Adaptation Process in School-Based Substance Use Prevention

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Drug Resistance Strategies Project

- Over 20 years of NIDA-funded research on the social processes of drug offers
- Efficacious, culturally grounded, multicultural middle school prevention intervention
  - *keepin’ it REAL*
- Adopted by D.A.R.E. America
- Current funding Provided by National Institute on Drug Abuse Grant R01DA021670 to study adaptation processes
Adaptation Processes

- Adaptation: deliberately or accidentally modifying a prevention program by adding or deleting program components, modifying the components, or changing the manner/intensity of delivering program components.

- Traditionally the goal of developers is to disseminate and replicate evidence-based programs with a high degree of fidelity.
Preliminary Research

• Ringwalt et al
  – Schools rarely adopt evidence-based curricula and when they modify those they adopt.

• Bumbarger
  – Study 1: 60% self reported having made adaptations to their programs
    - 88% of these adaptations were "program drift" or negative adaptations in conflict with the program's underlying theory.
  – Study 2: implementers were observed to administer 65% (range 47-85%) of the program (self reported 94%; range of 90-100%)
    - eliminate key points
Communication Accommodation Theory

• When difference is experienced in communication, accommodation or adjustment occurs based on the identities of the people involved

• Issue is type and degree of adaptation, not if or when adaptation occurs

• Drug Resistance Strategies Project Research asks, what is the appropriate degree of accommodation or adaptation?
  – Over-accommodating
  - Ethnic inclusion rather than targeting or exclusion (multiculturalism)

Gallois, Ogay, & Giles, 2005; Hecht et al. 2003
Aligning Prevention Theory and Research with Practice or 
A Practice-based Science of Prevention

• Designers *should* “reinvent”
• Implementers *will* “adapt”
  - Not only “error” or lack of fidelity
• Participants *will* interpret
• Adaptation.2 – what happens when prevention messages are implemented
  – particularly when transported from one context to another
Implementer Adaptation: E.g., Teacher Adaptation

Designer Adaptation: E.g., Cultural grounding

Participant Adaptation: E.g., Social Network Subgroups
Principle of Cultural Grounding for Health Message Design

- Start with culture and address its complexity
  - Culture defined as code, conversation, and community

- Strongest influence when people see their group memberships reflected and acknowledged
  - Inclusion
  - Identity

- Active participation of cultural group members in message construction

Hecht & Kreiger (2006); Hecht & Miller-Day (in press).
Guidelines for Cultural Grounding

1. Begin with “insider” perspectives
   • Start with culture vs add culture (community-based participatory research)
   • Cannot target or tailor to a single identity (glossing)

2. Focus on “stories” of target groups – narratives

3. Include input from cultural experts as well as community members

4. Include cognitive, affective-motivational, and environmental factors; surface and deep structure

5. Develop and modify the curriculum with target groups
Why Narratives?

- Overcome resistance toward the advocated health behavior
- Engage less involved audiences
- Reach low knowledge audiences
- Render complex information comprehensible
- Culturally grounds messages

A Narrative Model OF Health Promotion

Narrative Messages
Character Setting Action Problem Solution

Narrative Engagement
Interest Realism Identification Transportation

Norms Attitudes
Health Behavior
Implementer Adaptation:
E.g., Teacher Adaptation

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Adaptation Phases:
1. Narrative Interviews
2. Focus Groups
3. Teen Advisory Group
4. Video Development
5. Curriculum Adaptation
6. Feedback and Revision
Other Adaptations: D.A.R.E. America

• Constituencies
  – Target audience (students)
  – National Office
  – D.A.R.E. Educators
  – D.A.R.E. Officers
  – Sheriffs/Chiefs
  – Teachers
  – Schools
  – Prevention Community
Other Adaptations: Families

- Target existing patterns of parent-child communication
refuse · explain · avoid · leave

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