



Translating for Pacific language resources: an organisational approach

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LeVa

Igniting communities, creating change

Translating resources for Pacific people in New Zealand

Translating health and other resources into easy-to-read information and in Pasifika languages, helps equip Pasifika people with the right knowledge to make important decisions. It can also enhance access to the right help and support people to be more informed about their wellbeing.

The team at Le Va put this document together originally intended as an internal organisational document to help guide our work and ensure we are supporting the design of the best possible quality resources and information for our Pasifika communities. Due to demand, our offering is to share this information so that the public are aware of our process for translating material to Pacific languages, and also so that others may utilise our approach in their work if useful. A secondary gain is that we are contributing to the preservation of Pasifika languages, protecting and nurturing cultural traditions and identity for the future.

Le Va prioritises a simple-language, health-literacy approach to all our resources. We align our approach with the Ministry of Health Guidelines for developing health education resources in New Zealand¹. In terms of language translation, we follow the World Health Organisation recommended processes for translating or adapting resources and instruments².

Aim for ‘conceptual equivalence’

When translating English resources into Pasifika languages³, the aim is to achieve a translated version that is conceptually equivalent. That is, as outlined in the WHO guidelines, the Pasifika translation should be “equally natural and acceptable and should practically perform in the same way. The focus is on cross-cultural and conceptual, rather than on linguistic or literal equivalence”. Translators should consider the definition of the original term and attempt to translate it in the most relevant way.

This is particularly important when referring to complex concepts such as mental health, wellbeing, disability, addiction, suicide, sexual violence and other social issues, where simple or literal transliterations may not suffice. The conceptual equivalent for these concepts may also not be well known or commonly used in Pacific languages.

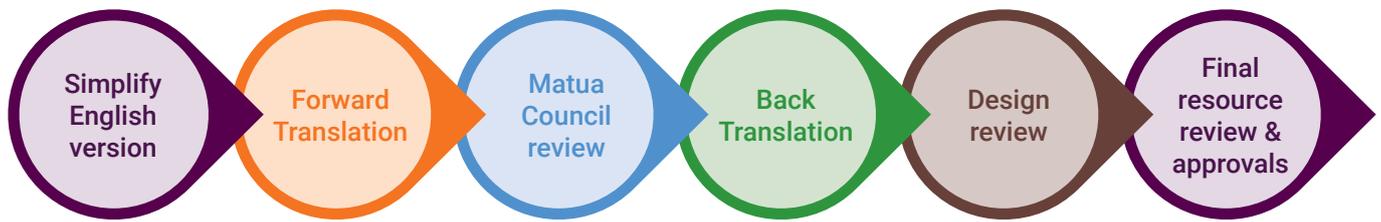
Le Va follows a six-step methodology to achieve the goal of conceptual equivalence and achieving quality assurance of the resource.

¹Ministry of Health. 2012. Rauemi Atawhai: A guide to developing health education resources in New Zealand. Wellington: Ministry of Health.

²http://www.who.int/substance_abuse/research_tools/translation/en/

³E.g. Samoan, Tongan, Cook Islands Maori, Fijian, Niuean, Tokelauan, Tuvaluan, etc.

Six step language translation process



1. Simplify the English version

The English resource should be reviewed by technical or content-knowledge experts to ensure the language is as clear and as simple as possible. Fewer words are better - long complicated sentences should be avoided. Follow the health education guidelines as outlined by the Ministry of Health.¹ Once reviewed, and potentially simplified, it is ready for translation.

2. Forward translation

Source translators that are health or social sector professionals (or similar) who are familiar with terminology of the area covered by the resource, who are competent in the relevant Pasifika language, and who have had experience translating in the past. Translators with content knowledge can also help deal with any potential risks with negative stigma surrounding certain cultural concepts, words or phrases that could cause offense.

Specify the audience so that the translator can consider the typical respondent for the resource being translated and what the respondent might understand when they read the information. In particular, if there are any issues of gender or age applicability or potential for any terms that could be considered offensive to the target audience.

As referred to above, translators should aim for the conceptual equivalent of a word or phrase and consider the definition of the original term and attempt to translate it in the most relevant way. Translators should also avoid the use of any jargon. For example, they should not use:

- ✦ Technical terms that cannot be understood clearly; and
- ✦ Colloquialisms, idioms or vernacular terms that cannot be understood by common people in everyday life.





3. Matua Council Review

Once the draft translation is complete, it is essential to ensure that other credible cultural language experts concur with the translation. Le Va processes are to send it to our Pasifika Matua council⁴ for collective review. The Pasifika Matua Council is established and supported by Waitemata District Health Board and Auckland District Health Board mental health services. This same Matua Council, consisting of elders and chiefs from many different Pasifika ethnic origins, adopted Le Va and advise Le Va on all of its work. They provide cultural and spiritual knowledge, wisdom, protection, safety and guidance for our projects, organisation and staff.

The aim of the Matua Council review is to identify and resolve any inaccurate expressions or concepts of the translation, as well as any discrepancies between the forward translation and the existing or comparable previous versions if any. The Matua Council may question some words or expressions and suggest alternatives. They should be given any materials that can help them to be consistent with previous translations.

An expert panel of appropriate bilingual experts may replace the Matua Council for this phase of the translation process if the council is not available or it is deemed more appropriate due to technical content.



4. Back Translation

The resource is then translated back to English by an independent translator who has no technical knowledge of the content of the resource.

As with the initial translation, emphasis in the back-translation should be on conceptual and cultural equivalence and not linguistic equivalence.

Any discrepancies identified should be discussed between the Project Lead or content experts and the translators, and work should be iterated as many times as needed until a satisfactory version is reached.

5. Design Review

The final draft may have design formatting, images, patterns, artwork or graphics added. These too require reviewing by a cultural knowledge holder to ensure they are culturally appropriate, reflect the content of the document, and are not offensive.

At this point, a rapid review for errors by the initial forward translator is good practice.

⁴<https://www.leva.co.nz/about/matua-council>





6. Final resource

Documentation of procedures throughout the six-step process is important, particularly if there are changes made and new versions anticipated in future. All the cultural adaptation procedures should be traceable through the appropriate documents. These include, at the least:

- a. An initial forward version;
- b. a summary of recommendations by the matua council;
- c. the back-translation;
- d. a summary of problems found during the pre-testing of the translation and the modifications proposed; and
- e. the final version (and a description of who reviewed / endorsed the work)

For quality assurance, and given that the wording would have gone through many hands with risk of typos and formatting errors, the final resource should be sent to all involved to cast an eye over the document one last time for final sign off from all.

The final resource can then be presented to the approving manager with delegated authority for approval.

*Fa'afetai tele lava; Meitaki; Malo 'aupito;
Fakafetai lasi; Vinaka Vakalevu;
Fakaauae lahi; Fakafetai*

Visit www.leva.co.nz to access free wellbeing resources, including resources translated into Pacific languages.

For information on Pacific languages, refer to the Ministry of Pacific Peoples website www.mpp.govt.nz

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