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The “Translators”: Engaging Former Drug Users as Key Research Staff to Design and Implement a Risk Reduction Program for Rural Cocaine Users

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Abstract

This manuscript describes lessons learned in the development and implementation of a clinical behavioral trial to reduce sexual risk among African-American cocaine users in rural Arkansas, from the perspectives of a multidisciplinary investigative team and community staff members with a history as local drug users who served as “translators.” Recommendations for investigators doing community-based research with active substance users are provided in the following domains: (a) engaging the community during formative research, (b) establishing bidirectional trust, (c) ensuring community voices are heard, and (d) managing conflict. The “translator’s” role is critical to the success of such projects.

Keywords

community-based participatory research; sexual risk; rural health; minority health; cocaine; intervention research; peer outreach; African-Americans

INTRODUCTION

In drug treatment programs, former users often play an integral role in the treatment process. Social network characteristics, particularly social support related to drug or alcohol abstinence, consistently predict better long-term treatment outcomes (Broome, Simpson, & Joe, 2002; Moos & Moos, 2006; Polcin, 2009). These effects have been attributed to social control, modeling of recovery behaviors, and creation of peer support networks for stress management and coping skills (c.f., Moos, 2006).

However, most published reports about the involvement of former users in drug user treatment focus on their role as volunteers (Ferrari, Jason, Blake, Davis, & Olson, 2006) or 12-step program sponsors (Whelan, Marshall, Ball, & Humphreys, 2009), not as senior paid staff in the programs. This is despite calls for increased engagement of individuals in recovery as leaders and staff in treatment programs within communities (White, 2009).

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Declaration of Interest

The authors report no conflicts of interest. The authors alone are responsible for the content and writing of the article.

Similarly, many HIV prevention programs for active drug users have utilized social context models (DiClemente, Crosby, & Wingood, 2005; Trickett, 2005) and incorporated peer education components for risk reduction with considerable success (Latkin, Sherman, & Knowlton, 2003; Latkin et al., 2009; Weeks et al., 2009). However, as with drug user treatment, less is understood about involving former users as nonvolunteer employees of these risk reduction programs. This is particularly true regarding the employment of former users as senior staff on research projects.

Community-based participatory research (CBPR) principles suggest that engaging former users in research programs designed to serve this population is crucial (Israel, Eng, Schulz, Parker, & Satcher, 2005; Minkler & Wallerstein, 2003; White, 2007). Similarly, CBPR principles suggest that this engagement is most likely to be successful in the long term when all those involved (researchers, staff, and community members) understand the expectations and roles for each partner in the project (Israel et al., 2005; Minkler & Wallerstein, 2003; Trickett, 2005).

Thus, there are clearly documented benefits from involving both active users and former users in various types of treatment and health promotion programs, and substantial support for former users playing an active role in drug user treatment and risk reduction research. Although it is clear that some full-time staff in these programs are in fact former users (c.f., Weeks et al., 2009), little has been documented about the specific issues that may arise when employing former users in research environments or about the benefits that these staff bring to a research project. Given the calls for employment of this population as an important aspect of capacity building within drug-affected communities (Weeks et al., 2006), practical guidance to researchers or staff to support the process of engaging former users in research programs is urgently needed. This manuscript discusses the experiences of the “Joining Everyone Spiritually, United in Strength” (JES’ US) program as a case study of how former users are working as key full-time staff in a risk reduction research program for active drug users.

The JES’ US Program

The JES’ US program is a NIDA-funded randomized behavioral trial, testing two theory-based interventions for sexual risk reduction among rural, African-American cocaine users. Consistent with CBPR principles, one early assumption in the development of the JES’ US program was that former drug users should play important roles on the project team.

The JES’ US program employs four full-time staff in the rural part of the state where the study takes place. Two of these staff are former drug users who have been in recovery for several years, and both individuals serve in crucial roles: the first is the supervisor for all field staff as well as the principal recruiter for the project, and the other is the primary interviewer for the project, conducting pre- and post-intervention assessments. During early discussions with these staff members, one stated, “I think it’s really important that we’ve ‘been there and done that’ and come out of it, *because we speak the language* [italics added] ...and no matter how much you study it, you can have all this knowledge without a real understanding.” From this concept emerged the conceptualization of the role of translator, an individual who “speaks the language” of the target population of active drug users and “speaks the language” of the research team. This is an invaluable role on the project staff, a role that cannot be filled except by an individual who is personally familiar with addiction and drug use, and who also has the willingness and ability to work with the research team over a long period of time.

Although some HIV prevention programs among drug users have also engaged active users in their research (c.f., Colón, Deren, Guarino, Mino, & Kang, 2010; Latkin, Hua, & Davey,

2004), the JES' US program leaders chose specifically to employ former users in these translators' roles. This decision was based upon reviews of literature suggesting that the roles of active users in research programs are typically limited to educational activities (and indeed, the JES' US program employs active users as peer educators in the intervention programs) but typically does not include responsibilities for managing and tracking large petty cash accounts or staff supervision (Colón et al., 2010; Latkin et al., 2004; Van Rompay et al., 2008), which were required for the "translator" staff positions on the JES' US project. The decision was also based upon recommendations of the JES' US Community Advisory Board, composed of 10 active drug users from the program's target community. During the conceptualization and development of the JES' US program, the Board members agreed that current users would not be credible because "... we know what they are out there doing at night, no matter what they might tell us during the day" and unanimously recommended the two former users who were eventually hired into these roles, because those individuals were seen by the Board members as credible, empathetic, responsible, and well-versed in the experience of drug users in the community. This perception of former users as more credible than current users among members of the target community is consistent with findings by other investigators (Mitchell, Peterson, & Latkin, 2006).

This paper reviews specific recommendations for engaging former drug users in senior staff (or "translator") positions in similar projects. Recommendations were developed using a collaborative process among the two "translator" staff on the project and three members of the investigative team, using a participatory discussion framework (Ulin, Robinson, & Tolley, 2005). All five individuals participated in an initial discussion to identify and achieve consensus on areas in which former drug users were likely to serve crucial roles within a research team. Next, these five individuals participated in a longer (3 hr) structured discussion in which all team members shared their perspectives on each main topic. The discussions were recorded and results reviewed by the team for completeness and accuracy.

RESULTS

Results emerged in two key areas: (1) hiring and training a translator, and (2) project activities for which translators are particularly valuable contributors. These activities include (a) engaging the community during formative research, (b) establishing bidirectional trust, (c) ensuring community voices are heard, and (d) managing conflict. These are discussed in detail below and key recommendations summarized in Table 1.

Hiring and Training Translators

Characteristics of Effective Translators—The team quickly agreed that translators are an essential part of the JES' US team, and would be a valuable part of any research or community project team that is attempting to implement a health promotion or risk reduction program for active drug users. The team also agreed that in most situations, effective translators would meet all of the following criteria: (1) they have personally experienced not just incidental drug use but significant periods of active drug use and/or addiction; (2) they have experienced sequelae of drug use similar to that experienced by the target population (this might include job loss, violent or sexual assault, jail or prison time, and/or homelessness); (3) they have been abstinent from drug use for at least a year or more and remain active in their recovery process; (4) they are excited about the opportunity to assist other drug users; (5) they can serve as a positive role model in terms of basic health behavior (e.g., observing basic hygiene, staying off the street, etc.); and (6) they must have personally lived the risk behaviors that are being addressed in the intervention program (e.g., for JES' US, a sexual risk reduction program, the translators felt it was important that they were sexually active as drug users themselves).

Translators noted that these criteria are crucial not just to assure that the translator will be able to work productively on the project and serve as a credible liaison to the target community, but also to protect the translator. One translator noted, “[The translator has to be fairly well-established in his or her recovery because] there’s a danger to the translator, from being around familiar surroundings and possibly wanting to get high again.” The translators noted that a former drug user who wishes to work on a project should be willing to discuss team members’ concerns about relapse, and maintain an open, honest discussion with team members about this issue. Specifically, one translator stated, “They [translators] have to be open about everything about their previous drug use and their recovery. Because nearly every drug user will tell you that anytime an addict is secretive, we’re doing something we’re not supposed to be doing.” In keeping with community-based participatory research principles of egalitarianism on teams, the discussion group members also agreed that translators should expect to be treated with respect and dignity by all team members, which includes being able to ask other “nontranslator” team members personal questions related to study issues (such as drug use or sexual risk) and getting honest responses.

Locating and Hiring Translators—The team further agreed that researchers or community organizations should work with local drug user treatment programs to identify individuals who are recommended by drug user treatment program staff as particularly good candidates for the translator’s role. They also recommended that once one translator is hired, that individual should be empowered to assist in identifying other translators who will serve well in the role; as one JES’ US staff member put it, “An addict knows another addict.”

One challenge with regard to hiring is managing institutional rules about job qualifications. One translator noted, “Around our part of the state, there aren’t a lot of well-educated addicts or recovering addicts.” Thus, position descriptions requiring a minimum of a bachelor’s degree or multiple years of research experience may severely limit the ability of a research team to hire a translator who is otherwise well-qualified to serve in the role. Working proactively with institutional human resources staff to craft job descriptions that will ensure institutional rules are met while keeping the job available to potential translators is a necessity. Some suggestions made by both translators and research staff in the discussions were to allow work experience to substitute for some college education, and allowing volunteer work in treatment centers or 12-step programs (if the applicant is willing to allow such work to be verified) to count toward the required relevant experience.

In addition, language was included in the job description to support the hiring of individuals who had considerable “street experience.” Specifically, the job description stated that a high priority would be given to applicants who have “demonstrated knowledge of and sensitivity to the social and cultural norms of the target community, and demonstrated ability to work effectively with members of the target population.”

Training—Identifying potential translators is not sufficient, however. Once an individual has been identified by the project team as a good match with the project and the above criteria, a training process will help the translator become familiar with the “language” of research, specifically the rules, policies, and procedures that will govern the program and which he or she will be “translating” for participants. As with all staff members, the investigative team leaders should be specific during training regarding the policies and procedures of the program. The translators in the discussion group recommended that these discussions of policies and procedures include details about the rationale for each, so that they can help interpret these for participants as needed. For example, in the JES’ US project, some participants are frustrated that they cannot participate in both arms of the randomized trial. Translators report that they have had to explain this to several participants, and have done so in a way that the participants could easily understand (i.e., “The folks doing the

study are trying to find the best program for our community so they have to compare how everybody does just getting one program first. They don't have the money to give both programs to everybody.”).

Training should also incorporate key values of the project, and encourage open discussion about those values during the training process. Key values suggested during the discussion include: honesty, respect for all persons, confidentiality, and open and rapid communication. Areas that might create potential confusion for translators should be addressed proactively; for example, in randomized trials, the blinding of interviewers may be perceived by translators as “keeping secrets” which is problematic in the parlance of recovery programs. Proactively discussing the purpose of blinding and specifically soliciting translators' opinions and feeling about such policies can help the translators and the rest of the team become more comfortable and more confident about the implementation of these types of potentially frustrating “rules.”

Finally, training should give translators an opportunity to practice all program procedures with research staff, including guided practice and an opportunity for feedback. Although this is crucial for any staff member on a project, translators suggested that this training process would be an especially important time during which they can provide the research team with important feedback about the ways in which study procedures will be perceived by future participants, thereby assisting in the formative research process.

Critical Activities in Which Translators Play a Crucial Role

Critical Activity 1: Engaging the Community During Formative Research—Not only can translators assist with formative research by providing feedback to program developers about study procedures, as described above, but they can also facilitate the involvement of other community members in the formative research process. The JES' US program established a Community Advisory Board (CAB), composed of 10 active drug users in the community. Even though the intervention had not yet been fully developed, the translators had already been hired. As a result, the translators were able to recommend potential CAB members to the research staff based on their knowledge of the community of active drug users in the area. One translator stated, “I recommended people to you that I knew were actively using and who I knew were popular in the community, that everyone who's Black and a drug user in town knows and pretty much respects.” The CAB members in turn benefited from this “vote of confidence” from a respected person in their community, which, according to several CAB members, made them feel proud to be asked to serve and more willing to engage.

The translators may also help the community engage with researchers who are otherwise unknown to community members. Because members of the JES' US research team were largely new to the community, did not live in the targeted cities where the program would take place, and were predominantly middle-class white professionals, community members in the program's target population (rural African-American cocaine users) were not necessarily inclined to give the team members much credibility. Fortunately, the translators had got to know the research team members and understood their training, interest, and commitment to the program. The translators were able to reassure CAB members and other community members about the researchers, thereby increasing the community's willingness to engage. One translator expressed the situation this way: “People have asked me, ‘what's up with you [the principal investigator], why are you coming down here [to our town],’ and I tell them, ‘look, she's good people.’ They know I wouldn't make that up. And that's all they want to hear, then they are more willing to work with you.”

The other crucial role for translators in the early phases of the project and indeed throughout the program is explaining the purpose of the project in a language that is understandable to the target community. This can be quite literally a process of “translating” the language that the research team uses about the study into a language that is more easily understood and valued by participants. The translators discussed how they explain concepts such as randomization and active control conditions to participants (e.g., “We are trying to see how two different programs work and figure out which one is the best, you don’t get to choose, though; everybody will get to be in a program that we hope will work for them.”). One approach that translators and team members agreed could be helpful would be for translators and team members to work together to write the informed consent documents for the study or to draft language that could be used when explaining the informed consent document to participants.

Critical Activity 2: Establishing Bidirectional Trust—For a community-based risk reduction, health promotion program or research project to work, researchers must trust that any concerns or issues that arise will be reported by field staff promptly, and field staff (including translators) must trust that the researchers will take their concerns seriously and work quickly to resolve them. Similarly, community members will often view translators as an important ally in the program. Community members must develop trust that the translators have their best interests at heart, and translators must trust that community members will engage with the program and express their opinions about the program honestly.

All of these forms of trust take time to develop, and in the JES’ US team’s experience this trust is founded primarily on the “no secrets” style of communication described earlier. Translators stated that community members had more trust in them because they took the time to “hang out, play basketball, just talk, and tell my story [about being an addict and being in recovery].” Translators further said that they would themselves develop more trust in a researcher who demonstrated this kind of openness, but they also said they relied on their instincts about various team members (i.e., “We see your enthusiasm or passion about the project and if you really care about addicts – we can just tell if you have that or not.”). Translators stated that they would have considerable difficulty trusting research staff who focus on the policies and procedures of the program to the exclusion of the program’s service to the participants or the benefits they hoped the program would provide to the community.

Similarly, translators stated that their trust in research team members was increased as research team members shared personal information with them, spent informal time visiting together about work or life events, and asked for help from the translators. One translator specifically cited the process of working on this manuscript as an example of this, saying, “The fact that you would ask us about this paper you’re working on, about how we see things from our perspective, and ask us to help you with it, that means a lot to us.”

Availability of the research staff to the translators and other field staff was another quality cited by the translators as enhancing trust. Similarly, translators said they expected community members would not trust a translator who did not “get out from behind the desk” and get into the community to talk about the program and its benefits directly with potential participants. One translator said to the principal investigator of the project, “You’re there... you’re there to meet with the CAB and with us all the time. And if you were never willing to come down out of your ivory tower and hang out with us, well, what’s that say?” When a member of the research team asked in response, “What *does* that say to you? If [the research staff] never came to the field or came to CAB meetings or staff meetings, how would you

feel about that?” The translator replied, “Honestly? [I would think] that it’s all about money to you.”

Conversely, attempts on the part of some team members to be overly familiar were met with skepticism by translators, who explained, “It’s good that y’all are here with us and doing things in the community, but it’s important that you don’t try to pretend you’re something you’re not. You’re not from [our town] and you don’t know what it’s like as a participant. Let us and the participants teach you, instead of pretending.” Examples of this type of “pretending” included using slang that was obviously not a natural part of a researcher’s speech pattern, or saying “I understand that” in response to a participant’s concern (such as being kicked out of one’s home) when that was not something a researcher would likely have experienced personally.

Translators also said that a researcher who does not follow through with commitments to program participants (for example, stating that a program will offer specific incentives, but then not providing those incentives) creates significant problems with trust for both translators and participants. Translators noted that not only does this lack of follow-through create bad feelings among the participants (assuming that there are not clear explanations provided a priori for the changes), but it places the translators in a precarious position with participants, since participants often see the translators as an “extension” of the research team. “It makes us look like we’re not keeping our promises to them, too,” remarked one translator, “and that’s bad for the whole project and the community because then no one trusts anybody.”

Translators also noted that the trust between them and community members was similarly founded on open communication and availability. One translator said that she felt the participants expected translators to listen to their problems “and just be there for them.” This role is often conferred on individuals in the translator’s role because of their connection to the community and the respect that others in the community have for their ability to “make it through” drug abuse and into recovery. In addition, because the translators maintain strict confidentiality, and because this rule is repeated often to participants, the participants will occasionally talk to translators about personal problems or interpersonal conflicts. “They know I won’t go out into the community and tell their business,” remarked one translator, “and that means they trust me more than they trust most people.”

Critical Activity 3: Ensuring Community Voices Are Heard—Translators play a critical role in ensuring that the project team knows how community members really feel about the program that is being offered. As one researcher observed, “No matter how well-meaning [the researchers] may be, no matter how long participants have known us...there are some things that a participant just will not say to someone with ‘doctor’ in front of their name...they know that there’s probably a level at which we won’t understand...but they’ll say it to you [the translators].” Because participants know that translators have experienced very similar life circumstances, they may share their opinions more freely with translators, including opinions about the appropriateness, relevance, and importance of the program being offered. This is critical information that otherwise might never be gathered from participants without a translator serving in a staff role.

Some of these concerns may be somewhat mundane from a research standpoint, but critically important to community members and thus crucial to the project’s success. One translator remarked that the most common question participants ask her about the project is whether the small financial incentives provided to participants will “mess with their [social assistance] checks.” Because institutional policies require that participants provide their social security numbers on incentive receipt forms, JES’ US participants were concerned

that the income was being reported. The translator brought this concern to the project director, who verified with institutional officials that payments to participants were not reported unless the payments exceeded a specific amount (which is not exceeded by the JES' US project). The translator then was able to provide this information to all participants who expressed this concern.

Other concerns are very specific to the project's content or format. Confidentiality concerns have been very important to participants, and translators have been able to explain confidentiality to participants in a way that researchers cannot. One member of the research team said, "I can't help it, I speak in 'researchese,' and I don't know if people in the community will believe me when I start talking about confidentiality in that 'researchese' language." The translators both immediately responded, "No." One translator added, "They might not really understand you, and if they don't understand you they're not going to believe you." Another translator added, "It's just a lot easier if I say to [participants], 'Look, unless you tell me you're gonna kill yourself or someone else or you say you're beating up your child, everything else you say here has to stay here – we'd get fired if we told it.' "

Critical Activity 4: Managing Conflict—During the discussion, translators and research team members identified several types of conflict in which the translators played an important role as managers or mediators. These included conflicts between participants and researchers, among field staff, and within the larger community.

In the JES' US program, participants have occasionally expressed frustration that the researchers are not addressing aspects of their lives that are important; for example, some participants want the project to offer jobs or to build a new drug treatment center, which are both desperately needed in the impoverished rural community where the project is located. Translators have played an important role in anticipating these criticisms from the participants and been proactive in talking with participants about this. One translator said, "I'll be the first one to say, 'yeah, man, we do need that, but I'm happy to be a part of this project because it's starting somewhere, at least we are getting started somewhere.' "

Other conflicts may arise among field staff, and translators may be in the best position to mediate those conflicts. For example, the JES' US project not only works with a CAB, as described above, but also works with peer educators, who are active drug users or users in very early stages of recovery and who are paid for their time to serve as coleaders of group intervention sessions. Soon after the JES' US project's peer leaders were hired, conflict between the peer leaders and some CAB members erupted, with members of both groups asserting that their particular role was "more important" to the project. In particular, the CAB members felt that their experience on the project was being discounted by the peer leaders and, by extension, the researchers. Translators identified this conflict early and brought it to the attention of the researchers. Together, the researchers and translators identified a solution that helped each group feel valued and reassured the CAB members of their important advisory role to the overall project.

Another conflict that occurred among field staff actually occurred between the translators themselves. The first translator hired for the JES' US project was an African-American man. The next translator hired was a white woman, who was recommended by the first translator. Soon after being hired, the novice translator began going into the predominantly African-American target community dressed professionally and wearing her university identification badge. She said, "I was so excited about my new job, and I felt like I needed to be official." The more experienced translator then explained that this created problems for recruitment: "In the 'hood, everybody thinks when they see a Black person and a white person coming down the street, that's the police." The translators worked together to identify ways that they

could be more effective, and the newer translator said, “Once I started dressing down and being more casual, just hanging out with people and talking about my own history, it got a lot easier, but at first [the more experienced translator] was pretty frustrated with me.”

Importantly, not all conflicts identified by the translators were even known to the researchers. For example, one translator remarked that as the JES’ US project was beginning, unbeknownst to the research team, he had learned that a local drug dealer was very worried about the project and was actively encouraging potential participants not to enroll in the study. The translator spoke to the dealer personally to identify his concerns and discovered he strongly believed that the study “has got to be a set-up.” Therefore, the dealer feared that the study would result in arrests of participants and ultimately would imperil him as well. The translator then explained the purpose of the study and explained the fact that the researchers had obtained a Federal Certificate of Confidentiality to protect participants’ identities. Later, the dealer came to the translator and apologized for his prior actions, saying, “I know you wouldn’t set people up, and I’m sorry I told people not to [enroll in the project].” All members of the team agreed that the credibility of the translator within the community allowed him to manage this conflict much more effectively than the researchers would have managed it.

Finally, conflict between translators and senior members of the investigative team was discussed. Translators reported that they felt comfortable raising concerns or objections to the project director or principal investigator, “... because you always listen to us and take us seriously.” The project director remarked that the mutual trust and respect among the translators and investigative staff were the “ground” that allowed them to discuss their disagreements openly. “There are things you [the translators] know best, and we need to take you at your word on those things,” she remarked. Although all acknowledged that the principal investigator had ultimate decision-making authority on the project (in the words of one translator, “you’re the big boss, so what you say goes”), the translators also reported that they always felt comfortable voicing their opinions to her because “you listen to us, and respect what we know.”

Interestingly, translators said that mediating conflict was perhaps one of the most important aspects of their role, and the team agreed that the same qualities that make a translator good in this role also makes him a person who is likely to be expected to help participants manage their conflicts, legal dilemmas, and other concerns. They observed that the way they dealt with these issues and worked with participants or investigators around these conflicts had important implications for developing and maintaining trust in the community and ensuring that the community members remained engaged with the overall project. One translator noted, “Because of what people bring to me, I can know things about them doing something that could get them in a lot of trouble. They expect me to be their conscience. And I have to be very careful and honest with them about what I can and cannot do to help them out. It’s sometimes a very thin line, and sometimes it’s hard.”

DISCUSSION

Just as some participants view the translators as their conscience, as described above, the research team and translators ended their structured discussion by concluding that in many ways, the translators serve as the conscience of the JES’ US project. The translators serve a crucial role in keeping the project true to both the community’s values and to the underlying science. Because tensions often arise where the community and science converge, the translators are often in the position of negotiating those challenges of trust, ensuring that all voices are heard, and managing conflicts that arise.

The translators also serve as an important part of the researchers' conscience by helping them evaluate the question, "Are we truly serving the community, or merely serving our own research agenda?" Similarly, the translators may serve as community members' conscience with regard to the project, by encouraging them to share their honest opinions about the project, to find ways to become (or stay) engaged with the project, and encouraging participants to provide honest answers in meetings and assessment interviews. Their role is, therefore, central to helping the project maintain its scientific rigor and its grounding in community based participatory principles. Although the experiences of this particular research team are unique, we believe that the lessons learned by the team can be important for other teams that are trying to implement behavioral intervention programs for substance users.

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GLOSSARY

Community-based participatory research	An approach to scientific research that engages members of the affected community being studied in all phases of the research project, from conceptualization and design through implementation, analysis, and public presentation of results
Sexual risk	All forms of sexual behavior that may lead to adverse health consequences; such behavior includes oral, vaginal, and anal sex that is performed without a latex barrier such as a male or female condom

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Biographies

Katharine E. Stewart received her MPH and Ph.D. from the University of Alabama at Birmingham. She was an undergraduate at UNC-Chapel Hill. She currently serves the Fay W. Boozman College of Public Health at the University of Arkansas for Medical Sciences as Professor of Health Behavior and Health Education and as Associate Dean of Academic Affairs. Dr. Stewart's research activities focus on developing behavioral interventions to prevent HIV and STIs, and to improving quality of life and health outcomes among persons living with HIV.

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Desi Sims served as Field Supervisor for several grant projects for the University of Arkansas for Medical Sciences, Psychiatric Research Institute and the College of Public Health. He is a former addict. He is a pastor and works with youth and addicts that are attempting to change their lives.

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TABLE 1**Recommendations for researchers and translators***Recommendations for Research Team Members*

- Set clear criteria for selecting translators
- Must have significant personal experience with drug use and its consequences
- Must be abstinent from drug use at least one year and in active recovery
- Must be positive role model with desire to help other drug users
- Must have personally lived risk behaviors addressed by the intervention
- Provide comprehensive training for translators
- Should incorporate key values of project
- Should include detailed discussion of rules, policies, and procedures that govern research and rationale for each
- Should address areas of potential confusion such as blinding
- Solicit translators' opinions and feelings about policies and rules
- Offer opportunity to practice program procedures
- Work to maintain a consistently open avenue of communication with translators
- Trust translators' concerns and feedback about the program and participants
- Be open with translators and willing to share personal experiences
- Ask translators how they see things from their perspective and be willing to ask for their help
- Be available to translators and other field staff and visit field offices often to meet with them
- Follow through with commitments to program participants and explain circumstances immediately to translators if this is not possible

Recommendations for Translators

- Communicate concerns or issues about the program to the research team
- Solicit information from researchers to understand the researchers' commitment to the program and community
- Be honest with researchers and participants about past drug use and its consequences
- Be available to community members for open discussion, and bring study-related concerns of community members to the attention of research staff
- Identify conflicts not otherwise known by researchers
- Be open about ways to keep the project true to the community's values and the underlying science