

Meaningful Measures Ltd Translation Agreement For MYCaW[®] and MYMOP[®]

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 (Appendix B) 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 Previous translations that do not adhere to the protocol below are no longer valid as of January 2021.

Translations for MYCaW[®] and MYMOP[®] must adhere to the protocol in Appendix B. Anyone partnering to create a new translation will receive an ongoing free licence for MYMOP[®] and MYCaW[®]. Once the translation agreement (Appendix A) is confirmed by both parties, the process must be completed within 6 months. After this time, if the translation is not complete, the MYMOP[®] and/or MYCaW[®] licence can be cancelled or can be retained for the usual licence fee. Translated versions of the tools will remain the intellectual property of Meaningful Measures Ltd.

Translation of the whole document (Measure Yourself tool and guidelines) is required. The Measure Yourself tool needs forwards and backwards translation in full (as per Appendix B), but the guidelines only need a simple single translation into your chosen language. The formatting, front and layout of the document must be kept the same as the original version.

Please ensure you read the protocol and the sample translation from English to Chinese (Appendix B & C) prior to sending us your translation agreement.

Appendix A

Translation Agreement Form

I wish to create a new translation of MYCaW/ MYMOP/both tools (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, as this company owns the copyright for the original tools.

Signed.....

Date

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

Appendix B

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. Complete the translation agreement form (above)
2. Receive licence from Meaningful Measures Ltd and agreement to proceed with translation
3. Person 1 (native speaker in required language) creates translation from English to required language
4. Person 2 (native speaker in required language) creates translation from English to required language
5. Persons 1 and 2 agree on new translation version by resolving and discrepancies and generating “newly translated version”
6. Person 3 (native speaker in English and naïve to original English version of tool) to back translate newly translated version to English
7. Person 4 (native speaker in English and naïve to original English version of tool) to back translate newly translated version to English
8. Persons 3 and 4 agree on back translated version by resolving and discrepancies and generate “back translated version” to show to review panel
9. Send newly translated version and back translated version to Meaningful Measures review panel to check quality of the newly created tool and agree that it is a viable translated tool to use
10. Final translation produced and ready to use. Note, this translation is the intellectual property of Meaningful Measures, as the copyright of the tool is owned by this company.

Appendix C

Example of how MYMOP® was translated to Chinese

Taken from: Chung VC, Wong VC, Lau CH, Hui H, Lam TH, Zhong LX, Wong SY, Griffiths SM. 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.)

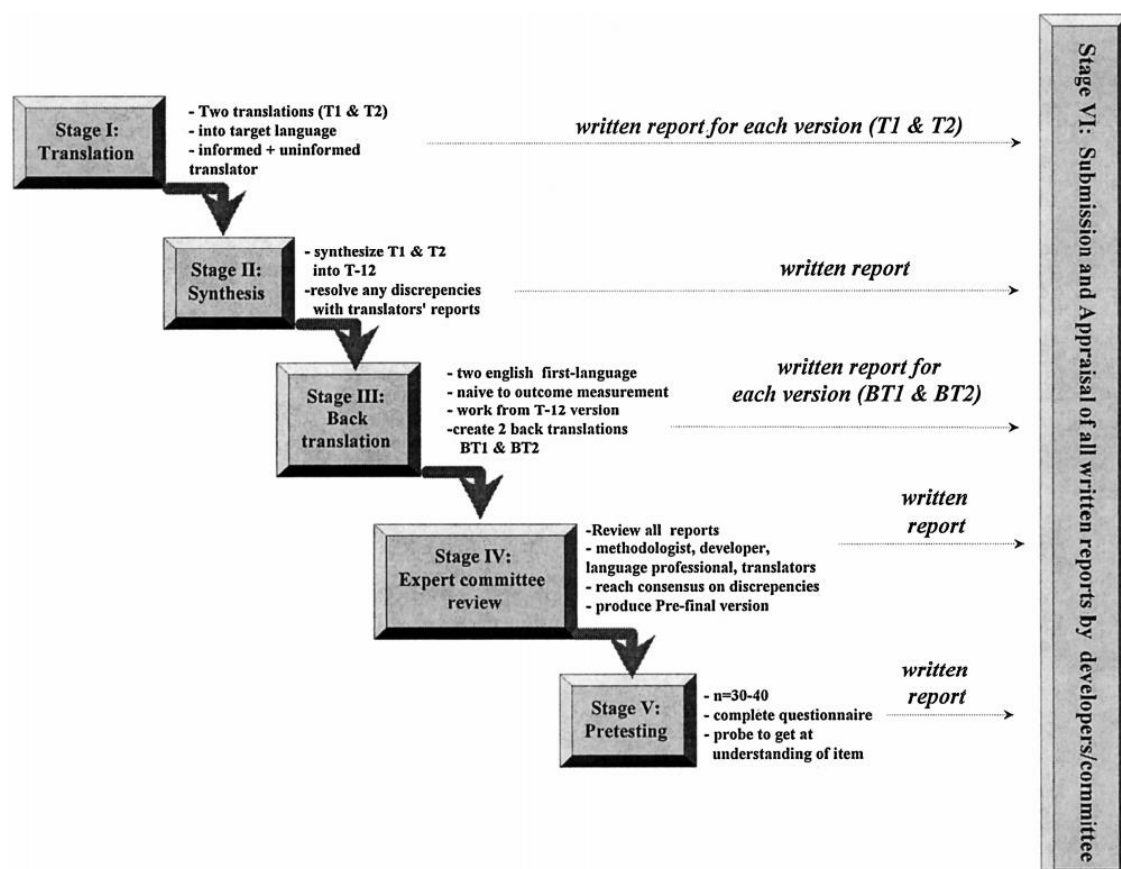


Figure 1. Graphic representation of the stages of cross-cultural adaptation recommended – taken from Beaton et al. (2000)

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.