



### **CAB Corner: Participatory Translation Review Practices**

With special thanks to Sasha Verbillis-Kolp, Consultant and HIAS Program Manager, MHPSS, and the CARRE project Cultural Validators

Practitioners often seek guidance on how to best translate materials for forcibly displaced populations to ensure culturally and linguistically appropriate care. Despite there not being one standard industry approach, incorporating translation and cultural adaptation practices can be of particular importance when materials are more sensitive, complex, or important in nature. Translation and cultural adaptation practices help ensure linguistic access and justice (For more information on language justice, please visit our June Newsletter article <a href="https://example.com/here">here</a>).

Cultural validation and translation review can be carried out in various ways, and process adaptations often depend on such factors as capacity, time, level of material sensitivity and intended duration of the material (how long-lasting). The CARRE team's Cultural Validation and Translation Review Toolkit (<a href="here">here</a> provides specific guidance that your organization may consider adapting.

Below is an illustration of CARRE's efforts to use cultural validation and translation review with standardized measures, key takeaways emphasizing cultural humility and relevance.

#### **Cultural Validation of Standardized Measures**

When standardized instruments are used to identify the presence and severity of mental health symptoms, it is important to incorporate culturally and linguistically appropriate words, phrases, practices/approaches and idioms of distress so that there is equivalency between what the instrument intends to assess and the audience's understanding of the instrument (Kohrt & Hruschka, 2010; Weiss, 1997; Kleinman, 1978; Bhui & Bhugra, 2002). This not only increases the accuracy of the instrument, but also the trust between the provider and recipient.

Recently, the CARRE team completed a cultural validation and translation review process for two standardized screening instruments used for a parenting/caregiver intervention. Most translation procedures for standardized instruments use a back-and-forth translation process where a bilingual professional translates into the target language and another bilingual translator translates it back into English to ensure matching. CARRE supplements this back-and-forth or dyadic process with a community participatory translation process that uses focus groups and committee consensus to ensure instruments have cultural equivalency, accuracy and clarity of meaning. The general process taken by the CARRE team is as follows:

**Step 1**: Convene a focus group of at least 2-4 bilingual and bicultural members of the same language (Hereafter call the Cultural Validators or CVs). CVs should represent differing genders, ages, levels of education and time in the U.S.

**Step 2**: CVs are encouraged to engage in a robust discussion of words and phrases that the instrument uses to describe specific thoughts, feelings and behaviors. From this discussion, the CVs develop and submit a "Semantic Guide" in the target language to share with a translation company to provide terminology or expression suggestions prior to translations.



December 2022

**Step 3**: A professional translation company completes a forward translation in the target language using the Semantic Guide. Following the forward translation, a different professional translator provides a back translation into English.

Step 4: All versions are iteratively reviewed, debated and reconciled among the CV group.

**Step 5**: A near final version is used for a "Pilot Test", meaning that a select number of people from the target language group are administered the measure. Areas of the instrument that cause confusion, elicit further questions or misunderstanding are collected, discussed and clarified with the CV group.

**Step 6**: After further changes are completed the standardized instrument is ready for broader use.

# **Cultural Humility in Practice**

Because language has meanings and references that transcend the words themselves, a community-based, participatory cultural validation process gives intentional and important space to discuss and discover sensitivities, cultural nuances and linguistic differences that may be present due to region, socioeconomic status, literacy, historical context, migration experience, gender and other social identities.

Because many instruments, materials and resources are developed by people from dominant cultures, this process is also an opportunity for practitioners and researchers to discover unintended bias and privilege, as well as reflect on their own culture. Partnering with the community from a space of genuine curiosity, dignity and respect helps ensure that material is more resonant and effective and is just one example of cultural humility in practice.

# **Cultural Validators Reflect on the Participatory Translation Process**

Below are reflections and considerations from the cultural validators who were part of CARRE's most recent participatory translation process. CVs noted:

- Their participation allowed them to better understand the overall purpose of a standardized instrument and how this may be beneficial to the recipient. Given that many CVs also play important leadership roles in their community, this knowledge can be relayed to other community members.
- How important it was to have multiple opinions and discussions about words and phrases so the most universally understood word or phrase could be used. An Afghan cultural validator stressed the importance of having multiple perspectives from Afghanistan, a "big



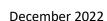
December 2022

melting pot of many different ethnicities" to shape the validity and accessibility of the translated standardized instruments. A Spanish cultural validator discussed how any process is strengthened by having more than one opinion. The individuals can "bounce things off of another translator to reach a consensus."

- It was fulfilling to be part of a process that helped create inviting, validating and non-judgmental measures for their community.
- Standardized measures should be accompanied with additional information for recipients to ensure that they understand the purpose of the instrument so that they can make an informed choice participating.
- Some culture and language groups might need additional spoken instructions to understand the nature and purposes of being questioned as they may perceive being questioned about parenting as an accusation or that they themselves are in trouble and in turn, may impact the way they answer questions.
- It is not just what is said, but also how it is said. Tone of voice is crucial in relaying specific meanings as the person posing the questions may "unintentionally make the correct answer be more indicative when reading the question to the parent vs allowing the client to choose the correct answer according to their unbiased opinions."
- People must exercise some caution when examining the results of instruments developed in one culture that are used in another, even if they have undergone cultural validation and translation review, given that some concepts may not have equivalence across cultures.

### Conclusion

While there is no universal approach to cultural validation and translation review, it is critical to ensuring language access, cultural humility, accuracy, relevance and trust. CARRE is here to be a thought partner with you if and when you might want to embark on a process of cultural validation; we look forward to continuing to learn from and with partners and cultural validators as we seek to facilitate culturally and linguistically accessible mental health and psychosocial support services.





#### Citations

Bhui, K., & Bhugra, D. (2002). Explanatory models for mental distress: Implications for clinical practice and research. *British Journal of Psychiatry*, 181(1), 6-7. doi:10.1192/bjp.181.1.6

Kleinman, A. (1978). Concepts and a model for the comparison of medical systems as cultural systems. *Social Science & Medicine. Part B: Medical Anthropology*, *12*, 85-93.

Kohrt, B. A., & Hruschka, D. J. (2010). Nepali concepts of psychological trauma: the role of idioms of distress, ethnopsychology and ethnophysiology in alleviating suffering and preventing stigma. *Culture, Medicine, and Psychiatry*, 34(2), 322-352.

Verbillis-Kolp, S., Yotebieng, K., Farmer, E., Friedman, E. and Hollifield, M., (2022) Community Participatory Translation Processes for Mental Health Screening among Refugees and Forced Migrants, *Traumatology*, in press.

Weiss, M. (1997). Explanatory Model Interview Catalogue (EMIC): Framework for comparative study of illness. *Transcultural psychiatry*, *34*(2), 235-263.