PHO-9 BSL and GAD-7 BSL

The original version of Patient Health Questionnaire 9-item scale (PHQ-9) was developed by Spitzer, Williams, Kroenke and colleagues (1999) and measures depression. The Generalized Anxiety Disorder 7-Item Scale (GAD-7) measures anxiety and was developed by Spitzer, Kroenke, Williams and Löwe (2006). With the permission of the creator teams, both the PHQ-9 and the GAD-7 have been translated into British Sign Language – the PHQ-9 BSL and the GAD-7 BSL respectively – see Rogers, Young, Lovell, Campbell, Scott and Kendal, 2013 for more information:

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3521778/pdf/ens040.pdf

The translation work was carried out by Robert Adam, Jen Dodds, Rosemary Oram, Nicholas Padden and Sara Rhys Jones. The PHQ-9 BSL and the GAD-7 BSL are in the public domain and are free to use. The reliability and validity of these two instruments have been robustly investigated and found to be acceptable. For details see Rogers et al. (2013; https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3521778/pdf/ens040.pdf).

Instructions for using PHQ-9 BSL / GAD-7 BSL

The assessments in BSL are available in digital video format. There are no English subtitles on the BSL versions; this is because they have been validated in BSL. The assessments consist of video clips of the title and instructions, followed by each of the questions in turn. The video clips should not be edited or amended in any way because the translations have been validated. Each instrument is intended as a standalone assessment that can be accessed autonomously by the client/patient in a similar way to self-completion of a written assessment.

Rating scale and scoring PHQ-9 and GAD-7 BSL

The response scale features in pop-up words in plain English, however there is an explanation in BSL as well that may be referred to at the start of the assessment and which can be accessed at any point during the course of the assessment. The words used in the rating scale for the BSL version were changed slightly from the English version (with the

permission of the original creators), although the scoring remains the same. This ranges from zero to a maximum score of 27 for the PHQ-9 and zero to 21 for the GAD-7. The plain English terms that we have used for the PHQ-9 BSL and the GAD-7 BSL are as follows:

- "Not at all" was changed to "Never"
- "Several days" was changed to "A few days"
- "More than half the days" was changed to "Most of the days"
- "Nearly every day" did not need to be changed.

The changes were made to reflect more closely the BSL version of the rating scale and to avoid potential misunderstanding and ambiguity in BSL.

Scoring	Never	A few days	Most of the days	Nearly every day
PHQ-9 No. 1	0	1	2	3
PHQ-9 No. 2	0	1	2	3
PHQ-9 No. 3	0	1	2	3
PHQ-9 No. 4	0	1	2	3
PHQ-9 No. 5	0	1	2	3
PHQ-9 No. 6	0	1	2	3
PHQ-9 No. 7	0	1	2	3
PHQ-9 No. 8	0	1	2	3
PHQ-9 No. 9	0	1	2	3

PHQ-9 BSL

PHQ-9 total score

Question No. 10 in the PHQ-9 should be answered when a person has selected a response other than 'never' to one or more of the questions one to nine. The English terms for the response scale for this question remain unchanged:

□ Not difficult at all □ Somewhat difficult □ Very difficult □ Extremely difficult

Scoring:	Never	A few days	Most of the days	Nearly every day
GAD-7 No. 1	0	1	2	3
GAD-7 No. 2	0	1	2	3
GAD-7 No. 3	0	1	2	3
GAD-7 No. 4	0	1	2	3
GAD-7 No. 5	0	1	2	3
GAD-7 No. 6	0	1	2	3
GAD-7 No. 7	0	1	2	3
			GAD-7 to	otal score

GAD-7 BSL

Clinical cut-off Scores

Clinical cut-off scores for the English versions of these assessments, for the English speaking population, have been established as ten for the PHQ-9 (Kroenke, Sptizer, and Williams, 2001) and eight for the GAD-7 (Kroenke, Spitzer, Williams, Monahan, & Lowe, 2007). These are the cut-off scores used in the IAPT programme. However, for the BSL versions the cut off scores for Deaf BSL users have been established as lower following a rigorous process of analysis based on Deaf population responses. The clinical cut-off scores for the PHQ-9 BSL is eight and for the GAD-7 BSL it is six. The relevant journal article

Obtaining copies of the PHQ-9 BSL and the GAD-7 BSL assessments

The assessments in BSL are available via the IAPTUS patient management system (please raise a Support Log, requesting access and mentioning Jane Wrigley, Account Manager). Copies can also be obtained by emailing Dr Katherine Rogers at <u>katherine.rogers@manchester.ac.uk</u>. The assessments are freely available for unrestricted clinical and research use.

Please note that if you use the individual video clips or embed them into a webpage, we ask that you please display them as they are. Do not add, edit or amend them in any way. Please do not add English subtitles to the clips or display the English versions of the questions alongside the BSL questions on the screen. Please also ensure that you display the acknowledgements slide clearly on the page.

Statements

The BSL versions of the PHQ-9 and the GAD-7 assessments have been made freely available for use. The work on these BSL versions was carried out by the Social Research with Deaf people (SORD) programme at the University of Manchester. The translation work on the BSL versions was funded by the British Society for Mental Health and Deafness (BSMHD1101). The study of the validity and reliability of the assessments was funded through a NIHR doctoral research fellowship (Dr Katherine Rogers, award reference number: DRF-2009-02-118). The study was granted ethical approval by the National Research Ethics Service (NRES) Committee for Yorkshire and the Humber – Leeds West (REC number: 11/YH/0180). The project had R & D approval from nine local NHS organisations.

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https://www.journalslibrary.nihr.ac.uk/programmes/hsdr/1213679/#/

The views expressed in the article where the results of the clinical cut-offs study are reported are those of the authors and not necessarily those of the NHS, NIHR or the Department of Health. The clinical cut-offs study was granted ethical approval through the Proportionate Review Sub-committee of NRES (National Research Ethics Service) Ref: 14/LO/2234.

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