Summary

The purpose of the cognitive interview was to assess the relevance of the Spanish translation of the RAND SF-36 v1 instrument through its application to a Spanish speaking population in Los Angeles County. The questionnaire was used for the survey and cognitive interview. A total of 5 cognitive interviews were conducted with 3 women and 2 men. Respondents represented different countries of origin, which included one from Mexico, one from El Salvador, one from Guatemala, one from Bolivia and one from Peru. However these respondents have been living in the U.S. anywhere from 3 to 23 years (one respondent was born in the US). All respondents have been living in the Los Angeles area and their ages ranged between 23 and 43 years with the mean at 30.6 years and the median at 27. Respondents also mentioned that despite having lived in the U.S. for some time, they primarily spoke Spanish both inside and outside their home. Respondents had completed different levels of education ranging from 8th grade education to postgraduate studies.

The RAND SF-36 questionnaire for Health Related Quality of Life version 1 in US Spanish was used in the survey and cognitive interview. This version dated from 1999 was reformatted to provide with a more consistent visual presentation. The contents were maintained as well as all the wording contained therein. Minor grammatical corrections like accents, spacing and the like were made. Demographic information was also included such as age, gender, educational level and marital status. Except for one respondent, all completed the survey without any problems, although a few had some issues with a few of the questions. In these cases, respondents were not sure as to what the question was asking which is why they requested further clarification. It was noted that the one respondent with the least number of years of formal education had the greatest difficulty and took the longest completing the survey as well as the cognitive interview (123 minutes).

The method used for the cognitive interview was retrospective probing hoping to maintain a normal flow of responses by the initial completion of the questionnaire and then proceeding to the cognitive interview immediately after their completion. Although respondents might have asked the interviewer for further clarification during the process, the interviewer avoided any possible interaction during their response process. As the time to complete the questionnaire was not significant, recall error was minimized. Except for one case, where it took the respondent longer than usual to answer the questionnaire (47 minutes) the gap between completing the survey and responding to items was generally minimal (10 minutes).

The Spanish translation of the instrument seemed extremely pertinent for the representative group of Spanish speakers interviewed, although some issues were raised during the cognitive interview. These are explained in further detail in the following paragraphs.

Instructions

While applying the questionnaire, 3 of the 5 respondents were confused regarding the example presented in the instructions section. This is because in Spanish the question “¿Has estado Ud. alguna vez en la luna?” has both a literal meaning (“have you ever been to the moon”) and also an alternative meaning (which many understand as “have you ever been daydreaming?”) thus causing certain confusion. In this case the interviewer clarified the instructions to avoid further confusions or systematic respondent biases further on in the questionnaire.

Question 1

All respondents replied “very good” or “good” to this question and most of them mentioned that they had not put “excellent” as their health could always be better for they had suffered some mild sicknesses in the past. When asked whether they had considered mental or emotional health in their response, all respondents mentioned that they had only considered physical health and well being when responding this question.

Question 2b

Of the 5 respondents only 1 has ever played golf or bowled. All of the respondents play other sports such as soccer (men) and volleyball (women). In this regard, bowling or golf do not necessarily represent sports played by Spanish speakers in the area. When questioned further, 3 of the 5 respondents said that they thought of these sports as generally required more time and expense and those they would rather play other neighborhood sports.
Although variable, all respondents understood "un tramo" as a flight of stairs going up one or two floors. In this regard no significant variability was perceived by the interviewer.

**Question 2g**

When respondents were asked about the time it takes them to walk a mile, it was evident that a mile was not spatially clear to all the respondents. The varying responses were from 5 to 30 minutes with the mean being 13 minutes. In one case a respondent said it would take 10 minutes running. Therefore, clarity was lacking when it came to estimating the length of a mile for some respondents. What is interpreted as a mile in some of the cases is not clear enough.

**Questions 4-5**

Emotional problems were understood by respondents as related to depression and sadness. Most respondents mentioned that emotional problems led them to inactivity, lethargy and sleep. When asked if emotional problems could lead to physical problems, respondents answered yes in 4 out of the 5 cases. In addition, all respondents said that the word "problem" had a negative connotation, signifying that any emotional problem would only be interpreted negatively. Emotional is mostly related to the heart and mind (mente) but not necessarily to any other mental health disorders. Three out of the five respondents also thought that the physical should be treated prior to the emotional.

**Question 6**

When asked about pain, all respondents associated the question to minor episodes of pain in the stomach, leg or head. If they had had a cold or any other disease, they did not consider such as being pain but a disease in itself, clearly disassociating it with the type of pain generated by such sickness/disease. In addition, one of the participants mentioned having had an appendectomy in December and much of the pain he felt in the last four weeks was post-operation pain which he did not consider should be included.

**Question 10a**

Respondents interpreted "lleno de fuerza" as having the strength to do anything they please, giving them the necessary stamina to perform their normal activities. All of them mentioned that being full of strength was associated with having the desire and will to do everything they needed and wanted to do in the span of a day or days. When asked about the emotional aspects of being full of strength, only one respondent associated strength to a positive mindset and a good mood while the others only associated it with physical strength.

**Question 10c**

All respondents interpreted being depressed as a negative condition that did not allow them to do anything. They acknowledged the fact that when they feel this way, they cannot achieve anything and feel tired and worried. Three of the five respondents said that they hadn't felt this way at any time over the last 4 weeks. When asked if they could remember the activities during these four weeks, only one of them had a clear recollection of what he had done while the others just mentioned not having had this condition. The other two respondents had experienced this condition at some point over the last four weeks, albeit on a few occasions, which they explained was due to family and work problems but did not associate it with any health concerns.

**Question 10d**

Being calm at peace was interpreted by all respondents as something positive which they would like to achieve always (4 of 5 respondents). All the respondents interpreted this condition as not having any problems of any kind, such as monetary, health, etc. Three of the five respondents also interpreted this condition as a happy one, where nothing could affect them negatively or sadden their condition. In addition, 4 of the 5 respondents mentioned that when they are in this condition their energy levels are generally high and they are able to achieve whatever it is they put their mind to. When asked about the relation of their physical health with being calm at peace, 3 of the 5 saw no direct relationship, while the other two mentioned that in this state one generally feels healthy.

**Question 10e**

All respondents associated a high level of energy with happiness. Their replies included being happy and being able to achieve the things they set their minds to. Only two respondents replied that energy had to do with levels of stamina and being able to work long periods of time without getting tired. Four out of the five respondents mentioned that a high level of energy is directly related to good physical health.
Question 12
Three of the five respondents mentioned that their health was the same as last years’ and the other two felt it was better. Four of the five respondents thought of only December 2008 as last year (and not any months preceding that), while only one respondent thought of the whole year (2008) when responding that question. Interestingly when asked about sicknesses in the last year, a couple of them remembered serious conditions which kept them away from work for more than 7 and 11 days respectively. Although they considered changing their answer, they did not do so, as one of them mentioned that this year is just beginning while the other one said that these conditions were recurrent to him every year. When asked again if they considered mental health in the response, only one replied in the affirmative.

Demographic questions
- Only one respondent thought that it was necessary to include additional categories when completing information regarding gender/sex to include transgender.
- One respondent asked whether a Masters program is a university program or a postgraduate program.
- Two respondents thought it necessary to include a category where they were living together but were not married (same sex as well as male and female). In this regard when asked about the category “union libre” they did not really understand what it meant.
- And three out of five though that a better word to use was “fecha”(date) instead of “dia”(day) when asking today’s day, although the boxes below help understand the expected answer and the desired format.

Completion of the questionnaire required from 10 to 47 minutes with a mean of 20.6 minutes. The total minutes required to go through the cognitive interview with the respondents took from 33 to 76 minutes with a mean of 46.2 minutes and a median of 41 minutes. All the respondents mentioned having understood the questionnaire, except for one, who though that most of the questions were confusing. It was noted that this same person had only obtained a high school level of education and his reading comprehension seemed somewhat slower that the rest.

Recommendations
In general, the US Spanish translation of the SF.36 v 1 questionnaire seems to be adequate although some issues raised during the cognitive interview by respondents should be further analyzed. In this regard, a number of recommendations can be made to be able to better obtain pertinent answers to the questions posed.
- For the instructions and the example given, consideration should be given to the use of a different example that may avoid any other interpretation and help focus the respondents on the way to respond to questions. In this regard, a different example with a single and absolute definition should be sought.
- As general well being can include mental health, the first assessment question should include some word that will help respondents include general mental/emotional well being in their response.
- As golf and bowling are not common sports played by Spanish speakers in the area, further assessments should shed light on the need to use different sports for different minority populations, which in this specific case would be Spanish speaking residents in Los Angeles.
- Being that a mile is not easily quantified by everyone or mentally imaginable, a different relation can be used to assess that length, such as a number of blocks or some other reference parameter. This will give people a better idea on the true length and assess the possibility of its completion on that basis.
- The recall period should be adapted to the time the questionnaire will be administered. For example in this case the questionnaire was assessed in January/February so when recalling back to last year, most of the respondents thought of December 2008. Therefore maybe a shorter recall period could be tested or the use of certain seasons or times of the year could be implied to help better relate comparisons to the previous year.
- There is an overall impression from these respondents that physical health takes precedence over mental/emotional/spiritual health when it comes to the presence/absence of disease. This is probably accounted for in the SF-36 instrument but is mentioned here so that future studies on this instrument for Spanish speakers be consistent with the responses obtained.
- In general, the expressions “full of strength”, “depressed”, “calm/at peace” and “high level of energy” were consistent with their interpretation in English. Although some Spanish speakers do not see a relation between emotional and physical well being, they are consistent in understanding that they both lead to health.
- “Union libre” might not be a common denominator of the diverse Spanish speaking populations in Los Angeles. A different word or an explanation can be further assessed to be included in the questionnaire when applied to Spanish speakers in the Los Angeles area.
Formatting considerations should be made regarding this version of the questionnaire to help it visual presentation and adaptability to Spanish speaking populations in the US.

While these recommendations are quite straightforward and should be further assessed, they might help in making the questionnaire more pertinent to the diverse Spanish speaking populations in Los Angeles. Although a version 2 exists of the Spanish translation of the questionnaire and is currently in use, this version was used for a class assignment with a clear intent and purpose. However, official permission was not obtained from RAND for the use and formatting of this questionnaire (version 1), but approval was obtained from Dr. Ronald Hays (our professor) to be able to carry out the exercise in the hopes of being better prepared in our research capacities.

Note: This is a little larger than desired - I didn't see pages in the bound version (maximum is what I want).