



## Finding Harmony Between the Evidence-Based Treatment and Cultural Adaptation Movements

A Review of

Cultural Adaptations: Tools for Evidence-Based Practice With Diverse Populations  
by Guillermo Bernal and Melanie M. Domenech Rodríguez (Eds.)

Washington, DC: American Psychological Association, 2012. 307 pp. ISBN  
978-1-4338-1151-7. \$69.95

doi: 10.1037/a0029961

Reviewed by

Esther J. Calzada

Since the concept of cultural adaptations of evidence-based treatments was introduced in the 1990s, it has been dismissed by some as unnecessary, unfeasible, and inconsistent with the tenets of methodologically rigorous interventions. Guillermo Bernal and Melanie Domenech Rodríguez address many of these critiques, providing a compelling rationale for cultural adaptation in their edited volume *Cultural Adaptations: Tools for Evidence-Based Practice With Diverse Populations*. Collectively, the work showcased in this volume represents some of the most innovative and exciting studies that can be found at the intersection of intervention research and multicultural psychology.

Building on the work of notable scholars such as S. Sue (1998), D.W. Sue (Sue et al., 1998), Boyd-Franklin (1989), and Comas-Díaz (Comas-Díaz & Griffith, 1988), several recent books have explored culture in relation to mental health practices (e.g., Constantine & Sue, 2005). These writings emphasize cultural competence, broadly defined, along with therapeutic approaches that show promise with ethnocultural groups (ECGs), as the primary means of improving clinical practice with an increasingly diverse population. But over the past two decades, as evidence-based treatments have become the gold standard sought out by policy makers, funders, and consumers, struggles related to serving a diverse client base have resurfaced.

Currently, questions surrounding whether, how, in what ways, and for whom to adapt these treatments abound, making the publication of *Cultural Adaptations* well timed. With this first book devoted to the topic of cultural adaptations of evidence-based interventions with ECGs, Bernal, Domenech Rodríguez, and their collaborators lead the field, pushing for the integration of culture and psychotherapy as a distinct scientific process.

The book is organized into four parts: Foundations, Applications and Advancing Frameworks, New Frontiers, and The Future of Cultural Adaptations. In the Foundations section, Bernal and Domenech Rodríguez provide a historical overview that places the cultural adaptation movement into the broader context of the evolution of psychotherapy. They then follow with a detailed review of the most widely used models of cultural adaptation. In the final chapter of this section, Trimble, Scharrón-del-Río, and Hill offer a thought-provoking look at ethical decision making in intervention research, challenging researchers and clinicians to examine power relations, consider methodological pluralism, and develop epistemological flexibility.

In the Applications and Advancing Frameworks section (comprising six chapters), cultural adaptation efforts with diverse ECGs, including Latinos and Black Caribbean and Asian Americans, are presented as successful examples of cultural adaptation research. The section New Frontiers includes three chapters, focused on American Indian, African American, and Latino clients, and is distinguished from the previous section by presenting research in its infancy. The final section offers a set of guidelines for professionals to conduct state-of-the-art cultural adaptations. As a whole, the book relies as much on the individual contributors who articulate the process of adaptation as on the thoughtful arguments of Bernal and Domenech Rodríguez that drive the overarching narrative.

*Cultural Adaptations* holds appeal for professionals in a diversity of fields, including psychology, psychiatry, social work, family medicine, nursing, education, public health, and public policy. It will undoubtedly be useful for researchers, practitioners, and students interested in the mental health of diverse populations. But the book serves more as a guide for investigators than for practitioners, given what appears to be its primary aim of stimulating future research in cultural adaptations.

## The Challenges of Cultural Adaptations

---

The process of cultural adaptation research, as illustrated by the case examples in the book, is characterized by a series of steps that require in-depth familiarity with the literature, partnership with community members, extensive pilot work, and tests of efficacy. Many of the researchers guiding this process are ethnically matched with the ECG for which the treatment is being developed (see Chapter 9 by Hwang for an illustration of the value of ethnic matching).

Because cultural adaptation research relies on rigorous methodology and a diverse work force, its feasibility must be addressed if it is to gain traction. Accordingly, the identification and allocation of resources deserve more attention than they are afforded in the book. There is also limited acknowledgment of how time-consuming the cultural adaptation process is. Although all systematic research efforts are costly and unfold over several years, the need to provide culturally adapted interventions to ECGs is great, immediate, and without the appropriate resources.

Thus, how can investigators secure funding for state-of-the-art cultural adaptation research when funding streams are so limited? With a critical underrepresentation of ECGs in psychology and related fields, how can we cultivate a cadre of diverse professionals to undertake cultural adaptation research? How can findings from cultural adaptation research be disseminated more rapidly and with greater impact, especially in real-world settings? What is recommended, in the immediate future, for clinical practice with understudied groups?

Some of these issues may have been overlooked in part because, as noted above, *Cultural Adaptations* seems to emphasize research over practice. In an important exception, Mariñez-Lora and Atkins (Chapter 12) tackle the efficacy–effectiveness gap directly by presenting a model to guide cultural adaptation decision making by community-based clinicians. As it progresses, their work has potential to shed light on how cultural adaptation theory can take hold in real-world settings to minimize idiosyncratic or misguided adaptations.

Although *Cultural Adaptations* as a whole falls short of providing in-depth guidance to practitioners, its heavy focus on theory leads to its most original contribution: that of debunking the incongruity between evidence-based treatments (EBTs) and cultural adaptations.

## The False Dichotomy

---

To a large extent, cultural adaptation research has been mired by debate over its merits. Critics argue that

existing EBTs are appropriate for use with ECGs, that adaptations are timely and costly, and that adapting EBTs for specific groups would lead to never-ending iterations of a given intervention. Moreover, the process of adapting a treatment can be idiosyncratic and, worse, can compromise the fidelity of a rigorously developed, manualized, and tested intervention.

In other words, critics fear that adaptations will compromise the underlying change mechanisms that produced the desired outcomes in carefully controlled randomized clinical trials. Cultural adaptations have been pitted against EBTs in what Bernal and Domenech Rodríguez argue is a false dichotomy. They cite the lack of representation of ECGs in randomized clinical trials and their significant underutilization of mental health services, both of which are alarming in the increasingly diverse context of U.S.–American society.

Bernal and Domenech Rodríguez go further to challenge an underlying assumption upon which much of the debate over cultural adaptations is based: that culture and psychotherapy ever have or ever could exist in isolation. The history of psychotherapy, of which EBTs are a part, is thus recast as a history of cultural adaptations.

This argument should have credence among advocates of EBTs who widely recognize the role of culture and context in shaping mental health problems and treatments (e.g., Weisz, Sandler, Durlak, & Anton, 2005). In recognizing the intrinsic link between culture and treatment, the field must accept that the dissemination of EBTs cannot occur without adaptation and that it behooves us to conduct these adaptations with a systematic and data-driven approach.

## Summary

---

*Cultural Adaptations* is a thoughtfully written and carefully crafted book that shifts the focus of cultural adaptation research from one of tension to one of harmony with EBTs. It reminds us that evidence-based practice includes culture as a core component. It compels us to embrace cultural adaptation as a science and, ultimately, as a practice.

With its clear delineation of cultural adaptation theories and methods, *Cultural Adaptations* is poised to serve as the go-to book on the topic. Without doubt, this volume deserves a place on the bookshelves of all students and mental health professionals who work with diverse populations.

## References

---

- Boyd-Franklin, N. (1989). *Black families in therapy: A multisystems approach*. New York, NY: Guilford Press.
- Comas-Díaz, L., & Griffith, E. (Eds.). (1988). *Clinical guidelines in cross-cultural mental health*. Oxford, England: Wiley.
- Constantine, M. G., & Sue, D. W. (Eds.). (2005). *Strategies for building multicultural competence in mental health and educational settings*. Hoboken, NJ: Wiley.
- Sue, D. W., Carter, R. T., Casas, J. M., Fouad, N. A., Ivey, A. E., Jensen, M., . . . Vazquez-Nuttall, E. (1998). *Multicultural counseling competencies: Individual and organizational development*. Thousand Oaks, CA: Sage.
- Sue, S. (1998). In search of cultural competence in psychotherapy and counseling. *American Psychologist*, 53, 440–448. doi:10.1037/0003-066X.53.4.440
- Weisz, J. R., Sandler, I. N., Durlak, J. A., & Anton, B. S. (2005). Promoting and protecting youth mental health through evidence-based prevention and treatment. *American Psychologist*, 60, 628–648. doi:10.1037/0003-066X.60.6.628