

# Ensuring fit to cultural context to improve health equity: Cultural Adaptation Frameworks

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## Cultural Adaptations

- The aim is to protect the scientific integrity of evidence-based treatments (EBTs) and promote dissemination by promoting the external and ecological validity of studies. The ultimate aim is to reduce health disparities by making EBTs broadly available to diverse cultural groups.
- Cultural adaptations integrates multicultural and EBTs to consider culture and context systematically (historical, economic, ecological, and political influence)

For a comprehensive list of cultural adaptation frameworks: Domenech Rodríguez, M. M., & Bernal, G. (2012). *Frameworks, models, and guidelines for cultural adaptation*. In G. Bernal & M. M. Domenech Rodríguez (Eds.), *Cultural adaptations: Tools for evidence-based practice with diverse populations* (p. 23–44). American Psychological Association. <https://doi.org/10.1037/13752-002>

### 1. Cultural Sensitivity Framework (Resnicow et al. 1999)

- a. A combination of quantitative and qualitative approaches as well as the use of existing databases and conducting new research to inform your adaptations of targeted health promotion, materials, and programs.
- b. Determine if the design, delivery, and evaluation should involve:
  - i. Surface structure adaptations - adapting the materials to look like and sound like your target group. This could involve changing the visuals of the materials, intervention content, and some of your main messages as well as considered where you might deliver the intervention
  - ii. Deep level structure - adapting on the predictors that could have influence on the change processes, so this may be socio-historical predictors, environmental, and psychological

### 2. Cultural Adaptation Process Model (Domenech Rodríguez et al. 2004)

- a. Phase 1: Setting the Stage
  - i. Collaborate on intervention fit between developer and cultural adaptation specialist (CAS)
  - ii. CAS determines if there is a fit within the literature and key community leaders and a needs assessment is conducted (e.g., focus groups or interviews with community leaders)
- b. Phase 2: Initial Adaptation
  - i. Tailor the intervention a priori and evaluate the measures for theoretical and cultural appropriateness
  - ii. Conduct and observe cultural adaptations in the field and revise iteratively
- c. Phase 3: Adaptation Iterations
  - i. Capture any adaptations in new version of the treatment
  - ii. Finalize measures for cultural appropriateness and field test
  - iii. Attend to (acceptability, compatibility, appropriateness, feasibility):
    1. Language
    2. Who is delivering it?
    3. Common metaphors, languages, or symbols
    4. Content reflects common values or issues
    5. Concepts that are relevant to cultural and context
    6. Context issues like migration and acculturation stress

### 3. Cultural Adaptation Framework (Barrera et al. 2013)

1. Information gathering
  - i. Determine whether an adaptation is necessary and if so, what intervention components should be modified.
  - ii. Conduct a literature search and/or conducting focus groups and interviews with target group and/or engage stakeholders.
2. Preliminary adaptation design
  - i. Integrate information from stage one to inform preliminary modifications of the original interventions. Core components are not altered unless there is considerable evidence from stage one to suggest alterations.
  - ii. Conduct qualitative research to gather opinions/beliefs on intervention materials and activities
3. Preliminary adaptation tests
  - i. Pilot test the adapted intervention to assess the efficacy of the preliminary version of the adapted EBI.
  - ii. Continue to refine based on process features, such as who delivered the intervention, where was it delivered, what was the ethnocultural group's experience during delivery – as well as the outcomes, how was a health outcome achieved, how effective was the intervention
4. Adaptation refinement
  - i. Use information and feedback from third stage to further revise the intervention
5. Cultural adaptation trial
  - i. Conduct a randomized controlled trial of the revised intervention to determine whether the adaptation had the predicted outcomes
  - ii. Conduct indepth interviews of participants and those who delivered the intervention to inform further modifications

#### Cross cutting themes

- Conduct a needs assessment with target ethnocultural group, literature review, and seek feedback
- Process is iterative on designing and testing culturally adapted intervention using multiple methods
- Pilot test and seek feedback to refine and improve for subsequent larger trial with the target ethnocultural group
- Culturally adapted interventions to improve fit and compability can be easily disseminated to improve accessibility and engagement with undergroups, with the ultimate goal of achieving health equity

#### Key References:

- Barrera Jr, M., Castro, F. G., Strycker, L. A., & Toobert, D. J. (2013). Cultural adaptations of behavioral health interventions: A progress report. *Journal of consulting and clinical psychology, 81*(2), 196.
- Barrera, M., Jr., Berkel, C., & Castro, F. G. (2017). Directions for the Advancement of Culturally Adapted Preventive Interventions: Local Adaptations, Engagement, and Sustainability. *Prev Sci, 18*(6), 640-648. doi:10.1007/s11121-016-0705-9
- Baumann, A. A., Domenech Rodríguez, M. M., & Parra-Cardona, J. R. Community-based applied research with Latino immigrant families: Informing practice and research according to ethical and social justice principles. *Family process. 2011 Jun*;50(2):132-48.
- Bernal, G., & Domenech Rodríguez, M. M. (Eds.). (2012). *Cultural adaptations: Tools for evidence-based practice with diverse populations*. American Psychological Association. <https://doi.org/10.1037/13752-000>
- Cabassa, L. J., & Baumann, A. A. (2013). A two-way street: bridging implementation science and cultural adaptations of mental health treatments. *Implement Sci, 8*(1), 90. doi:10.1186/1748-5908-8-90
- Domenech Rodríguez, M., Baumann, A., & Swartz, A. (2008). Cultural adaptation of an empirically supported intervention: From theory to practice in a Latino/a community context. *Psychology Faculty Publications*.
- Domenech-Rodríguez M, Wieling E. Developing culturally appropriate, evidence-based treatments for interventions with ethnic minority populations. *Voices of color: First person accounts of ethnic minority therapists. 2004*:313-33.
- Resnicow, K., Baranowski, T., Ahluwalia, J. S., & Braithwaite, R. L. Cultural sensitivity in public health: defined and demystified. *Ethn Dis. 1999*;9(1):10-21.



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# Cultural Adaptations of Evidence-Based Interventions to Fit to Context

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Plenary Address by Noy Phimphasone-Brady, PhD

## Learning Objectives:

1. Explain the importance of and need to culturally adapting evidence-based interventions to fit to context, paying attention to target populations' language, culture, and context.
2. Describe and integrate appropriate cultural adaptations frameworks for studying the processes and impact of adaptations on intervention adoption, implementation, and effectiveness.

[Notes]



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