

## Example of Health Research Collaboration: the Translation of a Symptom Score into Samoan

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To ensure high quality health data, standardized health screening tools are used for many different kinds of health conditions. However many of these tools are in English and rely on self-reported signs and symptom information. This limits the ability of countries where English is not used in everyday communication, such as Samoa to gather comparable data that is considered valid within the academic and professional communities. Direct translation is not always an easy way to deal with the problems of meaning, as Samoan is a contextual language, with nuances affecting the interpretation of questions and thus the responses. This paper described the experiences of a collaborative team from the UK and Samoa who translated one such tool from English to Samoan; the Pelvic Organ Prolapse Symptom Score.

Data on the prevalence of Pelvic Organ Prolapse in the Pacific Region (including Samoa) is sorely lacking, with the majority of studies on the prevalence of this condition coming from the Global North. Pelvic Organ Prolapse is characterized by the dislocation of the pelvic organs, including the uterus, bladder, rectum or small intestine, which protrude into or descend outside the vagina. The condition is common, affecting an estimated 40% of women in the Western World aged 50 and above (Hendrix et al. 2002). The prevalence in developing countries, from 30 studies, is an average of 19.7% (3.4-56.4%) and none of these studies was performed in Pacific Islands Countries (Walker and Gunasekera 2011). Given the high prevalence of the risk factors in Samoa such as multiple parity (World Bank, 2020) and obesity (Samoa Bureau of Statistics 2020), and the potentially deleterious effects on women with the condition, it is important to determine the baseline prevalence.

This goal brought together researchers from the University of Stirling and Glasgow Caledonia University in the United Kingdom (UK) and the National University of Samoa (School of Nursing and Centre

for Samoan Studies) using funding from the Global Challenges Research Fund (confirm) to translate and pilot the Pelvic Organ Prolapse Symptom Score (POP-SS) with Samoan women in 2020. Ethical approval for the piloting of the translated tool was received from the National University of Samoa Research and Ethics Committee (UREC) and Glasgow Caledonia University Ethics Committee.

The POP-SS is a simple seven question instrument which gathers information on the key symptoms of pelvic organ prolapse using a Likert scale. It was developed by Hagen and colleagues and has been shown through several studies to have good internal consistency, construct validity and sensitivity to change, with global uptake (Hagen et al. 2009, 2010, 2021).

The translation process involved two teams of bilingual Samoan English speakers from the School of Nursing and the Centre for Samoan Studies and followed a recognized translation approach comprised of a two-step sequence of forward then backward translation (Youssef et al. 2020) of the POP-SS from English to Samoan then Samoan to English. The teams with the UK colleagues met at the end of each sequence to discuss any areas of ambiguity. The finalized translation along with several other demographic questions was piloted via interview and Think aloud method with thirteen female volunteers employed at the National University of Samoa, who were recruited using a snowball sampling approach. Through the pilot testing, a few minor issues were identified in the translation and these have been addressed and a final version agreed upon. The next stages are the validation of the tool and the utilization of the POP-SS in clinical research. The interviewers found that many participants had low knowledge of the reproductive system and could benefit from further education in this area. Sexual and reproductive health education which has been identified as an area in need of improvement (Samoa Bureau of Statistics and UNFPA 2020), an issue challenged by the strongly held religious beliefs in the population of which the significant majority belong to one of the four Christian churches (Samoa Bureau of Statistics 2017) and sociocultural norms such as “va tapuia” or sacred space that preclude the discussion of sensitive topics between males and females, related persons, or persons who hold different hierarchal roles.

Participants in the survey shared enthusiasm for the research especially as conducted in the Samoan language and a desire to seek care for their concerns raised. Quotes from the participants included

*“I believe our English is not good, but it is not our language. Therefore, I thank you very much that you were able to translate this into our Samoan language which made it easier for us to participate in programs such as this especially people like me that have poor English but I am still able to participate and answer these questions that has been already translated into our own language and are very clear as I read them.” (MA04A)*

*“This program is very important that I know that should be on the alert at any time since I am not taking these seriously since I don’t have any symptoms at this time or am not having any problems nowadays. Yea, now I have read these it is important to take these into considerations. If ever I feel that there is a problem or new changes such as pain, then it is important to go immediately to the hospital to see a doctor or as soon as possible.” (MA11A)*

The delivery schedule for the project was affected by the COVID-19 lockdown which limited communication with one member of a translation team. This led to the replacement with another

interested faculty member after delay of approximately three weeks. Communication with wider team members in Samoa was also affected during the lockdown as many worked from home. However as the majority of the translation stage was able to be completed remotely with meetings being held via Zoom, the project was able to proceed with minor delays.

For faculty involved at the National University of Samoa (School of Nursing and Centre for Samoan Studies) there were numerous tangible benefits of the collaboration including the presentations at local and international research forums, the development of skills in the Think Aloud method (Eccles and Aarsal 2017), internal networking/external networking and collaboration, development of skills in translation processes, coding and academic writing with the mentorship and support of their UK Counterparts. Pelvic Organ Prolapse is a culturally sensitive topic as it involves the reproductive system and the School of Nursing and Centre for Samoan Studies' faculty involved discovered this project provided an opportunity to negotiate the delicate balance between the directness and subtlety of translation needed to convey information in an acceptable/non offensive way. The future benefits include the application of the tool to further research in the country to gather baseline prevalence of the prolapse condition and to examine the effectiveness of different interventions to improve the quality of life for women with the condition.

The intangible benefits of this collaboration deserve noting as this collaboration while small in its inception, has yielded a strong working team that looks to future work with great enthusiasm. In the literature the imbalance of power, information and accolade in collaboration between global north and global south research endeavors is often documented (Mweemba et al. (2019; Smith et al. 2014; Walsh et al. 2016). The only words that appropriately describe the working relationship between the UK and Samoan researchers are kind and respectful. While kind is a simple word, it encompasses the approach taken by our UK colleagues throughout the process, this included listening patiently to discussions on the subtlety of translations, understanding and assuaging concerns of delays, involving and acknowledging the contribution of the Samoan team in each stage of the research process. And for what might seem miniscule, the time difference of 12 to 14 hours meant the scheduling of meetings at times that worked with the schedule of the NUS researchers was appreciated.

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