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**Conclusions.** The overall balance of demand and control was similar in South Asians and Europeans, though South Asians tended to be in jobs characterised by low skill and high decision latitude. These findings do not support the suggestion that increased work strain explains the risk of CHD in UK South Asians.

**What changes are migrant population introducing in the aids epidemiology in Barcelona from 1988 to 2003?**

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**Objective:** to describe the differential characteristics of AIDS in foreign migrants living in Barcelona, according to the diagnostic period.

**Methods.** Descriptive study of AIDS cases diagnosed in people older than 18 years old, living in Barcelona and included in the city aids register between 1–1–1988 and 30–11–2003. For the purpose of the analysis, three periods 1988–1993, 1994–1998 and 1999–2003 were compared, using Odds Ratios (OR) with confidence intervals (CI) at 95% for the selected variables. For the multivariate analysis a logistical regression model was used.

**Results.** From the 5716 AIDS cases included in the analysis, 6% were migrants. AIDS cases in migrants are increasing during the last years ( \( p < 0.0001 \) ), representing in 2003, 20% of all cases. When comparing the selected groups by the AIDS diagnostic period; the man’s ratio decreased similarly in migrants (91%-85%) and in Spanish (82%–77%). Younger than 30 years old patients have also increased in both groups; 12% to 16% in migrants and 13% to 24% in Spanish. Patients with a prison history decreased in Spanish from 28% to 13% and remained stable in migrants, 15% to 14%. Heterosexual transmission increased in both groups. During 1999–2003, tuberculosis as AIDS diagnostic has slightly increased in migrants.

**Conclusions.** AIDS cases in migrants are proportionally increasing in Barcelona. This situation, probably reflects the dramatic increase of the foreign migrant population living in our country since 1999. Migrant patients use to be younger than Spanish, they use to live more frequently in the inner city, and their transmission pattern is mainly sexual.

**Involving monolingual lay people in improving cross-cultural validity of questionnaires: easier said than done!**

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**Introduction.** For accurate data in multi-ethnic health research, translated questionnaires must be cross-culturally comparable. Existing translation methods, using only bilingual translators, are often inadequate. State-of-the-art methodology recommends that monolingual lay people are involved in improving the cross-cultural validity of questionnaires.

**Methods.** Interviews were carried out with Punjabi speakers (n = 26), Cantonese speakers (n = 29) and European-origin English speakers (n = 25) in Edinburgh. Bilingual project workers interviewed participants in their own language and provided translation and commentary to the English-speaking researcher. To assess cultural and linguistic appropriateness of the Rose Angina Questionnaire, participants were asked about their general and cardiovascular health beliefs and behaviours and their attitudes to pain, and commented on their understanding of Rose Angina Questionnaire items.

**Results.** These methods revealed a lack of cross-cultural equivalence in the questionnaire due to translation errors. However, there were several methodological challenges involved with the process. First, recruiting ethnic minority participants via written contact from their doctor yielded a low response rate. Recruitment by project workers via community contacts was more successful. Second, the process of lay assessment of the questionnaire was difficult. Participants tended to answer a question directly, rather than comment on their understanding of the translation and its acceptability. Third, quality control of interview data, generated by project workers in languages not spoken by the researcher, was problematic. Fourth, standardised administration of oral questionnaire items may be difficult to establish. For example, the written Chinese script must be spot-translated by the interviewer into oral Cantonese. In addition, project workers indicated that verbal questionnaire administration might be more discursive in practice than epidemiological rigour would demand.

**Conclusion:** Involving monolingual lay participants in questionnaire improvement is time and resource intensive and very challenging. This work provides generalisable insights for the growing research effort in Europe to meet the health needs of migrant populations.

**Levels of physical activity among South Asians: a literature review**

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