

Translation and back translation of Self-Care Instruments

5 steps:

1. Use the English version as the basis of your translation.
2. Recruit 2 translators for the forward translation: English to 'new language'.
It is generally recommended that the forward translators should have the 'new language' as their mother tongue. It is recommended that one translator has expertise in the topic (e.g., nurse, health care professional), and the second one is a language expert, but naive about illness self-care. The translators should work independently from each other and be instructed to stay close to the English version.

So, in step 2 you make two 'new Language' versions (1 per translator).

3. In this step you combine the 2 'new language' versions into one. Discuss possible differences and use the words that are closest to the original English version meaning.
4. Recruit 2 new translators for the backward translation: 'New language' (from step 3) to English. The back translators should have English as their mother tongue. They should be blinded to the original version of the questionnaire. It is recommended that the back translators are both language experts and naive to the constructs being measured. The back translators should work independently of each other.

So, in step 4 you make two English versions (1 per translator).

5. Combine the 2 English versions from step 4 into one. Discuss possible differences and make a final 'back-translated English' version. Send that version to person you originally communicated with (e.g., Barbara Riegel, Tiny Jaarsma, Anna Strömberg, Ercole Vellone, Vicky Dickson) for a final check.
6. **Do not begin testing your translation with patients until one of us has approved your backward translation.** This is important because there are often minor issues that need to be corrected in the translation.