Translation, cultural adaptation and validation of the Alcohol, Alcoholism and Alcoholic Attitudes Scale (EAFAA) – American English version

Divane de Vargas
BSN, MSN, Ph.D

Madeline Naegle
PhD, PMHCNS-BC, FAAN

University of São Paulo-School of Nursing
New York University- College of Nursing

Brazil covers approximately half of South America and has 200 million inhabitants. Has borders with all South America Countries except Chile and Ecuador.

- Nursing care delivery to patients with alcohol related problems had been documented in the literature as challenging and influenced by the provider’s beliefs in the moral model of alcoholism. (Howard & Chung, 2000)

- The association between negative attitudes and insufficient knowledge about alcohol, alcoholism and associated problems has also been described by researcher. (Rassool & Luis, 2004; Kelleher & Cotter, 2008, Tran et al, 2009)

- One strategy to address this phenomenon is to identify nurses and nursing students’ attitudes toward alcohol and associated problems.

- There are few valid and reliable tools available to detect these attitudes and this is of concern to researchers.

The three most commonly used scales to identify nurses’ attitudes currently are:
- The Marcus Alcoholism Questionnaire (Marcus, 1980)
- The Seaman Mannello Nurses’ Attitudes Towards Alcohol and Alcoholism Scale (Seamam & Mannello, 1978)
- Tolor-Tamerin Attitude Towards Alcoholism Scale (Tolor & Tamerin, 1975)

(Vargas, 2005)
The available instruments have several limitations.

- They present certain similarities in common. In particular, they contain items on various beliefs and perceptions about alcoholism and its causes, such as moral, psychological, social and biological factors.
- Overlap in the attitudes and beliefs measured are evident in all scales.
- There are no studies exploring psychometric properties of the scales.
- The original Tolor & Tamerin and Marcus questionnaire scales have never been published in totality.

(Pillon, Laranjeira & Dunn, 2005)

Reliability and validity of these three scales to measure attitudes, therefore, are open to question.

The Short Alcohol and Alcohol Problems Perception Questionnaire (SAAPPQ) has been most recently used in many settings and populations to measure attitudes toward drinkers.

(Anderon & Clemente, 1987)

The psychometric properties of the SAAPPQ are available in several studies.

(Cartwright, 1980; Anderson & Clemente, 1987; Gorman & Cartwright, 1991)

A limitation of the SAAPPQ is its primary use with physicians, possibly contributing bias.

Although the SAAPPQ has been considered a reliable tool to measure therapeutic attitudes toward drinkers, several questions can be raised about its precision, properties and applicability to nurses and nursing students.

Overlap in subscales.

Lack of applicability to therapeutic attitudes of hospital and specialized alcohol and drugs service-based professionals.

These limitations highlight the need to measure attitudes about all elements of patient care management and instruments which can measure all dimensions of attitudes.

The cited limitations of existing instruments speak to the need for a new attitude scale in English on alcohol and associated issues.

The objectives of this study therefore, are to translate, culturally adapt and validate an instrument developed and validated in Brazil, with Portuguese and Spanish speaking nurses and nursing students with nurses and nursing students who speak American English.
The validations (content and construct) was obtained in a preliminary test with 300 nurses and nursing students, resulting in a scale consisting of 84 items, divided into 5 factors. (Vargas, 2008, 2011)

Recently the EAFAA was completed by 1025 health professionals (nurses, physicians, psychologists, occupational therapists, social workers) resulting in a scale composed of 50 items divided into 4 subscales, with reliability of 0.86.

S1): attitudes on work and interpersonal relations with alcoholic persons
S2) attitudes towards the alcoholic person;
S3) attitudes towards alcoholism (etiology);
S4) attitudes towards alcoholic beverage use. (Vargas, 2012).

1) Translation from Portuguese to English

✓ Result: Translation 1 (T1) and Translation 2 (T2).

2) Translations (T1 and T2) are discussed and compared.

✓ Result: synthesis of translations T1 and T2. All changes are documented.

3) Two other translators whose mother language is Portuguese make the translation, converting (English to Portuguese).

✓ the product of synthesis for the source language, creating BT1 and BT2.

4) Examination and evaluation of the process of adaptation, in order to confirm that all steps of the process have been met.

✓ The final product is a tool evaluated for content across two cultures.
5) The translated and back translated tool was submitted to new content analyses by a panel of North American content experts.

- A panel composed of five North American experts in the areas of addictions nursing and/or alcoholism analyzed the tool.
- As an expert panel, they were required to evaluate the items' representativeness, clarity and fit with the factors proposed.

The translated and back translated tool was submitted to new content analyses by a panel of North American content experts. A panel composed of five North American experts in the areas of addictions nursing and/or alcoholism analyzed the tool. As an expert panel, they were required to evaluate the items' representativeness, clarity and fit with the factors proposed.

For this task, the panel's members received a tool appropriate for this evaluation.

The expert panel was also requested to add or delete items, when they consider such additions or deletions necessary.

At the end, the judges' analyses were reviewed for content validity of the questionnaire. Indices of Content Validity (IVC) were calculated indicating the percentage of agreement among American experts panel, with a predetermined minimal level of IVC of 0.80. The result of this process was a scale consisting of 44 items, with an IVC ≥ 0.80.

The translated and back translated tool was submitted to new content analyses by a panel of North American content experts. A panel composed of five North American experts in the areas of addictions nursing and/or alcoholism analyzed the tool. As an expert panel, they were required to evaluate the items' representativeness, clarity and fit with the factors proposed.

For this task, the panel's members received a tool appropriate for this evaluation.

The expert panel was also requested to add or delete items, when they consider such additions or deletions necessary.

At the end, the judges' analyses were reviewed for content validity of the questionnaire. Indices of Content Validity (IVC) were calculated indicating the percentage of agreement among American experts panel, with a predetermined minimal level of IVC of 0.80. The result of this process was a scale consisting of 44 items, with an IVC ≥ 0.80.

Factor 5 – Competency (New)

5. I do not know how to lead the situation when I work with patients with alcohol use disorders.

10. I do not know how to lead the situation when I work with patients with alcohol use disorders.
7) After the content validation by American judges, the new tool was completed by 6 PhD students from the university where the study was taking place. 
✓ Result: Comprehensibility and semantic analysis of the English Version.

8) Pilot Test – Construct validity: The American Version tool was applied to a sample composed by xxx nurses and nursing students from the university where the study implemented.
✓ Result: The new tool's psychometric properties will be evaluated to affirm the integrity and fit of the English version of the instrument with the original instrument (construct validity).

Translation, cultural adaptation and Validation of American English version Steps (EUA)

9) Verification of psychometric properties
✓ Result: The instrument will be factor analyzed and the tool will be evaluated for reliability using the Cronbach’s alpha (Cronbach, 1951).

Translation, cultural adaptation and Validation of American English version Steps (EUA)

Sample Characteristics

The respondents were 206 nurses and nursing students
✓ The sample was composed of 111 (53%) 95 (47%) nursing students;
✓ A total of 66% were female and 34% were male participants ranged in age from 17 years old and 58 years old - Mean 29,3 Yo

Thank you!
Obrigado!
Muchas gracias!
vargas@usp.br
man1@nyu.edu