

**Listen, Reflect, Act: Adaptation in a Culturally Responsive Study**  
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**Abstract:** Recently, a spotlight has been cast on research teams to be more culturally responsive and adaptive. However, few authors provide tangible ways to bring practices of cultural adaptation into the implementation of research and evaluation. Based on a systematic review of policies and procedures from a multi-site study with a less than 15% attrition rate over two years, we propose a promising model for embedding cultural adaptation in research studies. Researchers must recruit staff who are culturally responsive; convene for in-person trainings; establish a stratified supervision structure; shine light on cultural biases within study policies and procedures; and adapt the study based on feedback from culturally responsive staff. This paper offers practical strategies for studies to anticipate ways in which implementation can be designed to be more culturally responsive, as well as ways to support ongoing adaptation based on the needs of specific communities.

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**Relevance Statement:** In 2017, we began a multi-year, multi-site developmental evaluation using remote field interviewers to investigate how pediatric primary care innovations can support underrepresented families and reduce toxic stress in their lives. Based on this, we propose a promising model for embedding cultural adaptation into the implementation of multi-site evaluations. We also offer considerations about how these strategies can illuminate new definitions of research goals such as rigor and the replicability of result, and shining the light on the experiences of underserved populations

To develop our model, we systematically reviewed study policies and procedures for field interviewers and thematically coded transcripts from two focus groups conducted with our field interviewers using a cultural sensitivity for outcome research lens, which focuses on cultural adaptation. In addition, we reflected on three years of communication and coordination with field interviewers and the study team.

Throughout our study, we implemented cultural adaptations to our research methods and practices to reflect the communities participating in the evaluation. We recruited over 900 families, and completed over two years of data collection with a less than 15% attrition rate. Reports from field interviewers suggest this is due to the strong relationships they formed with families in part because of their shared language and cultural connections. By taking extra steps to be responsive to what our staff needed to be successful, our data would not be representative of our clinic populations.

We concluded that promising strategies for implementing culturally responsive multi-site evaluations include:

1. Recruiting staff who are culturally responsive to the target population;

2. Bringing all study staff together for in-person trainings to build knowledge and trust among the team;
3. Establishing a stratified supervision structure which allows for effective ongoing training and feedback;
4. Shining a light on how cultural biases influence study policies and procedures; and
5. Adapting study policies and procedures based on feedback from staff who interact with the target population.

In conclusion, having culturally responsive staff and creating opportunities for the study team to respond to suggested changes allowed for more representative recruitment and retention of study participants. We argue that culturally adaptive research and study design strengthens the quality of research studies, particularly with hard-to-reach populations. However, putting a spotlight on being culturally responsive requires extra work, reflection, and time; which require resources and attention. This model offers practical strategies for research studies to anticipate ways in which implementation can be designed to be more culturally responsive, as well as ways to support ongoing adaptation based on the needs of specific communities and subpopulations.

For more on cultural sensitivity for outcome research, see:

Bernal, G., Bonilla, J., & Bellido, C. (1995). Ecological validity and cultural sensitivity for outcome research: Issues for the cultural adaptation and development of psychosocial treatment with Hispanics. *Journal of Abnormal Child Psychology*, 23, 67–82.

Bernal, G., & Sa´ez-Santiago, E. (2005). Toward culturally-centered and evidence-based treatments for depressed adolescents. In W. Pinsoff & J. Lebow (Eds.), *Family psychology: The art of the science*. New York: Oxford University Press.