The Model for Adaptation Design and Impact (MADI)



Specify the Adaptations

1. **What** is modified?
2. **Nature** of adaptation?
3. **Who** adapted it
4. For **whom/what** adapted?
5. **When** adapted?

Are the adaptations well-justified?

1. Are **core mechanisms** preserved?
2. Do adaptations enhance **fit**?

Plan relevant implementation measures

1. Fidelity/adaptability
2. Context

Kirk et al Implementation Science (2020)

Framework for Reporting Adaptations and Modifications-Expanded

PROCESS

WHEN did the modification occur?
- Pre-implementation/planning/pilot
- Implementation
- Scale up
- Maintenance/Sustainment

Were adaptations planned?
- Planned/Proactive (proactive adaptation)
- Planned/Reactive (reactive adaptation)

WHO participated in the decision to modify?
- **Political leaders**
- **Program Leader**
- **Funder**
- **Administrator**
- **Program manager**
- Intervention developer/purveyor
- Researcher
- Treatment/Intervention team
- Individual Practitioners (those who deliver it)
- **Community members**
- **Recipients**

Optional: Indicate who made the ultimate decision.

WHAT is modified?

Content
- Modifications made to content itself, or that impact how aspects of the treatment are delivered

Contextual
- Modifications made to the way the overall treatment is delivered

Training and Evaluation
- Modifications made to the way that staff are trained in or how the intervention is evaluated

Implementation and scale-up activities
- **Modifications to the strategies used to implement or spread the intervention**

At what _LEVEL OF DELIVERY_ (for whom/what is the modification made ?)
- Individual
- Target Intervention Group
- Cohort/individuals that share a particular characteristic
- Individual practitioner
- Clinic/unit level
- Organization
- Network System/Community

Contextual modifications are made to which of the following?
- Format
- Setting
- Personnel
- Population

What is the _NATURE_ of the content modification?
- Tailoring/tweaking/refining
- Changes in packaging or materials
- Adding elements
- Removing/skipping elements
- Shortening/condensing (pacing/timing)
- Lengthening/ extending (pacing/timing)
- Substituting
- Reordering of intervention modules or segments
- **Spreading (breaking up session content over multiple sessions)**
- Integrating parts of the intervention into another framework (*e.g.*, selecting elements)
- Integrating another treatment into EBP (not using the whole protocol and integrating other techniques into a general EBP approach)
- Repeating elements or modules
- Loosening structure
- **Departing from the intervention ("drift") followed by a return to protocol within the encounter**
- **Drift from protocol without returning**

Relationship fidelity/core elements?
- Fidelity Consistent/Core elements or functions preserved
- Fidelity Inconsistent/Core elements or functions changed
- Unknown

REASONS

What was the goal?
- Increase reach or engagement
- Increase retention
- Improve feasibility
- Improve fit with recipients
- To address cultural factors
- Improve effectiveness/outcomes
- Reduce cost
- Increase satisfaction

SOCIOPOLITICAL
- Existing Laws
- Existing Mandates
- Existing Policies
- Existing Regulations
- Political Climate
- Funding Policies
- Historical Context
- Societal/Cultural Norms
- Funding or Resource Allocation/Availability

ORGANIZATION/SETTING
- Available resources (funds, staffing, technology, space)
- Competing demands or mandates
- Time constraints
- Service structure
- Location/accessibility
- Regulatory/compliance
- Billing constraints
- Social context (culture, climate, leadership support)
- Mission
- Cultural or religious norms

PROVIDER
- Race
- Ethnicity
- Sexual/gender identity
- First/spoken languages
- Previous Training and Skills
- Preferences
- Clinical Judgement
- Cultural norms, competency
- Perception of intervention

RECIPIENT
- Race; Ethnicity
- Gender identity
- Sexual Orientation
- Access to resources
- Cognitive capacity
- Physical capacity
- Literacy and education level
- First/spoken languages
- Legal status
- Cultural or religious norms
- Comorbidity/Multimorbidity
- Immigration Status
- Crisis or emergent circumstances
- Motivation and readiness