Chapter 4

Developing a South Asian Version of an Implementation Instrument for Understanding the Policy Implementation:
Case of COVID–19 in Pakistan

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ABSTRACT

This study is divided into two phases: translation and the testing of NoMAD. Researchers adopted a four-step approach: forward and backward translation, expert reviews for the test, and improvement of content validity. The translated version was then adopted for understanding the implementation of social distancing in the context of Covid-19 in Pakistan. To analyze the scale validity of U-NoMAD, researchers calculated the Cronbach alpha value through the Confirmatory Factor Analysis approach and analyzed the U-NoMAD strength through a step-wise

evaluation process – convergent validity and individual item validity, discriminant validity, and model significance. The initial factor analysis model showed a good fit for coherence and cognitive participation and an unsatisfactory fit for collective action and reflexive monitoring. The results confirmed the NoMAD structure in the Pakistani healthcare settings to acceptable standards. So, the U-NoMAD instrument is valuable in evaluating complex and innovative healthcare interventions.

1. INTRODUCTION

Normalization MeAsure Development (NoMAD) survey tool is a British instrument (Finch et al., 2018) of the Normalization Process Theory (NPT) that is already translated into Swedish (Aberg et al., 2018), Dutch (Vis et al., 2019), and Brazilian Portuguese (Loch et al., 2020). However, no such translation has been done for more than two hundred and thirty million people in the world who are either native or second-language speakers of the Urdu language (Eberhard et al., 2022). We observed that the implementation literature continuously calls for the application, testing, and validation of the existing instruments to search for a sound implementation theory. For this, we conducted a scientific inquiry first to translate and then evaluate the newly translated U-NoMAD version of the instrument to assess its applicability in complex and novel healthcare interventions, such as in the implementation of Social Distancing (SD) in the context of the COVID-19 pandemic in Pakistan. So, this study provides a translation of the NoMAD instrument and tests the newly translated instrument in a novel situation. We observed in the literature that no study had been conducted using a newly translated instrument in search of a degree of applicability of the instruments while studying the SD. This gave us literature-supportive and demanding research questions: Is NoMAD a promising instrument for evaluating the implementation of social distancing in the Pakistani context? To answer this question, we adopted a translation and validation approach. So, we apply a systematic four-step approach for translation and confirmatory factor analysis in partial least squares by using Smart-PLS software for validation. The current study offers translation and pilot testing of NoMAD to South Asia version of the instrument, which we have named the Urdu-Normalization MeAsure Development (U-NoMAD) survey tool, considering the wider acceptability of the Urdu Language in South Asia. So, the study's objectives were to translate the NoMAD into Urdu Language and to undertake initial psychometric testing of the newly translated U-NoMAD across a sample of healthcare providers involved in implementing SD. The proposition that a South Asian version of U-NoMAD can satisfactorily assess the NPT constructs is tested. This study contributes to the implementation literature by extending the understanding of the policy implementation of healthcare intervention and testing

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