

Meaningful Measures Ltd agreement for translating MYCaW[®] and MYMOP[®] into other languages

November 2021



Meaningful Measures Ltd owns the copyright for the following tools:

- MYCaW[®] (Measure Yourself Concerns and Wellbeing[®])
- MYMOP[®] (Measure Yourself Medical Outcomes Profile[®])

The MYCaW[®] and MYMOP[®] tools are written in English. Meaningful Measures Ltd has a protocol (see below) for creating translations of the English language version of these tools, and their guidance notes. Previous translations that do not adhere to the protocol below are not valid versions of the tools. The tools have also been updated as of January 2021.

Anyone wishing to create a new translation of MYCaW[®] or MYMOP[®] will need to adhere to the protocol set out below. The person wishing to use the tool must also obtain a licence to use the MYCaW[®] or MYMOP[®] tool from Meaningful Measures. They must also agree that the intellectual property of the newly translated version created via the translation protocol remains that of Meaningful Measures Ltd.

Please fill in the following and send to Meaningful Measures Ltd

I wish to create a new non-English translation of MYCaW[®] / MYMOP[®] (delete as appropriate)

Name of person making request

Name of organisation

Language translating to

Tick the box to agree to using the protocol for creating a non-English translation of MYCaW[®] /MYMOP[®] (delete as appropriate)

Tick the box to agree that the newly translated non-English version of MYCaW[®] /MYMOP[®] (delete as appropriate) is the intellectual property of Meaningful Measures Ltd, as this company owns the copyright and trademark for the original tools.

Signed.....

Date

Please return a copy of this page to Marie@meaningfulmeasures.co.uk

Steps for generating a translation of MYMOP[®] or MYCaW[®] tools (and optional guidance notes), based on Beaton et al. Guidelines for the process of cross-cultural adaptation of self-report measures. Spine (PhilaPa 1976) 2000, 25(24):3186-3191.

1. Obtain English original with licence from Meaningful Measures and declare wish to translate. Complete the translation agreement form (above). Meaningful Measures will confirm if you can proceed or whether there is already another group translating the tool into your desired language.
2. Person 1 (native speaker in required language) creates translation from English to required language
3. Person 2 (native speaker in required language) creates translation from English to required language
4. Persons 1 and 2 agree on new translation version by resolving and discrepancies and generating “newly translated version”
5. Person 3 (native speaker in English and naïve to original English version of tool) to back translate newly translated version to English
6. Person 4 (native speaker in English and naïve to original English version of tool) to back translate newly translated version to English
7. Persons 3 and 4 agree on back translated version by resolving and discrepancies and generate “back translated version” to show to review panel.
8. Once the newly translated tool is created, test it out on a group of 10 patients/clients to confirm that people find it understandable, and acceptable.
9. Create a short report of the methodology used to generate your translation (showing adherence to the above protocol) and include who the names of all the people are who have been involved in the translation process.
10. Send newly translated version and back translated version and short report of your method to the Meaningful Measures review panel (marie@meaningfulmeasures.co.uk) to check quality of the newly created tool and agree that it is a viable translated tool to use. If Meaningful Measures approves the translated version it is officially adopted into the tools set and the Meaningful Measures logo/ branding is added. The tool is named by Meaningful Measures in terms of the country of translation – eg. MYMOP D for German version.
11. Note, this translation is the intellectual property of Meaningful Measures Ltd, as the copyright and trademark of the tool is owned by this company. Any references to the tool in academic publications or on websites needs to cite that Meaningful Measures holds the intellectual property, copyright and trademark of the tools.

See below for example of how a Chinese MYMOP was translated:

Taken from: Chung VC, et al. Using Chinese version of MYMOP in Chinese medicine evaluation: validity, responsiveness and minimally important change. *Health Qual Life Outcomes*. 2010 Sep 30;8:111. doi: 10.1186/1477-7525-8-111. PMID: 20920284; PMCID: PMC2959095.

“Forward - Backward - Forward Translation of MYMOP In translating MYMOP from English to Chinese, we followed guideline developed by Beaton and colleagues (Ref: Beaton DE, Bombardier C, Guillemin F, Ferraz MB: Guidelines for the process of cross-cultural adaptation of self-report measures. *Spine (PhilaPa 1976)* 2000, 25(24):3186-3191.)

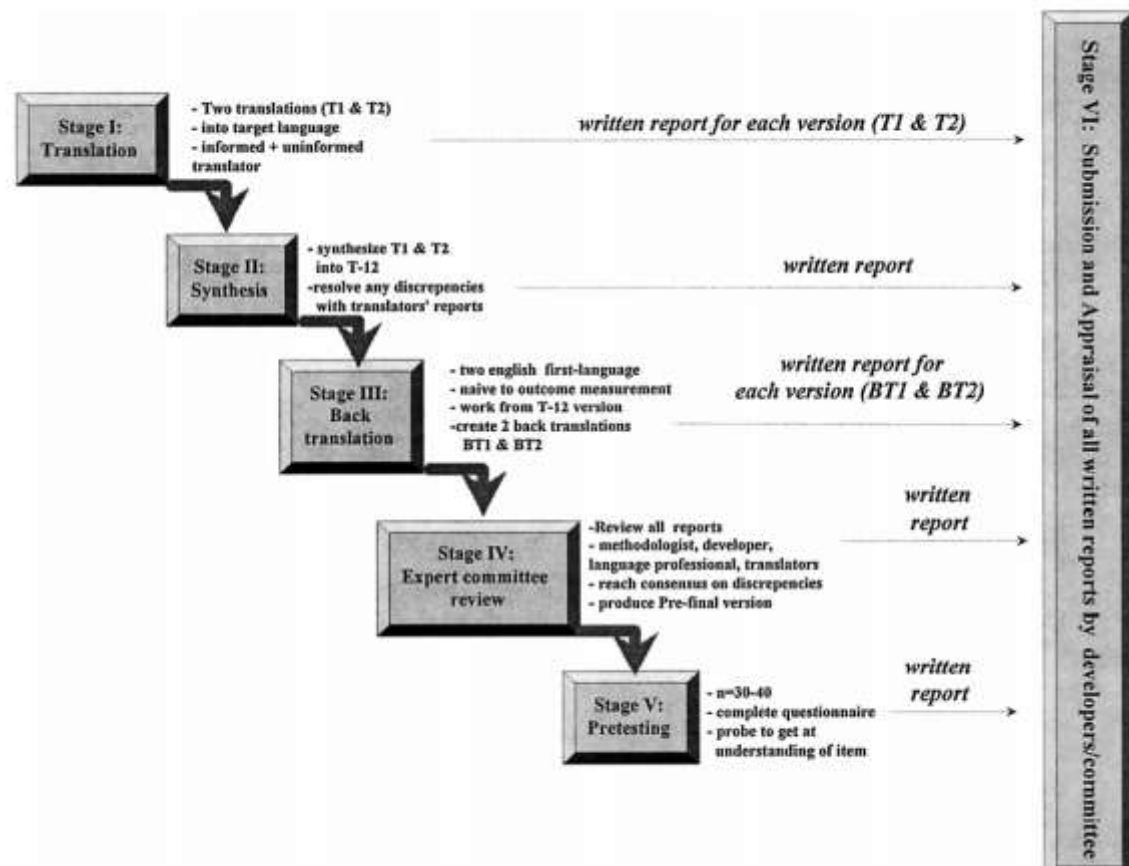


Figure 1. Graphic representation of the stages of cross-cultural adaptation recommended – taken from Beaton et al. (2000)

For example from the Chinese translation of MYMOP:

“First, forward translation were performed by one investigator with clinical and health service research method training (VC), and one professional translator (T1) without healthcare background. Two forward translations of MYMOP were hence generated (MYMOP - Forward1 and MYMOP - Forward2). By discussion between VC, LCH and T1, a single consensus based Chinese translation was produced (MYMOP - Forward3).

Second, MYMOP - Forward3 was back translated into English by two Chinese translators (T2 and T3) residing in the U.S. Two back translated English versions (MYMOP - Backward1 and MYMOP - Backward2) were generated. SG and SW, who are academic clinicians in public health and primary

care, discussed discrepancies in the two backward translations and produced a single harmonised version of back translation (MYMOP - Backward3).

Third, VC, LCH and another professional translator (T4) worked collaboratively and translated MYMOP - Backward3 into Chinese (MYMOP - Forward4).

Pilot testing of the translated version the semantic and conceptual equivalence between original MYMOP and MYMOP - Forward4 was evaluated by an expert panel consisting of 15 healthcare professionals with diverse backgrounds. One to one cognitive debriefing interview were conducted amongst panel members and their comments on each item were noted. VC, LCH and SW analysed these qualitative comments and performed amendments to the items. Feedback about the changes were then sought from all expert panel members, and a new consensus-based version was generated (MYMOP - Forward5).

Finally, MYMOP - Forward5 was piloted in 28 patients who had experience in using allopathic medicine as well as CM. Each patient was invited to complete the questionnaire and was interviewed about the meaning of each item following a cognitive debriefing approach. Findings from the patient pilot were analysed by the authors and a final Chinese version was produced (CMYMOP). Besides MYMOP, our translation and pilot testing process also included the Chinese adaptation of a question on patient perceived global change, which was used in the original MYMOP validation (How would you rate your condition now compared to the last time you measure it?: Much better/A little better/About the same/A little worse/Much worse) [8]. In this study, this question is used as an anchor question for estimating minimal important difference of CMYMOP scorings.”