

Standardised assessments in British Sign Language (BSL):

A general guideline for using BSL assessment tools

The **S**ocial **R**esearch with **D**eaf people group (SORD) at the University of Manchester have undertaken translation and validation studies of commonly used standardised instruments to ensure there are BSL versions available relating to health and wellbeing. These have all been endorsed by originators of the assessment tools and are made freely available for non-commercial use. You will find the links to those assessments in BSL on the SORD website [<https://sites.manchester.ac.uk/sord/resources/>]. Some of the assessments can be directly downloaded and some require registration first. On the website you will also find guides for their use and links to the academic papers that report their translation and validation.

This concerns a general guide for professionals working with Deaf people who might wish to use at least one of the BSL assessments tools with Deaf BSL users. This guide will cover: the general instructions for using tools; rating scales and scoring; where it is relevant the appropriate clinical cut-offs; using tools with Deaf BSL users; and how to obtain the copies of tools.

Deaf people who use British Sign Language (BSL)

BSL is not a visual representation of English, it is a complete language with a different grammatical structure and was recognised as an official indigenous language by the British government in 2003. In Scotland, the BSL Scotland Act 2015 was passed which conferred specific duties on service providers, employers and other institutions to take steps to promote equality on grounds of language, not on grounds of disability. It is estimated that there are at least 87,000 Deaf BSL users in the UK (BDA, 2016). Several additional issues should also be considered:

- Access to health and social care services for Deaf people has historically been poor in comparison with hearing populations.

- Deaf people experience inequality in mental health and health-related outcomes. For example, the prevalence of anxiety and depression is higher in the Deaf population; and Deaf people experience poor general health outcomes (e.g. obesity and heart disease).
- Deaf people experience significant barriers in acquiring knowledge on health-related matters as so little information is available in BSL.
- The Deaf population is highly heterogeneous in terms of, for examples, age of acquisition; language use; educational attainment; health-related outcomes; and so forth.
- Therapeutic encounters between Deaf and hearing people should be regarded as cross-cultural encounters and therefore linguistic facilitation of communication is not of itself enough.

Please note that the use of BSL assessment tools alone is not sufficient for therapists to ensure that their work with Deaf people is accessible and meets Deaf people's needs.

We do not recommend that hearing therapists or researchers who cannot sign should work with Deaf people without a qualified BSL/English interpreter and without any understanding of deaf related issues. For information about your regional or national Deaf mental health service, please go to this page available on British Society for Mental Health and Deafness website:

<https://bsmhd.org.uk/2020/05/05/new-list-of-mental-health-services/>

Instructions for using BSL assessment tools

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 in the form in which they are

presented. 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.

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.

Rating scales and scoring

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 scoring remains the same for all of the BSL assessment tools as that in the originals.

Clinical cut-off scores

Where there are clinical cut-off scores that have been established for the English versions of these assessments tools, it is necessary to ensure that the correct clinical cut-offs scores are being correctly used with Deaf people. For the English speaking population the PHQ-9, GAD-7, WSAS and CORE-OM assessment tools have their own clinical cut-off scores. Following a rigorous process of analysis based on Deaf population responses, it was found that the clinical cut-off scores for PHQ-9 and GAD-7 BSL versions for Deaf BSL users have been established as lower than in the original English (UK) versions. They are eight for the PHQ-9 BSL and six for the GAD-7 BSL, (Belk, Pilling, Rogers, Lovell, and Young, 2016) in comparison with ten for the PHQ-9 (Kroenke, Spitzer, and Williams, 2001) and eight for the GAD-7 (Kroenke, Spitzer, Williams, Monahan, & Lowe, 2007) established for the English speaking UK population (Young et al., 2017). However, the clinical cut-

offs scores for the WSAS BSL and CORE-OM BSL specific to the Deaf BSL population are currently not available.

Obtaining copies of BSL assessment tools

Please see below for the links to the available BSL versions of the assessment tools as well as the guides for using them:

- EQ-5D-5L BSL – measures health status
[\[https://sites.manchester.ac.uk/sord/resources/eq-5d-5l/\]](https://sites.manchester.ac.uk/sord/resources/eq-5d-5l/)
- Patient Health Questionnaire 9-item scale BSL (PHQ-9 BSL) – screening tool for depression [\[https://sites.manchester.ac.uk/sord/resources/phq-9-bsl/\]](https://sites.manchester.ac.uk/sord/resources/phq-9-bsl/)
- General Anxiety Disorder 7-item Scale BSL (GAD-7 BSL) – screening tool for anxiety [\[https://sites.manchester.ac.uk/sord/resources/gad7-bsl/\]](https://sites.manchester.ac.uk/sord/resources/gad7-bsl/)
- Work and Social Adjustment Scale BSL (WSAS BSL) – measures difficulties in functioning [\[https://sites.manchester.ac.uk/sord/resources/wsas-bsl/\]](https://sites.manchester.ac.uk/sord/resources/wsas-bsl/)
- Clinical Outcomes in Routine Evaluation – Outcome Measure BSL (CORE-OM BSL) – measures global distress
[\[https://sites.manchester.ac.uk/sord/resources/core-om-bsl/\]](https://sites.manchester.ac.uk/sord/resources/core-om-bsl/)
- CORE-10 BSL [\[https://sites.manchester.ac.uk/sord/resources/core-10-bsl/\]](https://sites.manchester.ac.uk/sord/resources/core-10-bsl/)
- Short Warwick and Edinburgh Mental Wellbeing Scale BSL (SWEMWBS BSL) - measures positive mental well-being
[\[https://sites.manchester.ac.uk/sord/resources/swemwbs-bsl/\]](https://sites.manchester.ac.uk/sord/resources/swemwbs-bsl/)

References

Belk, R., Pilling, M., Rogers, K.D., Lovell, K., Young, A. (2016). The theoretical and practical determination of clinical cut-offs for the British Sign Language versions of PHQ-9 and GAD-7. *BMC Psychiatry*, 16, 372. DOI: 10.1186/s12888-016-1078-0 [Open access: <https://bmcpsy psychiatry.biomedcentral.com/articles/10.1186/s12888-016-1078-0>]

Kroenke, K., Spitzer, R. L. and Williams, J. B. (2001). The PHQ-9: Validity of a brief depression severity measure. *Journal of General Internal Medicine*, 16(9): 606-613.

Kroenke, K., Spitzer, R. L., Williams, J. B. W., Monahan, P. O. and Löwe, B. (2007). Anxiety Disorders in Primary Care: Prevalence, Impairment, Comorbidity, and Detection. *Annals of Internal Medicine*, 146(5), 317-325.

Rogers, K.D., Young, A., Lovell, K., Campbell, M., Scott, P.R. and Kendal, S. (2013). The British Sign Language Versions of the Patient Health Questionnaire, the Generalized Anxiety Disorder 7-Item Scale, and the Work and Social Adjustment Scale. *Journal of Deaf Studies and Deaf Education*, 18(1), 110-122. [Open access: <http://jdsde.oxfordjournals.org/content/18/1/110.full.pdf+html>]

Spitzer, R. L., Kroenke, K. and Williams, J. B. W. (1999). Validation and utility of a self-report version of PRIME-MD: The PHQ Primary Care Study. *The Journal of the American Medical Association*, 282, 1737–1744. doi:10.1001/jama.282.18.1737

Spitzer, R. L., Kroenke, K., Williams, J. B. W. and Löwe, B. (2006). A brief measure for assessing generalized anxiety disorder: The GAD-7. *Archives of Internal Medicine*, 166, 1092–1097. doi:10.1001/archinte.166.10.1092

Young, A., Rogers, K., Davies, L., Pilling, M., Lovell, K., Pilling, S., Belk, R., Shields, G., Dodds, C., Campbell, M., Nassimi-Green, C., Buck, D., and Oram, R. (2017).

Evaluating the effectiveness and cost-effectiveness of British Sign Language
Improving Access to Psychological Therapies: an exploratory study. *Health
Services and Delivery Research*, 5(24) (Published September 2017)
<https://www.journalslibrary.nihr.ac.uk/programmes/hsdr/1213679/#/>