

# **CHIS Cultural Modification of Survey Questions: A**

## **Summary Report**

Anne Hafner

Jamal Abedi

Fereshteh Hejri

Advance Research & Data Analyses Center

August, 2000

# LANGUAGE AND CULTURAL REVIEW REPORT AUGUST 2000

## Outline

- I. Introduction and Overview of Process
- II. Language and Cultural Reviewers
- III. Cultural Review Package
- IV. Language Review Package
- V. Summary of Detailed Comments by Area for Three Questionnaires
- VI. Linguistic and Cultural Adaptation Recommendations May 2000  
(Appendices D, E, and F)
- VII. Summary of Recommendations

### **Appendices:**

- Appendix A: Meeting minutes
- Appendix B: Letter to UCLA CHIS staff
- Appendix C Cultural Review Package: Directions, Scoring Guide
- Appendix D: Language Review Package
- Appendix E: Adult Core V. 2.1 Recommendations
- Appendix F. Adolescent V.3.0 Recommendations
- Appendix G. Child V. 3.1 Recommendations

## **I. Introduction and Overview of Process**

Due to the importance and sensitive nature of the CHIS data, the survey tools needed to be examined carefully to remove any unnecessary linguistic complexity and any cultural biases. The survey instruments should, of course, maintain their conceptual and technical quality. Thus, CHIS began a language and cultural review and adaptation process to come up with clear and unbiased instruments. Following is the summary of the process and the recommendations that arose from it.

### **Cultural Review Process**

First, a Cultural Review Advisory Committee (CRAC) was formed. The CRAC consists of the project director, senior researcher, linguistic expert, research methodologist and faculty consultants. Next, a Language Review Team (CRT) was formed. CRT members were selected from the pool of national experts. These individuals were contacted and invited to either come to ARDAC or review on site.

A package of materials for cultural reviewers was prepared. Reviewers were sent training materials. The package included: (1) a cultural review rubric which has been developed by Abedi and Lord (1999) and uses a five-point Likert scale to review and rate different features of cultural bias, (2) a short description of cultural factors, and (3) the actual questionnaire items to be reviewed.

All items in the questionnaires were reviewed by at least 2 reviewers. The reviewer first rated each item on a 5-point Likert scale from 1 (least complex) to 5 (most complex) on each of the factors. See Appendix D for a description of the features. Lastly, we discussed the results of the language review in the Cultural Review Advisory Committee meeting and made the final decisions on the wording of the questions.

### **Cultural Review Process**

The cultural review process was similar to the process discussed for language review. The main difference will be the item review team. Reviewers were selected from the ARDAC list of experts in cultural sensitivity of instruments. A package of materials was prepared for the cultural reviewers, and a cultural review scoring guide or rubric was included in the package. A group of at least 12 Cultural Bias Reviewers from a list of expert nationwide was contacted.

The reviewers reviewed individual questions in the three survey instruments: (1) the adult core questionnaire; (2) the adolescent core questionnaire; and (3) the child core questionnaire. Each of the three instruments was reviewed by at least two reviewers. Due to logistical issues (for example, time constraints), bringing the reviewers in ARDAC was not possible, thus reviews will be performed at the reviewer's site. A package of materials was prepared and express mailed to the reviewers. The package contained the review instructions (a hard copy), and a floppy disk which contains the electronic versions of the instruction and instruments.

Reviewers reviewed the questions, identified the culturally biased items based on the instruction, wrote their proposed changes and sent the materials back within the specified time period. After the review materials were returned, the review supervisory group (like the Language Review Advisory Committee) read

reviewers' suggestions and made the final decisions for recommendations on modifying the questions. A meeting was held at ARDAC on April 30, 2000 to discuss comments received from reviewers. 12 reviews were discussed. (see Appendix A for meeting minutes)

The remaining reviewers' comments were discussed and incorporated. On May 5, 2000, Anne Hafner, Project Director mailed a cover letter to the CHIS group at UCLA, attaching recommendations for the cultural and linguistic enhancements for the three surveys (see Appendix B) .

### **Cultural Reviewers**

The cultural reviewers included at least two reviewers in each group. Reviewers are listed below by language or cultural group. Their vitae are attached to the report. Detailed comments were received from Chris Jenkins.

Chinese: Frank Kwan and Phina Li

Vietnamese: Chris Jenkins, Phu Vien Nguyen, Lan Thi Le

Cambodian: Saroan Miller, Lily Phaymany

Korean: Deborah Oh, Yoo Chull

African American: Michael Batie, Maurice Simpson

American Indian: Delight Satter, Gerry Raining Bird

Mexican American: Myrna Diaz, Sharon Ulanoff

### **III. Cultural Review Package**

The Cultural Review package included a cover letter to reviewers describing the cultural review process, directions for scoring the items on the sheets, a generalized item scoring guide, and details on the project and payment. Criteria used in rating items included degree of cultural bias, stereotypical language, word familiarity and appropriateness, and cultural relevance. (see Appendix C for the entire package).

## V. Summary of Detailed Comments by Topic Area for Three Questionnaires

### Cultural Review

Cultural reviewers' concerns centered around racial and ethnic differences and stereotypical language. Some of their concerns and suggestions dealt with plain/clear language issues.

Detailed summaries of comments and suggestions by topic area follow for the three questionnaires.

#### Adult Questionnaire

##### Introduction

One reviewer (alan k) suggested adding the following to the introduction: "Your individual information will NOT be shared with the IRS, INS, law enforcement or insurance companies".

This was a common concern.

##### Race/Ethnicity

A5A: RE: multi-racial category, change response to "choose all that apply".

A5f: Add "mixed race" to options

##### Health Status

B1: Recommend change wording to make clear we are talking about physical and mental health. Qu. B1 changed to "would you say your physical health is..."

##### Injury/Violence

C8: Two reviewers wanted to explain "formal training" in using guns. They recommended adding "for example, a class".

##### Womens' Health

D1-D3: Reviewers suggested that this section needed a short introduction to ease people into it.

D1: Reviewers suggested adding for American Indian respondents "or yo

D32: Add Refused/don't know to options

##### Diet:

E7: Reviewers suggested deleting "white" in potato question, as they felt it should be any potato

E8: Some reviewers suggested adding "sweetened bean" to options for cultural appropriateness for Asian cultures

### Physical Activities;

E34-E37: Recommend change “10 minutes” to “20 minutes”

### Cancer History:

Reviewers noted that the section on cancer needed a brief introduction. For example: “These question are asked to protect future generations of Californians from cancer.”

F12: Reviewers said this is very sensitive, especially with the word cancer in it. Suggest reworking “Have you ever had a sigmoidoscopy, colonoscopy or proctoscopy done by a doctor looking for health problems in your colon?”

### Access/Utilization

H3, H3a : American Indian reviewers suggested adding “Indian Health Services ,. Urban Indian Clinic, Tribal Program to list.

H5: What type of health professional do you usually see: Asian reviewers were concerned as the list did not include some important options. Recommend delete curandero (duplicative), and herbalist, herbal healer. Recommend include spiritualist and healer as separate choices.

H8: Add “Indian health services, Urban Indian clinic, tribal program

H8b: Delete second “don’t know” and “refused”

H10, Same recommendation as H5.

H11b and H12b: Reasons for delaying getting medicine. Reviewers wanted to recommend changing first options to “cost too much, too expensive” Reviewers suggested adding “sought alternative medicine” and “sought second opinions”. Reviewers suggested deleting “lazy” as being stereotypical.

H14: Reviewers suggested deleting ”such as Mexico or

H14a: Change what to “was”.

H15: Recommend delete reference to going to Mexico, only include Yes, no, refused DK

Recommend add a new question: “If yes to H15, was that Mexico or another country?”

### Immigration Status

H32: Change wording to be more direct: “do you have a green card?”

H31-H34 series: Reviewers suggested revising the introduction for this section, for example, “your individual information will not be shared with the INS” Reviewers also suggested moving this series to the end of the questionnaire.

## Health Insurance

I5: Delete “obtained” from the question

I21b I 35b: Reviewers suggested removing (go to I22), as all people would go to that question  
Reviewers suggested adding “immigration/citizenship status” to the last option

## Mental Health

J1: Reviewers suggest adding, “social worker, counselor” to the list of mental health providers.

J2: Reviewers suggested deleting “blue”, uncommon word.

## Employment:

K4: Reviewers suggested adding “in total (include all jobs and businesses) to the end of the question

K15: Reviewers noted that “household” should be defined. (a household includes everyone who lives in your house).

K28a, K28b: Reviewers suggested adding “refused” to options

## Program Eligibility

L13, L14: Reviewers suggested putting child support before alimony

## Food Security

### Series Introduction

Reviewers suggested deleting “my final few questions and they are” as, they had recommended the green card questions go last.

## **Child Questionnaire**

### Health Status

A10: A majority of reviewers said to delete this question

### Injury/Violence

B3: Reviewers recommend changing option 9 to “insured by another person, intentionally” Option 8 should

C6: One reviewer felt we should explain choice: “sealant application”

### Access/Utilization

D4, D5, D8: Reviewers suggested adding: “tribal health center or clinic” to options

D8: Reviewers suggest deleting curandero, botanica as options. Make healer a separate option.

D9: Reviewers suggest adding “regular” before checkup

### Child Immunization

D11: Reviewers felt interviewers may need to explain “yellow card” to parents

D12 , D13: Reviewers suggest changing ”difficulties” to “problems”. Reword D15 to “What problems have

D14: Typo: change leave to least

D18: Reviewers suggest deleting “Mexico” from stem, stereotypical

E3, E6: Reviewers suggested deleting “lazy” . They suggest adding new options: “too expensive”, “tried alternative medicine” and “sought second medical opinion”

E7: Reviewers suggest adding “was a

E10: Suggest adding race/ethnicity to choices

E11a: Reviewers believe that AFDC and TANF may need definitions

E11b: Reviewers suggest adding “or food commodities”

E11c: Need to define WIC?

### Health Insurance

F18: Reviewers suggest adding “fear of INS” to options

F19b, F28b: Suggest adding “immigrant/citizenship status” to options

### Demographics

H4, H6: Reviewers suggest adding California tribes to list of options

H11: Suggest adding “American Indian language” to options

H12: Suggest changing “most” to mostly in first choice

H17: Suggest changing question to “how many years of school have you completed?”

## Adolescent Survey

### Introduction:

Reviewers recommended that the following be added: “Your individual information will NOT be shared with the IRS, INS, your parents, law enforcement or insurance companies”

### Specific Health Conditions

B6: Suggest adding mucus before phlegm

B10: Suggest changing “an actual written plan” to “written instructions”

B15: Suggest changing to “Do you take any medication for diabetes?”

### Injury/Violence/Guns

C12: Suggest adding “a friend” and “a friends’ parents” to options

### Mental Health:

D10: Suggest change “you felt fearful to “felt afraid”

### Health Behavior

E1: suggest adding (if necessary) This does not include fruit drinks like Kool Aid)

### Cancer/Sunscreen

E16: Suggest reword to avoid cultural bias; To explain SPF use “how often do you use a strong sunscreen (a sunscreen with an SPF of 15 or greater)>

### Sexual Behavior.

E22-E41: Add an introduction before this section, maybe “I want to remind you that all of your answers will

E33: Reviewers suggest adding “birth control or protection” before method

E34: Suggest adding “the first time you had sexual intercourse to the end of the question

E41: Suggest replacing “family planning counseling or service with “birth control counseling or service”

F2: Suggest adding “school clinic” to choices

### Access/Utilization

F5: Suggest changing response categories to “4-6 months ago, 7-12 months ago, and more than 12 months ago.”

### Parent Involvement

H6D Reviewers suggest replacing “your alcohol use” with “any alcohol use”; same word for tobacco use and sexual activity. Also, add to options, “I did not use an

### Race/ethnicity:

I1a: Delete option, Mexicano

I1b: Add “or Hispanic” after Latino

I2a, I2e: Add CA tribes to the list

I2e Add “mixed race” as an option

I4: Add American Indian language as an option

## **VI. Linguistic and Cultural Adaptation Recommendations May 2000 (Appendices D, E and F)**

Attached as appendices are the cultural and linguistic recommendations, combined.

## **VII. Summary of Recommendations**

Language review recommendations mainly dealt with language simplification or clarification issues (e.g. white potatoes, change of life)

Reviewers had more concerns and recommendations in the cultural review. Major areas of concern included racial/ethnic differences and stereotypical language or items. Some of the cultural reviewers had suggestions that were similar to those from the language reviewers.

One sensitive area was immigration status, thus, reviewers suggested putting this series of questions at the end of the survey. Other sensitive areas were mental health questions, womens' questions including those about menopause and mammograms, questions on cancer history and tests, questions about violence and guns in the house. Regarding access and utilization, reviewers recommended alternative treatment methods be provided as well as an expanded, more inclusive array of providers.

Some of the diet and health behavior questions were of concern to Asian reviewers because of unusual or unfamiliar food types.

Regarding the child survey, reviewers made similar suggestions as on the adult survey.

Regarding the adolescent survey, reviewers strongly felt that a caution should be added to the introduction that adolescents' information would not be shared with anyone. Again, reviewers suggested a short intro before the question about sexual behavior to prepare them. Reviewers also suggested changing several questions regarding parent knowledge of their behaviors from "your use" to "any use". Reviewers as well as focus trol or protection" to E33. and replacing "family planning counseling or services" with "birth control counseling or services">

Also, it was suggested to add "school clinics" to choices of where they could go for help.

The remainder of suggestions were similar to those made for the adult survey.

# Appendix A. Meeting Minutes

## MEETING MINUTES

Cultural Bias Review Team

Meeting, Saturday April 22, 2000

### **In Attendance:**

Abedi, Jamal  
Bayat, Noushin  
DiSogra, Charles  
Hafner, Anne  
Hejri, Fery  
Lord, Carol  
Oh, Deborah  
Vongpumivitch, Viphavee  
Zuniga, Stephen

The Cultural Bias Review Team met on Saturday April 22, 2000 to discuss the comments received from the cultural bias reviewers and make suggestions for adjustments based on the reviewers' comments/suggestions. From the 10 review packages that ARDAC sent out last week to the cultural bias reviewers, 6 were back. Reviewers rated each survey questions in each of the three instruments (Adult, Adolescent, and Child questionnaires) on a 4-point Likert-scale: (1) problematic, (2) weak, (3) adequate, and (4) exemplary. In addition to rating each question, reviewers provided suggestions for improving the wording of questions that were rated as "1" or "2". In this meeting, the adult questionnaire was discussed. Reviewers categorized most of the questions in the adult questionnaire as "exemplary" or "adequate". However, there were a few questions that were marked as "1" (problematic), or "2" (weak). Reviewers' suggestions for improving questions that were marked the suggestions from the participants and from the reviewers, problematic and weak questions were modified. The linguistically modified questions will be presented to the question writers by the CHIS team to make sure that linguistic modification did not change the content of the questions.

Hafner, Lord, Abedi, and Zuniga will work on the adolescent and child questionnaires next week and will provide suggestions and recommendations for cultural modifications of the questions. A report of this work will be submitted to the CHIS team by the end of next week.

As indicated earlier, of the 10 reviews, only 6 were received and were discussed. The Cultural Bias Review Team will review and discuss comments from the other four reviewers as soon as they receive them. A summary of those reviews will be submitted to CHIS team. Suggestions for additional changes by the new reviewers will be highlighted.

## Appendix B: Letter to UCLA CHIS Staff

May 5, 2000

CHIS Group  
UCLA

Dear Colleagues:

We are attaching the recommendations for cultural/linguistic enhancements for adult, child and adolescent surveys.

There are a few issues that need to be discussed by your group. First, we assume that someone in your group can answer questions in the modified item column (e.g. do we need to say asthma attack in B20). In some cases, a recommendation is made that a new introduction to a section be written. Will one of you be writing these?

Secondly, we assume that items with changes/recommendations involving minor edits, typos or including additional options for people to choose from (e.g. add "friend" to options) will not be sent to item writers for review, as they do not change the basic item. Any item that has been deleted, rewritten or changed in anyway should be reviewed by the appropriate person/persons.

Third, someone needs to go through the surveys and review/change/correct skip patterns, as there were several that appeared to be wrong. This could be done at a later date.

We would like comments back by early next week (May 9 or 10), so we can proceed with our schedule.

Thank you for your cooperation in this important task.

Sincerely,

Anne L. Hafner  
Project Director

## APPENDIX C CULTURAL REVIEW PACKAGE

*ARDAC*  
*Advance Research & Data Analyses Center*

April 21, 2000

Dear Colleagues:

The California Health Interview Survey (CHIS), a collaboration between the UCLA Center for Health Policy Research, the California Department of Health Services, and the Public Health Institute, is conducting a telephone interview survey on health issues such as public health and access to health care. There are three CHIS surveys: an adult questionnaire (73 pages), an adolescent questionnaire (37 pages) and a child questionnaire (20 pages).

Due to the importance and sensitive nature of the CHIS data, the survey tools must be examined carefully in order to remove any unnecessary linguistic complexity and any cultural biases. The survey instruments should, however, retain their conceptual and technical quality. We are inviting you to be a part of our team of survey reviewers. Your job as a cultural reviewer involves checking the survey questions for any cultural biases, irrelevance, stereotypical language and appropriateness. We are assuming the survey questions should be understandable at about the 8<sup>th</sup> grade level.

Please find enclosed a package that includes the three survey questionnaires (adult, adolescent, and child) and instructions for participating in the linguistic review. Please rate each question using the attached rating sheets on a scale from 1 to 4 as follows:

- [1] Problematic: Substantial amount of stereotype/bias. Question needs to be re-written.
- [2] Weak: Significant level of relevance/stereotype/bias exists. Modifications are needed.
- [3] Adequate: There might be minor stereotypes/bias problems. Minor changes may be needed.
- [4] Exemplary: No cultural stereotypes/bias exist. No change needed.

A scoring guide for these four categories and instructions for rating the questions are provided. Please use the rating sheet to rate each question. Please make sure that you rate ALL questions in ALL three instruments. For questions that fall under categories [1] (problematic), [2] (weak) and possibly [3] (adequate), please provide advice and suggestions on how to improve the wording of the items to make it clear and concise for respondents from your particular cultural and socio-economic background. Please write your suggestions on the questionnaire booklet. In addition, please provide written comments on the surveys in these areas: the sequencing of the topics (e.g. general demographics, general health, then accidents and diet), and the literacy level required to answer the questions.

Please return the three questionnaire booklets with your comments and suggestions, and rating sheets in the enclosed envelopes by Thursday, April 27, 2000. In addition, please return the consultant payment form, filled out and signed, as well as a resume or vitae. We would like to thank you in advance for your assistance. If you have any questions, please feel free to call us at (310) 268-0349 or email Fery Hejri at "ardacresearch@usa.net".

Sincerely,  
Fery Hejri, Ph.D.

***ADVANCE RESEARCH AND DATA ANALYSES CENTER***

***ARDAC***

2014 S.Sepulveda Blvd.

Los Angeles CA 90025

Phone: (310) 286-0349

Fax: (310) 268-0349

Email: [ardacresearch@usa.net](mailto:ardacresearch@usa.net)

The California Health Interview Survey (CHIS), a collaboration between the UCLA Center for Health Policy Research, the California Department of Health Services, and the Public Health Institute, is conducting a telephone interview survey on health issues such as public health and access to health care. Because of the extreme value of CHIS data, the survey tools that will be used must be examined carefully for cultural biases. There are three surveys: An adult questionnaire with 73 pages, an adolescent questionnaire with 37 pages, and a child questionnaire with 20. The survey instruments should retain the conceptual and technical linguistic equivalency of response items and minimize cultural biases. We are inviting you to be a part of our team of survey reviewers. Your job as a reviewer involves checking the survey tools for any bias or cultural stereotypes. A scoring guide and the surveys are being mailed to you.. Review of the survey will probably take about 2 days and you will receive \$500 a day or \$1000 total payment. The surveys and the review must be returned to us by April 27. Thank you so much in advance for your agreeing to cooperate in this project. If you have any questions, please feel free to call us or fax us at (310) 268-0349 or you can email Dr. Hejri, the coordinator at [ardacresearch@usa.net](mailto:ardacresearch@usa.net).

**CHIS Survey Rating  
Cultural Review**

Reviewer Name: \_\_\_\_\_

Date of review: \_\_\_\_\_

**DIRECTIONS**

Please circle the appropriate number according to the enclosed item scoring guide descriptions. The major criteria to be used in your review are degree of cultural bias, use of stereotypical language, word familiarity, and cultural relevance. If an item has two or more "problems", consider giving it a 1 or a 2. If an item is adequate but has small or minor problems that can be corrected easily, give it a 3. If there are no problems with an item, it deserves a 4 as an exemplary item. If you rate an item 1 or 2, please describe the problem in the last column and write your suggested corrections on the questionnaire booklet.

For example, a question on "substance abuse/ drug" can be used here to illustrate how a question might be changed. The original question asks

1a. "Have you been engaged in substance abuse during the past year?"

This question may be rated as a 1 or "problematic" since the term "substance abuse" may not be familiar for certain groups of respondents. In addition, the word "engaged" is not a familiar term to many ethnic groups, whereas "use" is more common. We therefore would mark this question as "1: problematic" and write our suggested changes on the booklet.

**RATING SHEET**

1 = Problematic, 2 = Weak, 3 = Adequate, 4 = Exemplary

#	1	2	3	4	NOTES/PROBLEMS
1a	X				Substance use is not common word, use street drugs is better

Note: Change question 1a: "Have you been engaged in substance abuse during the past year?" to "Have you used street drugs during the past year?"

# CHIS CULTURAL REVIEW CRITERIA & SCORING GUIDE FOR RATING SURVEY ITEMS

**Criteria to be evaluated:**

- Degree of cultural bias
- Stereotypical language
- Word familiarity and appropriateness
- Cultural relevance

## Generalized Item Scoring Guide

<u>LEVELS</u>	ITEM QUALITY LEVEL
4	<p><b>EXEMPLARY ITEM</b></p> <ul style="list-style-type: none"><li>• Shows no stereotypical language</li><li>• Words are familiar, appropriate and clear</li><li>• No cultural bias evident</li><li>• Item is highly culturally relevant</li></ul>
3	<p><b>ADEQUATE ITEM</b></p> <ul style="list-style-type: none"><li>• Little stereotypical language use</li><li>• Most words are familiar and appropriate</li><li>• No cultural bias is evident</li><li>• Item is culturally relevant</li></ul>
2	<p><b>WEAK ITEM</b></p> <ul style="list-style-type: none"><li>• Some stereotyping of language is seen</li><li>• Some words are unfamiliar or inappropriate</li><li>• Some cultural bias is evident</li><li>• Item is not highly relevant culturally</li></ul>
1	<p><b>PROBLEMATIC ITEM</b></p> <ul style="list-style-type: none"><li>• Shows stereotypical language</li><li>• Many words are not familiar or appropriate</li><li>• Cultural or ethnic bias is quite evident</li><li>• Item is not relevant culturally</li></ul>