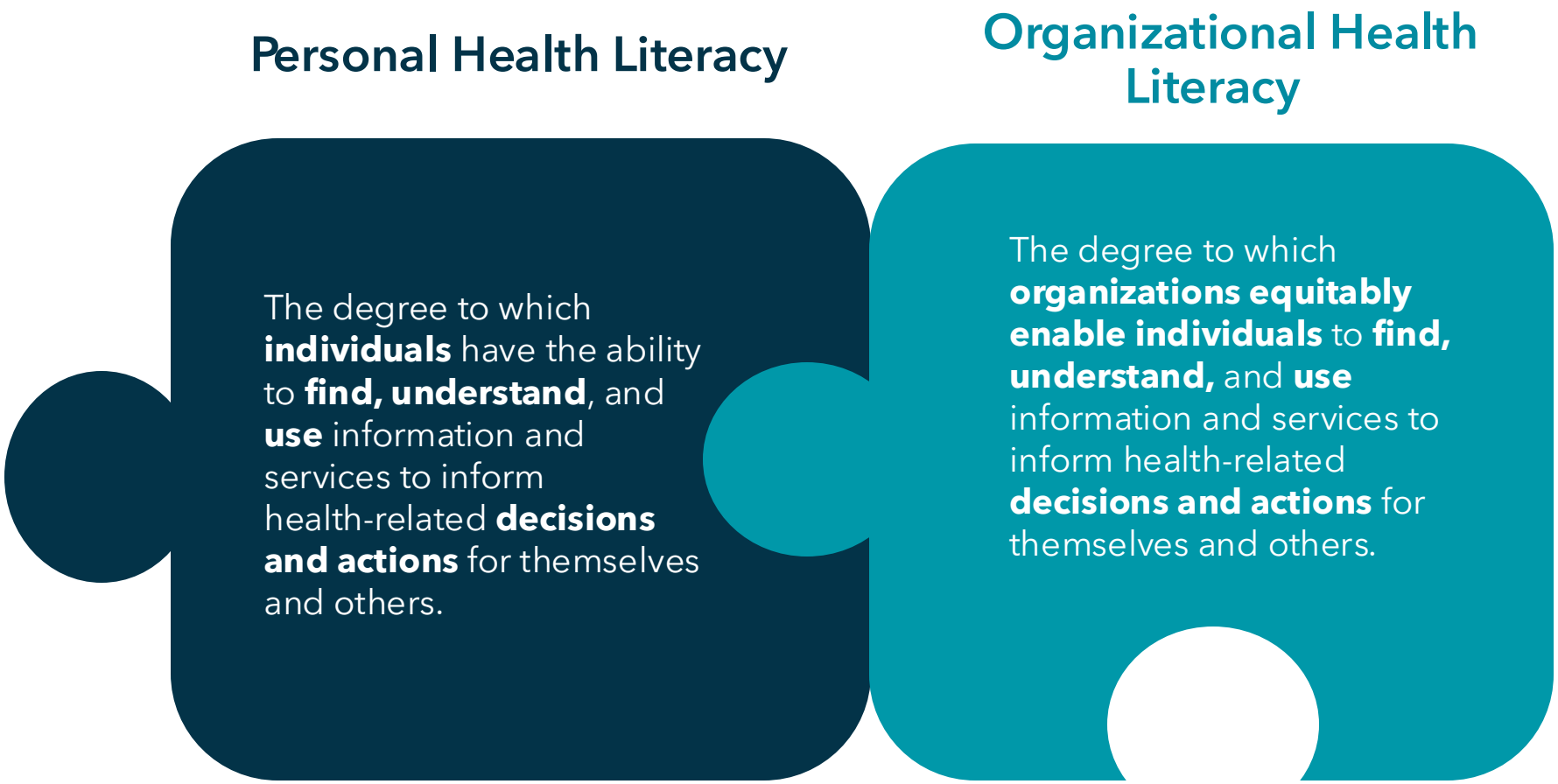
https://mrctcenter.org/resource/return-of-aggregate-results-to-participants-toolkit-version-3-1/

https://mrctcenter.org/health-literacy/



www.mrctcenter.org/glossary

Definition of Health Literacy from *Healthy People 2030*

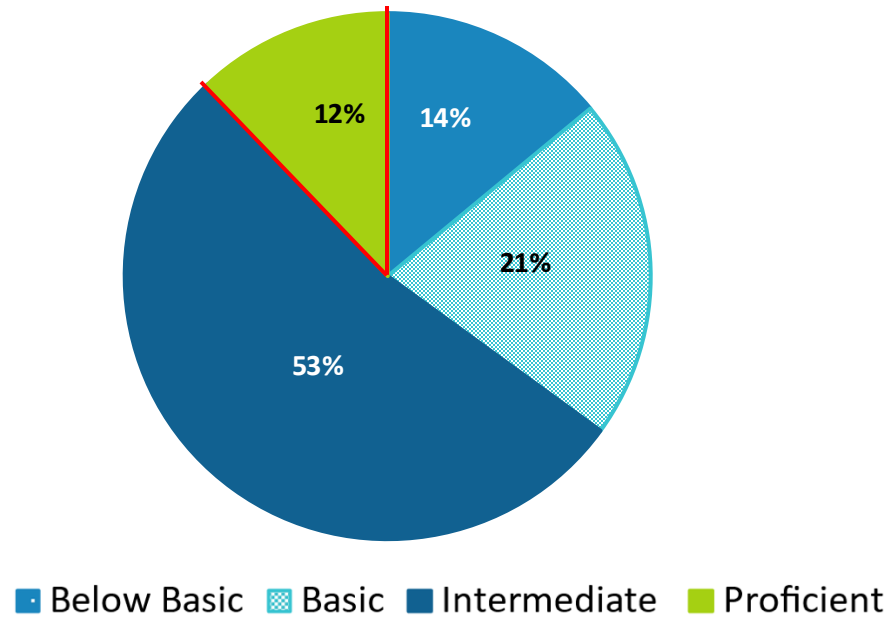


https://health.gov/our-work/national-health-initiatives/healthy-people/healthy-people-2030/health-literacy-healthy-people-2030

The Reality of Low Health Literacy in the US

National Assessment of Adult Literacy (2003)

Our health systems communicate in ways that are difficult for ~9/10 people to understand.



https://nces.ed.gov/naal/health.asp

A Broad View of Health Literacy

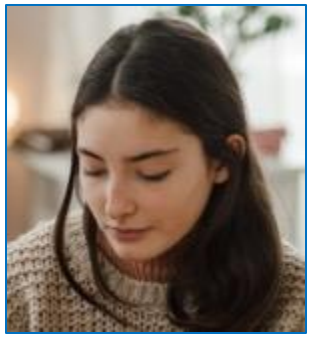
Teach-back

… and a shared responsibility.

The What, Why, and How of Teach-back

Communication Matters…

After the feeding tube clogged at home, an infant was readmitted with dehydration. The parents did not recall information about flushing the tube after use.



A teen with diabetes was admitted with high blood sugar. They had learned to inject insulin into an orange but did not understand to inject it into their body.

A patient was readmitted with post-operative complications associated with language differences: not understanding post-operative care instructions and telephone miscommunication.

The Right to Understand

> **"Achieving health and well-being requires eliminating health disparities, achieving health equity, and attaining health literacy."**
>
> Healthy People 2030

- "**The manner and context in which information is conveyed is as important as the information itself**. For example, the information must be presented in a way that is understandable to the subject."

  — *The Belmont Report: Ethical Principles and Guidelines for the Protection of Human Subjects of Research*

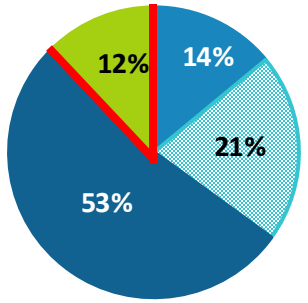
- "…each potential participant must be adequately informed in **plain language** of the aims, methods, anticipated benefits and potential risks and burdens, qualifications of the researcher, sources of funding, any potential conflicts of interest, provisions to protect privacy and confidentiality, incentives for participants, provisions for treating and/or compensating participants who are harmed as a consequence of participation, and any other relevant aspects of the research."

  — *Declaration of Helsinki, World Medical Association*

Health Literacy Universal Precautions Communication Principles

- Clear communication helps everyone.
- Anyone can have trouble understanding health information, especially if they are sick or worried.

So, use clear communication words & tools for everyone.



Adapted from: AMA, 2007; DeWalt, 2010

The US health system communicates in a way that **~90% of US adults do not understand.**
(NAAL)

Source: America's Health Literacy: Why We Need Accessible Health Information. An Issue Brief From the U.S. Department of Health and Human Services. 2008. Available at: https://www.ahrq.gov/sites/default/files/wysiwyg/health-literacy/dhhs-2008-issue-brief.pdf

Plain Language

- Is clear.
- Uses only as many words as needed.
- Is not baby talk.
- Lets people focus on the message instead of complex words.
- Does not replace complex technical language among the health/study team.

Technical Term	Plain Language
Ensure	Make sure
Exhibit	Shows
Initial	First

Courtesy of J. Turner

http://justplainclear.com/en

Adapted from: http://www.plainlanguage.gov/whatisPL/definitions/eagleson.cfm

Teach-back is…

- Asking people to explain **in their own words** what they need to know or do, in a friendly way
- **NOT** a test of the person, but a measure of how well **you** explained something
- A way to check for understanding and, **if needed, re-explain, then check again**

I want to be sure I explained everything well. Can you tell me in your own words what you will do, so I can be sure I was clear?

AHRQ, *Making Health Care Safer*, 2001; Schillinger, 2003

Teach-back Examples

What Will You Tell Someone Else:

- What will you tell your partner about the purpose of this research project?

Acknowledge the Amount or Complexity of the Information:

- A lot of people find these directions for preparing for your visit confusing. To make sure I was clear, can you go over what you're going to do to get ready?

Teach-back – Everyone's Job

- Let's make sure the paperwork gets handled right. Can you tell me what you will do with these forms?
- I want to be sure I did a good job showing you how to find the lab. Can you tell me how you will do that when you come back?
- Please tell me when your appointment for your next study visit is.

Teach-back – Chunk and Check
And Telling the Person Beforehand

- We're going to go over a lot of information. To make sure I'm clear, I will ask you to go over key points in your own words for each thing we talk about.

  - Q1: What is the purpose of this research project?
  - Q2: What will you need to do?
  - Q3: How many times will you need to come back?
  - Q4: How might being in this research project help you or others?
  - Q5: Can you tell me what the harms of being in this study could be?

Check for understanding with teach-back and open-ended, not yes/no, questions for EACH topic.

Strategies to Support Teach-back…

Use glasses, hearing aids, other assistive devices.

Ask if they want to include family member or friend.

Check for language, literacy, cultural barriers.

Teach-back—Evidence

- **Schillinger, et al., 2003, *Arch Int Med***
  - Physician use of teach-back associated with **better glycemic control** for adult outpatients with diabetes.

- **Press, et al., 2016, *Ann Am Thorac Soc***
  - Hospitalized adults w/ asthma or COPD: Teach-back (teach-to-goal) associated w/ **fewer acute care events w/in 30 days of discharge**, esp. among those w/ low health literacy; & lower MDI misuse immediately after education; effect waned, suggesting need for reinforcement.

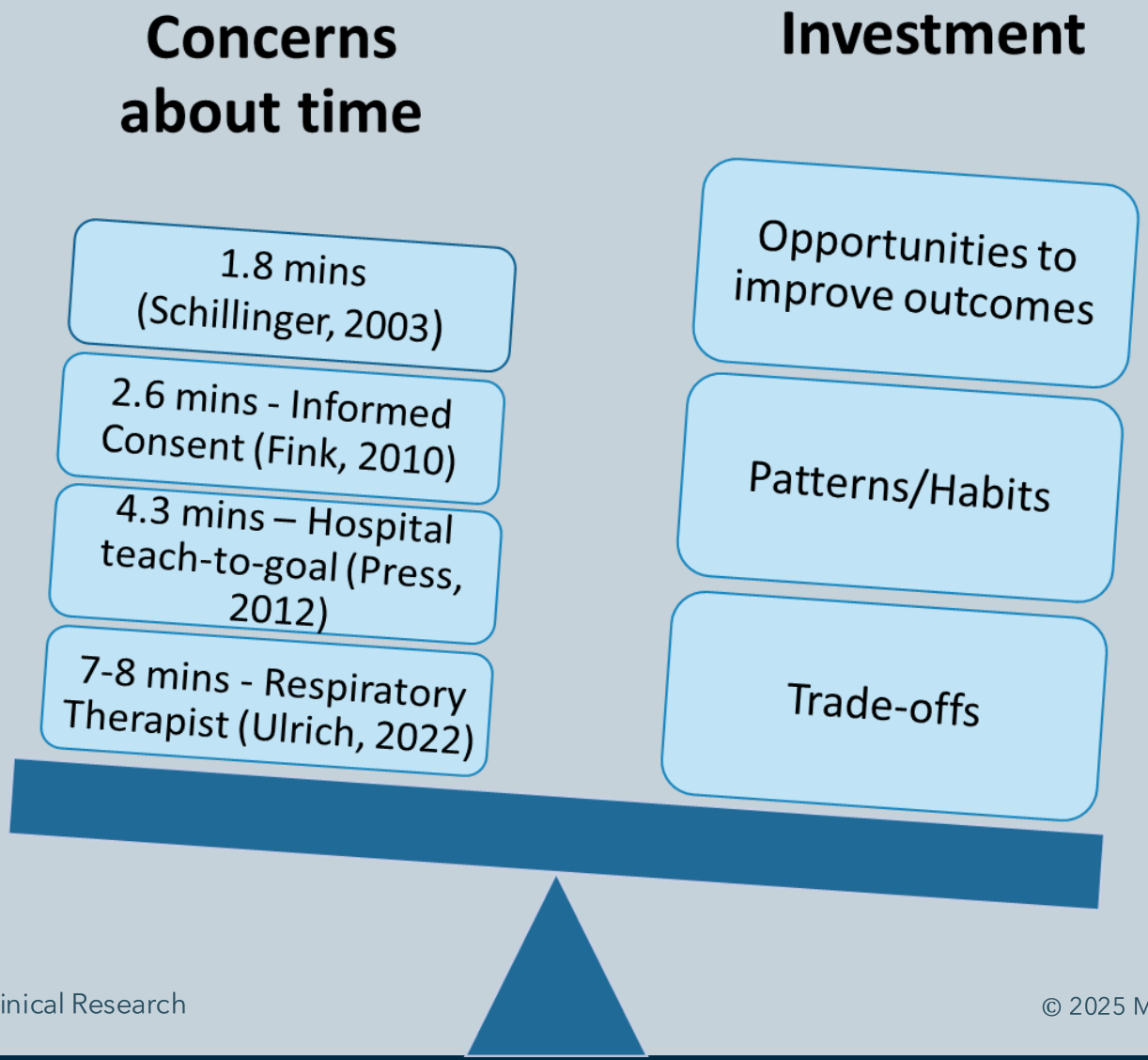
- **Ulrich, et al., 2022, *Journal of Asthma***
  - Pediatric QI project: **increased % visits w/ respiratory therapists using** standard asthma teaching protocol w/ **teach-back in outpatient pulmonary asthma clinics from 43% to 82%; & 10% decline in ED visits/1000.**

Teach-back—Evidence

- **Fink, et al., 2010, *Annals of Surgery***
  - Addition of repeat-back to standardized computer-based consent program significantly **improved patient comprehension**.

- **Carroll, et al., 2024, *JAMA Network Open***
  - Pediatric hospital health literacy discharge medication communication bundle w/ teach-back **reduced home liquid medication administration errors and enhanced caregiver medication knowledge**.

Teach-back: an Investment, NOT an Add-on



Teach-back in Clinical Research

Teach-back & Plain Language Matter in Clinical Research

Invitation to Shift Our Approach

Enhances Informed Consent:

Ensures understanding is voluntary, informed, and ongoing

Reduces Misconceptions:

Clarifies the difference between research and treatment, and addresses the "white coat" effect.

Builds Trust and Rapport:

Creates a partnership, encourages questions, and supports participant navigation

"We assume we're being clear—but clarity is measured by understanding, not intention."

Teach-Back & Plain Language Matter in Clinical Research

Invitation to Shift Our Approach

Improves communication:
Bridges the gap between what we say and what participants actually hear.

Empowers CRCs Through Understanding:
"We can only explain what we truly understand."

Boosts Recruitment:
CRC buy-in the "why" behind the study.

Teach-back & Plain Language Matter in Clinical Research

Invitation to Shift Our Approach

Improves Data Quality:

Reduces errors in questionnaires, protocols, and timelines.

Prevents deviations caused by unclear MOPs/SOPs.

Facilitates Participant Follow-Through:

Helps us to ask the right questions to identify potential barriers.

Advances Equity and Inclusion:

Understandable language allows for all people to be represented.

In Summary - Teach-back in Clinical Research Training

Using teach-back in onboarding and training allows for the technique to be used and practiced amongst the study team members before engaging with potential and enrolled participants.

- Sponsors and investigators can use teach-back
- Research managers and coordinators can use teach-back
- Can also be used to practice peer-to-peer

In Summary – Teach-back across the Participant's Journey

Life Cycle Step	Examples of Teach-back Opportunities
 **Recruitment**	• Study information sessions • Recruitment conversations
 **Consent**	• Informed consent conversations • Review of study schedules/calendars
 **On Study**	• Review of procedures and study schedules/calendars • Study medication/intervention instructions • Adverse event reporting information
 **End of Study**	• Instructions for coming off the study • Information on maintaining access to treatment options • Study results conversations

Teach-back Resources

Forming New Habits

Job aids designed with words to use that are applicable to your work role help facilitate practice.

- Desk reference or pocket job aid with key steps and phrases.
- Reminder posters in hallways or lunch spaces.

TB Pocket Guide and Reminder Poster Examples

PRACTICE TEACHBACK

Triage — Focus on one topic at a time.

Tools — Use a picture, model, or written information to support your teaching and what your patient needs to know.

Take Responsibility — "I want to make sure I did a good job explaining..."

Tell Me — Ask the patient, "so can you tell me in your own words, what you will do or what we talked about?"

Try Again — Try again if needed using different words and a new approach.

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EQUITY IN OC

EQUITY IN OC

Always Use Teach-Back

Example

We covered a lot today, and I want to make sure I explained clearly. Can you describe what you will do to help manage your diabetes?

Clarify

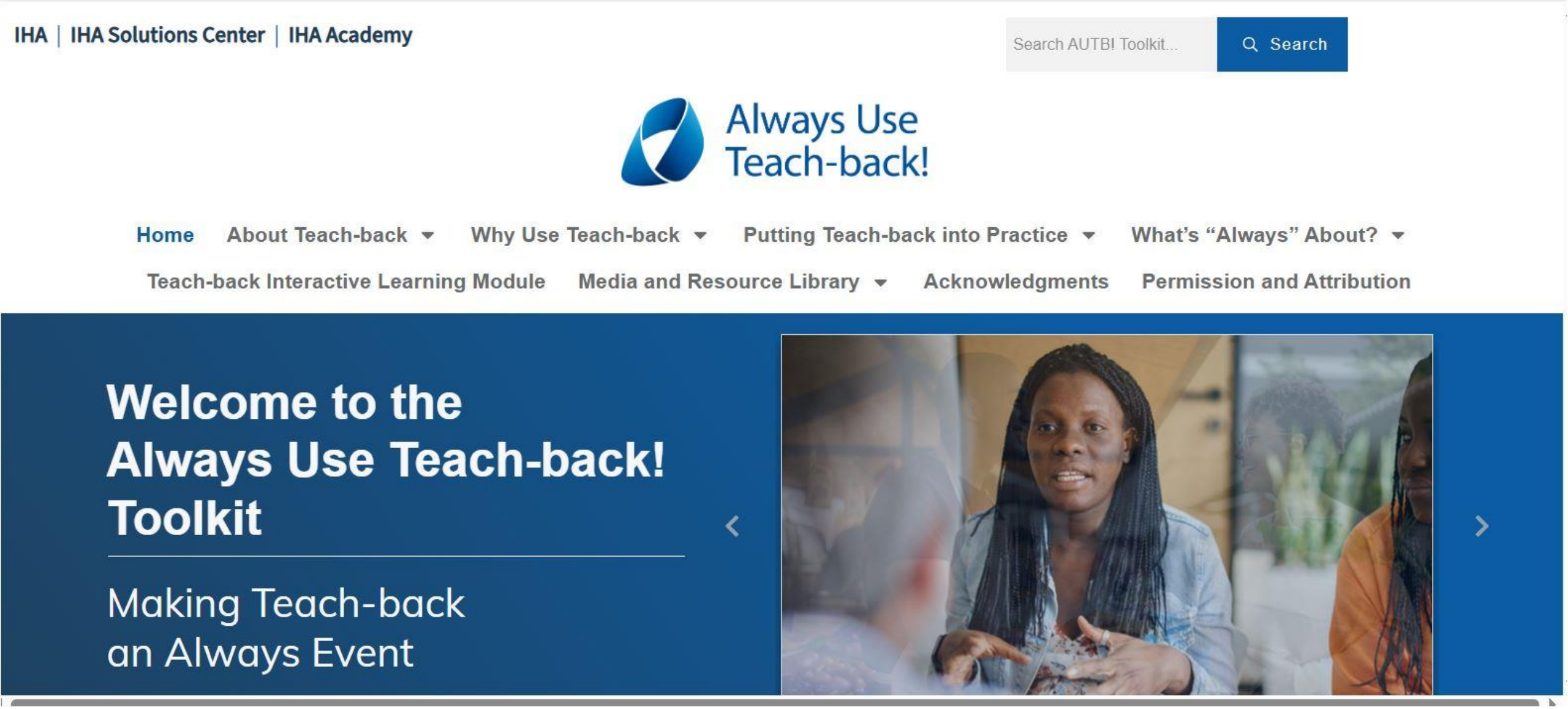
If the patient doesn't fully understand what you said, explain it again differently.

Check

After explaining, ask the patient to describe back to you using their own words.

Opportunities to use teach-back

- Appointment scheduling details
- Health education
- Health action plans
- Care planning/goal setting
- Referral information
- Eligibility information
- New self-care techniques
- Steps to file an appeal



https://Teachbacktraining.org

10 Elements for Using Teach-back Effectively

Always Use Teach-back!

Set-up

- **Identify** key "need-to-know" concepts and "need-to-do" tasks for tea
- **Include** family members/caregivers or other support persons when p appropriate.

Teach-back

- **Be respectful** and address cultural and communication needs.
- **Use** plain language.
- **Use** words that show you are taking responsibility for being clear.
- **Ask the person,** in a caring way, to explain back (or show back), using own words. Do this after each "need-to-know" concept or "need-to-d (Chunk and Check).
- **If the person is not able** to teach back accurately, explain in a differe re-check.
- **Use** non-shaming open-ended questions.

Support

- **Use** reader-friendly plain language materials to support learning, sha finding information.
- **Document use** of and the person's response to teach-back.

For more about each of the 10 Elements, see
10 Elements for Using Teach-back Effectively – Detail.

Documentation and Interprofessional Collaboration

Always Use Teach-back!

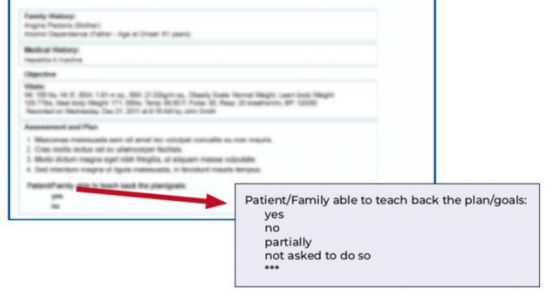
Everyone in the care continuum can further support patients, families, and clients in subsequent care delivery, plans, or settings if they know someone struggles to teach back. Examples may include a nurse on the next shift, home care agency, physical therapist, specialist referral, or social service provider.

Documentation

To support safety, if a person struggles to teach back, notes should be made so the next source of care can provide more teaching, support, or alternative plans.

Use electronic health or other records to create efficient teach-back documentation templates. These can be simple but should be more than just clicking a yes/no teach-back button. Include, for example, the teach-back topic(s), and whether the patient was able to teach back (yes/no/partially or teach-back was not requested). In addition to patient-related documentation, these elements provide data for feedback, quality and process improvement, and evaluation.

Example: Teach-back Documentation in Electronic Health Record



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Documentation and Interprofessional Collaboration

Always Use Teach-back!

Interprofessional Collaboration

The health system is complex, and most people have one or more specialists. Hospitals, rehabilitation centers, home care, public health, community social services, and long-term care facilities are integral components of the health care system and are made up of multiple professionals and other members of the health team. Regardless of setting, each team member can further support patients, families, and clients if they know someone struggles to teach back.

The interprofessional collaboration focus of teach-back documentation refers to recording teach-back using a shared interprofessional place or process, rather than a separate profession-specific note. This can help ensure:

- Team members reinforce teaching done by colleagues or community partners.
- Referrals are made to other team member roles for teaching as needed.
- Teach-back is aligned with patient/client and care plan goals, rather than siloed by provider.
- Tailored information is provided based on patient/client needs.
- Handovers and transitions for longer term care needs are safer.

The interprofessional perspective is helpful because it specifically focuses on the benefits of coordination and planning across roles. Documenting in one shared place supports efficiency and clarity, especially where teams work closely together, for example, in a rehabilitation setting.

See Teach-back With Transitions for more information and stories about cross-continuum collaboration, and Always Events for an example of interprofessional collaboration in care transitions.

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Important Reminders

All researchers have a responsibility to make sure potential research participants understand all the important elements of a clinical research trial!

- Teach-back helps assess participant comprehension and identifies gaps in understanding that require additional explanation.
- All research staff must consider the cultural context of potential study participants and be prepared to address individual needs.
- All potential study participants with non-English language preferences have a right to a qualified interpreter.

Additional Resources

Ch. 5: **Prepare the Workforce**

Handling Objections (pgs. 145-147)

Ch. 8: **Use Clear Interpersonal Communication and Confirm Understanding**

Ways to ask for teach-back (pgs. 243-244)

https://www.Teachbacktraining.org/OrganizationalHealthLiteracyGuidebook2/

Discussion and Q&A

Thank you!
Happy Health Literacy Month!