

Translation of Children's Yale-Brown Obsessive Compulsive Scale to Arabic

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ABSTRACT

Obsessive-compulsive disorder (OCD) is a disabling psychiatric disorder in children and adolescents, marked by intrusive, recurrent thoughts and compulsive behaviors. Early detection is crucial for effective management; however, the absence of validated Arabic screening tools hampers clinical practice in Arabic-speaking regions. To translate and culturally adapt the Children's Yale-Brown Obsessive Compulsive Scale (CY-BOCS) into Arabic and evaluate its linguistic accuracy and cultural appropriateness. Following WHO and international translation guidelines, the authors obtained permission from the original developers and conducted forward translation, back translation, expert review, and two-stage pilot testing involving parents of OCD-diagnosed and community children. The final Arabic version maintained conceptual and linguistic equivalence with the original scale. Feedback confirmed item clarity and comprehension across educational levels. Minor modifications were introduced to enhance cultural appropriateness and linguistic clarity. The Arabic CY-BOCS provides clinicians and researchers with a culturally validated instrument for assessing OCD symptom severity among Arabic-speaking children. Psychometric validation is recommended for clinical use.

INTRODUCTION

Obsessive-compulsive disorder (OCD) is one of the most disabling mental health disorders affecting the quality of life in children and adolescents¹⁻⁸. Its presence at a critical stage of psychosocial development can significantly impair family, academic, and social functioning¹. Childhood-onset OCD is associated with more severe symptoms, higher comorbidity rates—such as depression, anxiety, phobias, attention-deficit hyperactivity disorder (ADHD), and tic disorders—and a poorer prognosis compared with adult-onset forms^{8,9}. OCD often presents as time-consuming symptoms that interfere with daily life¹⁰. Treatment options, including cognitive-behavioral therapy and pharmacotherapy, can markedly improve quality of life when properly applied^{2,8}. However, underdiagnosis remains a global challenge⁹.

Epidemiological data indicate a lifetime prevalence of OCD between 2.7% and 4% in the general population⁸. In Saudi Arabia, the national mental health survey reported a 4.1% prevalence⁷. Despite these figures, many cases remain unrecognized due to cultural, linguistic, and social barriers. Given that up to 50% of adults with OCD report symptom onset during childhood, early screening and culturally sensitive tools are essential^{9,10}.

The Children's Yale-Brown Obsessive Compulsive Scale (CY-BOCS) is globally recognized as the gold standard for assessing OCD severity in children¹⁰. It is a clinician-administered, semi-structured interview that evaluates symptom severity through separate obsession and compulsion subscales¹⁰. Despite its widespread use and translation into multiple languages¹¹, the CY-BOCS has not been officially translated into Arabic, limiting its applicability in clinical and research settings in Arabic-speaking countries. This study aims to bridge this gap through a rigorous translation and cultural adaptation process.

METHODOLOGY

After obtaining formal permission from the original CY-BOCS developers, the translation process adhered to international best-practice guidelines¹¹. Two bilingual translators independently performed forward translations from English to Arabic. Their translations were compared to identify differences, difficult words, and culturally sensitive expressions. Two additional bilingual translators, who had not seen the original scale, performed back translations from Arabic to English to ensure conceptual equivalence. The back-translated versions were compared to the original to identify discrepancies (Figure 1).

An expert review committee comprising a child psychiatrist, a professor of clinical psychology, and an academic psychiatrist evaluated all

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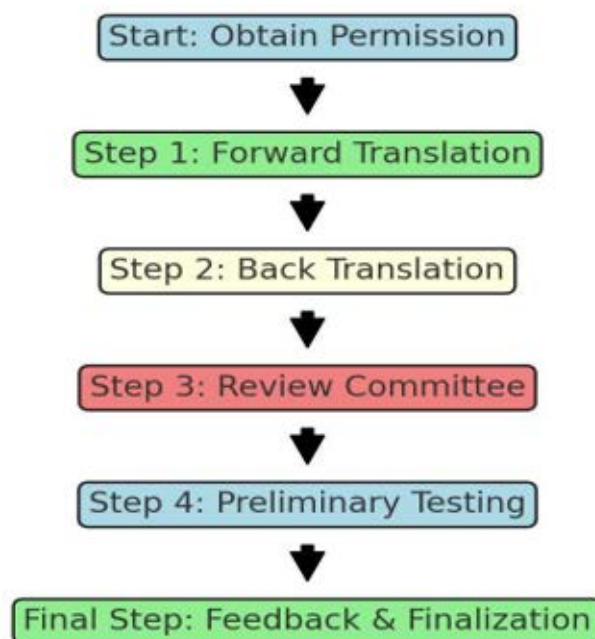


Figure 1. Flowchart of translation and adaptation process (Forward Translation → Back Translation → Expert Review → Pilot Testing → Final Version)

translations. The committee assessed linguistic accuracy, cultural relevance, and conceptual clarity, resolving ambiguities and adjusting phrases that could cause confusion. The preliminary Arabic version was then pilot tested with six parents—three with OCD-diagnosed children and three from the general population. Feedback regarding clarity, comprehension, and cultural appropriateness was collected and used to refine the scale.

A second pilot study was conducted with 22 participants: 10 parents of children diagnosed with OCD and 12 from the general community. Feedback from this larger sample led to minor modifications in grammar, punctuation, and example phrasing. The final version was reviewed for clarity and ease of use, ensuring comprehensibility across educational levels.

RESULTS

The translation process yielded a final Arabic CY-BOCS that maintained linguistic accuracy and cultural appropriateness. The process integrated forward and backward translations, expert review, and pilot testing across two phases. All six participants in the first phase and twenty-two in the second phase reported that the items were understandable. Only a few terms required clarification or substitution. Participants from diverse educational backgrounds found the final Arabic wording clear and contextually relevant.

The feedback highlighted the importance of including culturally appropriate examples for obsessive and compulsive behaviors. The Arabic version was formatted to be easy to read, with simplified sentence structures and precise terminology. All respondents confirmed that the final version was comprehensible and suitable for use among Arabic-speaking parents and children.

DISCUSSION

The translation and cultural adaptation of psychological assessment tools must follow rigorous scientific procedures to preserve their

validity and reliability^{9,11}. Unsystematic translations can compromise psychometric integrity and reduce diagnostic accuracy. In this study, the authors followed WHO translation guidelines, ensuring semantic, conceptual, and experiential equivalence. Key challenges included translating psychiatric terminology derived from Latin or Greek origins, such as 'trichotillomania' and 'dysmorphophobia,' which lack direct Arabic equivalents. These were resolved using terms consistent with the DSM-5 Arabic version^{8,10}.

Another linguistic challenge was that certain English words or phrases could lead to ambiguity if literally translated. To avoid misinterpretation, the team opted for explanatory phrases or contextually adjusted translations. The iterative process, involving both experts and community participants, ensured that the scale was culturally sensitive and understandable to individuals with varying education levels.

This methodological rigor aligns with international standards for cross-cultural adaptation of psychometric instruments. By employing forward and backward translation, expert consensus, and pilot testing, the study set a regional precedent for best practices in translation.¹¹ Furthermore, the authors emphasized public comprehension, which is often neglected in academic translations but is crucial for parent-administered components in child psychiatry instruments.

CONCLUSION

The Arabic translation of the Children's Yale-Brown Obsessive Compulsive Scale (CY-BOCS) is a linguistically and culturally validated version of the original English scale. It is now ready for psychometric validation studies to confirm its reliability and diagnostic accuracy. The authors recommend its integration into clinical and research settings to enhance the early detection and management of OCD among Arabic-speaking children^{9,10}.

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