

# TRANSLATION METHODOLOGY

WHO has accrued considerable experience in translating health measurements (See Sartorius and Kuyken, 1994). This has facilitated the development of a translation methodology which has significant advantages over the "forward - translation" and the "translation - back-translation" methodologies. The steps outlined below describe a sequence which has been used successfully in a number of studies.

The following individuals will be needed to assist in the translation process.

1. **A bilingual panel** (three to six individuals)  
The group should be made up of one or more individuals skilled in interviewing and assessment, a clinician and say a behavioural scientist, possibly an anthropologist.
2. **Monolingual individuals** (at least four)  
These will be able to comment in an articulate way on the translated document. The monolingual group should be representative of the people who are likely to use the instrument in the target culture, and of those who will be subjects in the proposed studies.
3. **Translators** (at least two)  
One or two to be involved in the translation of the materials provided into the local language and another who should be entirely independent of the first and who would be responsible for backtranslating.

The translation process has a number of steps. The source instrument is translated into the target language by one or two translators, if two they can consult one another in the course of their work. These translators should have a clear and detailed understanding of the instrument, and the population who will use the instrument. This will increase the likelihood both that the instrument is translated appropriately, and that the language used in the translated document matches closely the language usage of the target group.

The bilingual panel then reviews the translation, looking for any inconsistencies between the source language version and the translated document, and discussing and resolving issues related to the maintenance of the integrity of the source instrument in terms of conceptual, semantic and technical equivalence.

A group of monolingual, unfamiliar with the instrument, and representative of the population for whom the instrument is intended, then "tests" the document by reading through it, looking for aspects of the translation which are not clearly comprehensible or are ambiguous in the target language. The monolingual group should also be asked to comment on whether the style of questioning and format of the questionnaire is acceptable. The presentation of the instrument to the monolingual group is of considerable importance because they rely only on the text of the target language, and have no prior idea of the concepts the questions were designed to address, nor the form or content of the questions in the source language. Monolingual review can be done in a focus group situation, where focus group participants arrive having read through the instrument, and discuss the instrument in session. This would involve detailed discussion of the instrument's instructions, form and content. Ideally such monolingual focus groups would be

moderated by a member of the bilingual panel.

The bilingual group then considers the comments of the monolingual group and, wherever these accurately reflect the source document, incorporates them into the translated document, ensuring that the document is grammatically correct in the target language.

The translated document is then back-translated into the original language by the backtranslator. This translator should be briefed about his/her place in the translation methodology being used, and told that he/she is translating a measure concerned with health. This ensures the translator's work is appropriate to the methodology without introducing bias into the process. The backtranslator must not see a copy of the original English version before completing the translation.

The bilingual group then considers the original and back-translated documents. Any significant differences should lead to iterations in the process until an acceptable conceptual, semantic and technical equivalence has been achieved.

## REFERENCES

Orley, J. and Kuyken, W. (Eds) (1994) *Quality of Life Assessment: International Perspectives*. Heidelberg: Springer Verlag.

Sartorius, N. and Kuyken, W. (1994). Translation of health status instruments. In J. Orley and W. Kuyken (Eds). *Quality of Life Assessment: International Perspectives*. Heidelberg: Springer Verlag.