

Hogg Foundation for Mental Health
2nd Expert Panel on Cultural Adaptations of Evidence-Based Practices
November 29-30, 2005

Questions for Discussion

Common Ground: Defining Culturally Appropriate Adaptations and Evidence-Based Practices

- Overview of the first Expert Panel's discussion
- Working definitions of
 - Evidence-based practices
 - Cultural competence
 - Culturally appropriate adaptation
- Culturally valid treatment versus culture-specific treatment
- Goals for the two-day discussion
 - Development of guidelines that mental health organizations can use to adapt EBPs for their communities' populations
 - Development of ideas for shaping the Foundation's RFP on culturally appropriate adaptations

What Do We Know About the Cultural Appropriateness of EBPs?

- What is the state of the literature on the cultural appropriateness of various EBPs?
- What aspects of a treatment are good indicators of its cultural appropriateness? For which groups?
 - Theory of change
 - Explanatory model
 - Required qualifications of the therapist
 - Therapist's stance (e.g., directive vs. open)
 - Therapeutic activities (e.g., relaxation techniques, imaginal exposure)
 - Homework and prescribed activities
 - Family involvement
 - Format (e.g., individual, group)
 - Length of treatment
 - Frequency/length of sessions

What Is the Best Approach to Culturally Appropriate Treatment?

- Focus on training therapists to be culturally competent therapists?
- Focus on modifying EBPs to be culturally appropriate?

When Modifying EBPs, At What Point Can They No Longer Be Considered Evidence Based?

- Where is the line in modifying EBPs without sacrificing fidelity to the tested treatment?
- Are there general guidelines or principles for modifying EBPs while maintaining fidelity to the tested treatment?

Are Some EBPs More Compatible with Cultural Appropriateness than Others?

- Are the key ingredients or principles of some treatments more culturally appropriate than others?
- Are some EBPs better candidates for adaptations because they have elements that can be modified or deleted to be more culturally appropriate without sacrificing fidelity?
- Are some EBPs more amenable to adding complementary healing approaches?

Potential Approaches to Developing the Foundation's RFP to Advance Culturally Appropriate Adaptations

- Possible approaches to the RFP:
 - Open procurement
 - Procurement by ethnic group (e.g., grants for services by the 4 major racial/ethnic groups)
 - Procurement by treatment (e.g., grants for each of the major EBPs, such as CBT and IPT)
- Additional ideas for designing the RFP?
- Which approach has the potential to move the field furthest given practical considerations and constraints (e.g., financial and time constraints)?
- What are the achievable goals?