URDU ADAPTATION AND VALIDATION OF STATE SELF-ESTEEM SCALE

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ABSTRACT

The present study was intended to carry out the adaptation and validation of State Self-Esteem Scale (SSES) in National language (i.e., Urdu). Subsequent to completion of adaptation process, validation (i.e. reliability and validity estimates) of SSES was done on a randomly selected sample of 237 young adults ranging in age from 18-25 years (with the mean age of 22.04; SD=1.78). They belonged to all three socioeconomic status (i.e., lower, middle, and upper). The research measures employed were: Demographic Form; State Self-Esteem Scale (SSES; Heatherton & Polivy, 1991); Rosenberg Self-Esteem Scale – Urdu Version (Sardar, 1998); The Aga Khan University Anxiety and Depression Scale (AKUADS; Ali, Reza, Khan, & Jehan, 1998), and Beck Scale for Suicidal Ideation-Urdu Version (Ayub, 2008). The findings show satisfactory internal consistency (i.e., α = .80), test-retest scores (i.e., r = .96); and Guttman split-half reliability coefficient (i.e., .85). Further, a positive correlation is found between SSES-Urdu Version and RSE (r =.49) and a negative correlation is found between SSES-Urdu Version and AKUADS (r = -.51) and BSSI (r = -.29) indicating good convergent validity of the scale. The implications, limitations and avenues for future research were also suggested.

Keywords: State self-esteem, Reliability, Validity, Urdu Adaptation

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INTRODUCTION

State self-esteem is an important construct that is under investigation in psychological community for many years (Linton & Marriott, 1996) and also is the focus of attention in the present study. This study focused on adaptation and validation of State Self-Esteem Scale (Heatherton & Polivy, 1991) in National language (i.e. Urdu) of Pakistan.

State self-esteem is defined by Heatherton and Polivy (1991) as momentarily altered or short-lived (i.e., state) changes in self-esteem. Situational factors are believed to be accountable for these momentary fluctuations in self-evaluation (Jones, Rhodewalt, Berglas, & Skelton, 1981). More specifically, negative and specific positive events are the identified factors creating these fluctuations; particularly negative factors induce the vulnerable and brittle feelings of worthlessness for short time (Greenier et al., 1999). These fluctuations in state self-esteem, either positive or negative, have significant repercussion for an individual's life. For instance, Kernis, Grammemann, and Barclay (1992) highlighted that the extent of fluctuation in one's self-esteem on day-to-day basis predicts future behavior independently of one's average level of self-esteem over time. Crocker and Park (2004) described significant motivational consequences of state self-esteem: when people do achieve something their self-esteem boosts and eventually they feel good whereas failure at objectives associated with self-esteem directs a drop in state self-esteem and rise in sadness, anger, shame, and other strongly negative emotions. State self-esteem is also suggested as particularly important for person's self-regulation (Crocker, Brook, Niiya, & Villacorta. 2006). Moreover, the association of state self-esteem with psychological problems is also widely studied and well documented in the Western literature; including depression (Fung, Lui, & Chau, 2006), anxiety (Besser, Flett, Hewitt, & Guez, 2008) etc.

The significant association of various aspects of self-esteem with different areas of an individual's life has led researcher in past to develop research tools to measures this construct. The psychological literature describes many different ways of measuring the construct of self-esteem and various instruments are also available to measure it, namely, Rosenberg Self-Esteem Scale (RSE; Rosenberg, 1965); Coopersmith Self-Esteem Inventory (Blascovich & Tomaka, 1991); Self-Esteem Checklist (Hamachek, 1971), Culture Free Self-Esteem Inventory (Battle, 2002), etc. All of these instruments are reliable and valid and are widely used to measure the construct of self-esteem. Now the culturally adapted versions of most of these scales are available in Pakistan.

However, most of these instruments measure either the global self-esteem or trait self-esteem or its other aspects. There are few scales available assessing the construct of state self-esteem. One such available and most widely used scale is State Self-Esteem Scale, also named as Current Thoughts Scale (Heatherton & Polivy, 1991).

State Self-Esteem Scale is a 20-items scale and for its construction Heartherton and Polivy have chosen statements from Pliner, Chaiken, and Flett's scale (1990) and Fleming and Courtney's (1984) adapted Janis-Field Feelings of Inadequacy Scale (Janis & Field, 1959). They titled it as *Current Thought Scale* or *The State Self-Esteem Scale* to emphasize on significance of momentary feelings. The scale consists of three subscales, i.e., performance state self-esteem, social state self-esteem and appearance state self-esteem. Performance state self-esteem subscale and social state self-esteem subscale consist of seven items each whereas appearance state self-esteem subscale consists of six items.

Heatherton and Polivy (1991) have conducted two studies with University students of ages 17-57 years and ages 18-43 years to analyze the factor structure and content validity of the scale. Results of study 1 has shown an inter-item correlation ranging from .09 to .69 (mean inter-item correlation = .36) and a high internal consistency (coefficient α = .92). Also, the scale significantly correlated with other global self-esteem scales and state self-esteem scales. In another study with college students they have shown good discriminant and constructs validity. The internal consistencies reported by Lakey and Scoboria (2005) for the three subscales i.e., performance state self-esteem, social state self-esteem and appearance state self-esteem were .80, .80 and .83 respectively. Moreover, the results of the study by Linton and Marriott (1996) on ages 11-13 years corroborates that state self-esteem scale is a sound instrument for measuring fluctuations in state self-esteem in adolescent population.

These studies provide evidence for psychometric soundness of the state self-esteem scale indicating it a reliable and valid instrument. Subsequently, it has also been used in various studies (e.g, Bobbio, 2009; Nussbaum & Dweck, 2008; Chau, Woo, & Chang, 2007; Ikegami, 2002). It's psychometric soundness lead to its adaptation and translation in other languages such as in Italian language (Merenda, 2005), German language (Rudolph, Schutz, & Schroder-Abe, 2008), and so on to make its use possible within these cultures. Despite its psychometric soundness, one limitation of the State Self-Esteem Scale with the relevance to our culture is that it is developed in English language and is

translated in few other languages which limit its use only in those specific cultures. Hence, the current study attempted to carry out the adaptation of the State Self-Esteem Scale (Heatherton & Polivy, 1991) in National language (i.e., Urdu) in order to provide a reliable and psychometrically sound instrument to measure the construct of state self-esteem in Pakistani Population.

This was done considering the dearth of studies in Pakistan exploring the beneficial or debilitating effects of state self-esteem. This dearth may be stemming from the scarcity of questionnaires /instruments in Urdu language to measure this construct in our society. Epidemiological studies stress the importance of utilizing research tools in native language. These studies stress the development of culturally relevant scale. Similarly, Johansone and Malak (2008) have emphasized the significance of translations of research tools into native language. According to them, in order to conduct and generate studies equivalent to international brilliant quality studies, it is vital that every culture has scales translated, adaptive or developed in their native languages. Often, in various situations, this is not possible to develop native scale because of lack of assets and expertise. Hence, it is often more practical to use scales after proper translation and adaptation (Rahman, Iqbal, Waheed, & Hussain, 2003). Likewise, the importance of translation and adaptation studies is also stressed by Milton (2009).

Translation and adaptation of research tools is essential for a variety of reasons. It is especially recommended when a research tool has a universal value and it can be made applicable to different populations after translation and adaptation. Similarly, it is usually essential for new population when it noticeably vary from the original populace in terms of ethnicity and specific cultural background. Furthermore, in a number of situations, though, adaptation of scales is required due to different life experiences even when the language is same. Likewise, many assessment tools have also been developed for men and women separately based on different life experiences of both (Geisinger, 1994). Thus, the aim of the translation and adaptation is to get different language versions of the original assessment tools that are conceptually corresponding in each of the target population. To do this, scale should be executed in the same manner and should have equivalence and suitability for new culture. To sum up, contemplating the significance of cultural adaptation of research instruments for producing the bright and excellent studies, the current study intends to adapt and validate in National language (i.e., Urdu) the State Self-Esteem Scale (SSES; Heatherton & Polivy, 1991) for its applicability on Pakistani population. This

study has its significance as it provides researchers with a tool/scale to assess the construct of State Self-Esteem which is not only adapted in National language (i.e. Urdu) but also is psychometrically tested.

METHOD

First, the formal consent to translate and adapt State Self-Esteem Scale (SSES) was taken from the first author, Heatherton and Polivy (1991). Followed by, adaptation procedures were carried out in following phases:

Phase-I: Translation and Adaptation of SSES
Phase-II: Back Translation of SSES
Phase-III: Preliminary Analysis of SSES-Urdu Version
Phase-IV: Psychometric Evaluation of SSES-Urdu Version

PHASE-I: Translation and Adaptation of State Self-Esteem Scale

The Phase - It was further divided into following two steps:

Step I: Evaluation of the Cultural Relevance of State Self-Esteem Scale (SSES)

To determine the face validity and the cultural relevance of SSES in Pakistani context, the English version of the SSES along with brief description of its subscales was given to three psychologists for evaluation. They were asked to evaluate the scale items with their relevance to Pakistani population and identify conceptually different, difficult and confusing items. After evaluation all the psychologists recommended the adaptation of SSES in National language (i.e. Urdu).

Step II: English to Urdu Translation and Adaptation of the State Self-Esteem Scale (SSES)

In this step, the English version of SSES was translated in Urdu language. For this purpose the researcher approached six experts who are selected following Johansone and Malak's (2008) and Beaton, Bombardier, Guillemin, and Ferraz's (2000) criteria. Johansone and Malak's (2008) suggested that these experts should be highly qualified in the area investigated by the questionnaire and have the necessary technical and scientific background in order to understand the concepts and constructs used. Hence, the experts included in present study, had an excellent command over technical and informal aspects of

both the original and the translated language. They also had an in-depth insight of the culture of Pakistan so that they can relate to the terms and concepts used in the questionnaire. While Beaton, Bombardier et al. (2000) suggested that these experts should have different backgrounds. Hence, the experts included in this study were mainly Associate and Assistant Professors of Psychology and English holding PhD and M. Phil degrees.

Procedure

Experts, approached individually, were briefed the purpose of the research and scale containing 20 statements along with explanation of the three subscales was provided to them. They were asked to translate each statement into Urdu language and directed to follow some strategies such as: to make the most of the content similarity between the original items and the target version and to translate and adapt the scale's items with substitution but without elimination of the items according to Pakistani culture.

Committee Approach

After collecting the six individual translations of items of State Self-Esteem Scale by the experts, a meeting of five judges, including one Associate Professor of Psychology, two Assistant Professors of Psychology and two Clinical Psychologists was held. They critically analyzed all the items with reference to context, wording, culturally used terms and grammar. On the basis of their evaluation, one best scale of translated items was selected for back translation.

PHASE-II: Back Translation of State Self-Esteem Scale (SSES)

Back translation is used to improve the traditional forward translation that is from the source language to target language. The closest translation conveys the highest face validity of the scale. Stansfield (2003) suggested that after the two source language translations it is best to compare and point out the disagreement to identify problems in initial forward translation. In the present study for back translation, four experts who had command on both, the source language and target language were approached. They were unfamiliar with the original version of State Self-Esteem Scale. These bilingual experts were one Associate and two Assistant Professors of Psychology and one Lecturer of English.

Procedure

Experts were approached individually and were provided the scale recommended by the committee containing 20 Urdu translated statements to translate each statement into English language as best as they can. Beaton, Bombardier, Guillemin, and Ferraz (2000) recommended that in back translation procedure, the experts should not be provided with any description of the scale. Therefore, this is followed.

Committee Approach

After back translations of the scale, a meeting of five judges (i.e.1 Associate and 2 Assistant Professors and 2 Clinical Psychologists) was held to examine the translated items with respect to any inconsistencies, mistranslations, and changes in meaning; to select the closest translations; to analyze the need for amendments in items. Committee members recommended the best and closest translations for 19 items for inclusion in the final scales. However, for item no. 8, i.e., "*I feel self-conscious*" the revision was suggested focusing on conceptual rather than linguistic meaning. Hence, the item no. 8 was modified considering the cultural context which after back translation has obtained satisfactory translation.

PHASE-III: Preliminary Analysis of State Self-Esteem Scale-Urdu Version

Upon completion of translation and adaptation procedure, preliminary analysis was carried out to ascertain that the adapted version is maintaining its equivalence when administered on Pakistani population and to check need for any further amendments in the scale.

Sample

For preliminary analysis of the Urdu translated version of State Self-Esteem Scale, sample of 90 bilingual young adults was selected. However, among these 90 young adults, 87 showed their willingness to participate whereas 6 of them withdrew. The age range of the participants was 18-25 years with the mean age of 21.57 years (*SD* =1.89).

Measures

State Self-Esteem Scale (SSES)

State Self-Esteem Scale (originally developed by Heatherton & Polivy, 1991) adapted in Urdu language in the present study consists of 20-items divided into three subscales: performance (item no. 1, 4, 5, 9, 14, 18, 19), social (item no. 2, 8, 10, 13, 15, 17, 20), and appearance (item no.3, 6, 7, 11, 12, 16) state self-esteem. Thirteen items are reverse scored (# 2, 4, 5, 7, 8, 10, 13, 15, 16, 17, 18, 19, 20). The test requires the subject to choose the most preferred option of all 20 items which they feel true for themselves at that moment. Each item is scored on a 5-point Likert scale.

Procedure

The participants were briefed about the purpose of the study. After taking formal consent, they were informed about the research and assured the confidentiality matters regarding their personal information. Later, original English version and Urdu version of SSES were administered on them with a break of 10 minutes between two administrations. Participants were thanked for their cooperation and time.

Scoring and Statistical Analysis

Both English Version and Urdu Version of SSES were scored according to the standard scoring procedure. Cronbach's Alpha to see the internal consistency **(Table 2)** and Pearson Product Moment Coefficient of Correlation to see correlation between original English Version and Urdu Version **(Table 3)** to determine the linguistic equivalence of SSES -Urdu Version were computed

PHASE-IV: Psychometric Evaluation of State Self-Esteem Scale – Urdu Version

The reliability and validity of the Urdu version of State Self-Esteem was determined in this phase.

Sample

The sample of 237 young adults was drawn from the randomly selected departments of Faculty of Science and Arts of University of Karachi. The age of sample was 18-25 years with a mean age of 22.04 years (*SD* = 1.78) and they were belonging to three socioeconomic status (i.e., lower, middle, and upper). Socioeconomic status was determined on the basis of house hold income and expenditure survey conducted by the Federal Bureau of Statistics (FBS, Government of Pakistan, 2004-2005). To control the potential effects of being reared in broken families or by single or no parents on state self-esteem only those adults are included in the sample of the study whose parents are alive and live together. Considering, possible association of psychopathology with state self-esteem, young adults with history of psychological illness either in themselves or in first degree relatives and receiving any kind of psychiatric / psychological treatment (psychotropic medication / psychotherapy) were excluded.

Measures

Demographic Form

Demographic form consisted of items focusing to obtain information related to participant's personal characteristics, academics, family history, and presence of psychological and medical problems.

Rosenberg Self-Esteem Scale (RSES)

Rosenberg Self-Esteem Scale (RSES; Rosenberg, 1965) is a measure of the global self-esteem. The scale consists of 10 items answered on a 5-point Likert scale ranging from '*strongly agree'* to '*strongly disagree'*. Negative items were reverse coded so that a high score continued to indicate high self-esteem. The RSE has been determined to have very high reliability. Over a number of trials the RSE has achieved a Guttman Scale coefficient of reproducibility of .92, indicating excellent internal consistency. Two weeks test-retest reliability shows correlations of .85 and .88, indicating excellent stability. With regard to the RSE's validity, great deals of research demonstrate the concurrent, known groups, predictive and construct validity of RSE (Rosenberg, 1965). In present study, Urdu version of Rosenberg Self-Esteem Scale (Sardar, 1998) is used.

The Aga Khan University Anxiety and Depression Scale (AKUADS)

The Aga Khan University Anxiety and Depression Scale (AKUADS; Ali, Reza, Khan, & Jehan, 1998) is 25-items indigenously developed screening instrument for anxiety and depression. However scale does not differentiate between symptoms of anxiety and depression. The subjects are required to report their emotional state over a period of two weeks, on a 4-point Likert scale, ranging from *never (0)* to *always (3).*; AKUADS has demonstrated high internal consistency and good criterion and construct validity.

Beck Scale for Suicidal Ideation-Urdu Version (BSSI-U)

Beck Scale for Suicidal Ideation (Beck, Kovacs, & Weissman, 1979) is 19-items scale purporting to quantify and assess the current conscious suicidal intent by scaling various dimensions of self-destructive thoughts or wishes on a 3-point scale (0, 1, 2). The total score may range from 0 to 38 where high scores reflect presence and intensity of suicidal ideation. For the present study Urdu version of the Beck Scale for Suicidal Ideation (Ayub, 2008) is used. She reported Cronbach's Alpha of .75 which indicates reasonable internal consistency.

Procedure

The concerned authorities of the randomly selected departments were contacted to know about their willingness to let their students participate in the study. After getting formal permission students were approached and briefed about the nature of the research, and confidentiality regarding information and results. Formal consent through Consent Form was taken. First, the Demographic Form followed by this State Self-Esteem Scale – Urdu Version and Rosenberg Self-Esteem Scale (Sardar, 1998) were administered. Then after a break of 15 minutes, the Aga Khan University Anxiety and Depression Scale (Ali, Reza, Khan, & Jehan, 1998) and Beck Scale for Suicidal Ideation -Urdu Version (Ayub, 2008) were administered. At the end, the participants were thanked for their time and cooperation. After a period of one month, among these participants, 50 were contacted and SSES-Urdu Version was re-administered on them to make an estimate of the test-retest reliability. They were thanked for their cooperation.

Scoring and Statistical Analysis

After administration of the research measures, all the scales were scored according to respective scoring procedure. Then reliability and validity estimates were made.

Reliability Analyses

Three types of reliability estimates (internal consistency, test-re-test, and split-half reliability) were made using Statistical Package for the Social Sciences-Version 13. Cronbach's Alpha Coefficient was used to determine the Internal Consistency Reliability of SSES–Urdu Version. Pearson Product Moment Coefficient of Correlation was employed to determine Test-Retest Reliability and Split-Half Reliability.

Validity Analysis

Construct validity (i.e., Convergent) was computed for present scale. To measure the convergent validity of the State Self-Esteem Scale-Urdu Version, Rosenberg Self-Esteem Scale-Urdu Version (Sardar 1998), Beck Scale for Suicidal Ideation-Urdu Version (Ayub, 2008), and The Agha Khan University Anxiety and Depression Scale (Ali, Reza, Khan, & Jehan, 1998) were used. Pearson Product Moment Coefficient of Correlation was computed among SSES and these scales to make validity estimate.

RESULTS

PRELIMINARY ANALYSIS OF STATE SELF-ESTEEM SCALE – URDU VERSION

Table 1
Descriptive Statistics for Age of Entire Sample

Variables	Males (n=37)		Females (n=50)		Total Sample (N=87)	
	M	*SD*	*M*	*SD*	*M*	*SD*
Age	22.00	2.12	21.26	1.65	21.57	1.89

Table 2
Internal Consistency of State Self-Esteem Scale – Urdu Version

Number of Items	Cronbach's Alpha
20	.830

Table 3
Linguistic Equivalence (item to item) of Original English Version and Urdu Version of State Self-Esteem Scale

Item #	r	Sig.
1	.65**	.000
2	.70**	.000
3	.63**	.000
4	.48**	.000
5	.64**	.000
6	.70**	.000
7	.71**	.000
8	.46**	.000
9	.59**	.000
10	.71**	.000
11	.64**	.000
12	.54**	.000
13	.62**	.000
14	.63**	.000
15	.62**	.000
16	.30**	.000
17	.46**	.000
18	.60**	.000
19	.56**	.000
20	.37**	.000
Total	.80**	.000

**p<.01*

**PSYCHOMETRIC EVALUATION OF STATE SELF-ESTEEM SCALE –
URDU VERSION**

Table 4
Descriptive Statistics for Age of Entire Sample

Variables	Males (n=112)		Females (n=125)		Total Sample (N=237)	
	M	*SD*	*M*	*SD*	*M*	*SD*
Age	22.33	1.66	21.77	1.52	22.04	1.78

RELIABILITY ANALYSES

Table 5
Internal Consistency, Test-Retest and Split Half Reliability of State Self-Esteem Scale – Urdu Version

Internal Consistency (N= 237)	α	.80
Test-Retest Reliability (N=50)	r	.96
Guttman Split-Half Coefficient *(N= 237)*	r	.85

VALIDITY ANALYSIS

Table 6
Construct Validity (i.e., Convergent Validity) of State Self-Esteem Scale – Urdu Version

	Convergent Validity		
	RSE	**AKUADS**	**BSSI**
SSES-U	.49	-.51	-.29

Note: SSES-U = State Self Esteem Scale-Urdu Version, *p* <.05

Table 7
Item-Total Correlation of State Self-Esteem Scale - Urdu Version (N=237)

Item #	r	sig.
1	.49**	.000
2	.46**	.000
3	.44**	.000
4	.58**	.000
5	.43**	.000
6	.25**	.001
7	.45**	.000
8	.46**	.000
9	.32**	.000
10	.56**	.000
11	.56**	.000
12	.45**	.000
13	.54**	.000
14	.42**	.000
15	.37**	.000
16	.36**	.000
17	.40**	.000
18	.52**	.000
19	.60**	.000
20	.48**	.000

**p <.01

DISCUSSION

The primary objective of the present study was to adapt and validate State Self-Esteem Scale (Heatherton & Polivy, 1991) for Pakistani young adults.

Key findings of preliminary analysis of State Self-Esteem Scale-Urdu Version are as follow: Cronbach's alpha obtained is .83 showing satisfactory internal consistency. Moreover, statistically significant correlation is evident between all the items (i.e., '*r*' value ranging from .30 to .71, $p < .05$) and between the total scores ($r = .80$, $p < .05$) of the original English Version and Urdu Version of State Self-Esteem Scale which shows that Urdu Version has

strengthen equivalence with original scale. Overall, the results provided the preliminary support and revealed that scale is ready for next phase (i.e., Phase IV). Thus, in next phase, psychometric evaluation of Urdu Version of state self-esteem scale was accomplished.

Various researchers (e.g., Bashir, Afzal, & Azeem, 2008; Hambleton, 2005; Golafshani, 2003; McDonald, 1999; Anastasi & Urbina, 1997) have suggested that reliability and validity are the most important issues to be covered in translation and adaptation studies. Moreover, Kirk and Miller (1986) suggested three types of reliability that should be estimated in such researches, i.e., the degree of consistency of outcomes, the stability over time, and the similarity with a given time period. Hence, both validity and three types of reliability - internal consistency, test-retest, and split-half reliability- are estimated in the present study for Urdu Version of State Self-Esteem Scale.

Internal consistency was measured by Cronbach's Alpha. Cronbach's Alpha obtained in the present study is .80. DeVaus (1995) and DeCoster and Claypool (2004) stated that level of Cronbach's Alpha greater than .70 indicates satisfactory reliability. Thus, Cronbach's Alpha obtained in the present study is satisfactory and reveals that the items are consistent with one another and measure the same thing; eventually providing the evidence that State Self-Esteem Scale-Urdu Version is a reliable measure.

To estimate test-retest reliability of State Self-Esteem Scale-Urdu Version, Pearson Product Moment Coefficient of Correlation was employed. Results indicate statistically significant correlation ($r = .96$, $p < .05$) between the scores of two administrations of State Self-Esteem Scale-Urdu Version at two different times. Medina-Shepherd and Kleier (2010) have demonstrated that test-retest score less than .80 indicate that the participants did not answer the items the same way at the second administration of scale. While the test score of .80 and greater reflects the considerable reliability. Hence, the score obtained in the present study reveals the stability of the scores overtime and provide substantial test-retest reliability of the State Self-Esteem Scale-Urdu Version.

Split-half reliability was estimated through Guttman split-half reliability, and score obtained was .85. The Guttman split-half reliability score of .85 is considered as good in several studies (e.g. Wong, Chan, & Lau, 2008; Merlin et al., 2011). Kemeny (2007) has described that high level of split-half reliability indicates that a test score is stable and has meaning. Hence, the Guttman split-

half reliability score obtained in the present study indicates the similarity of the State Self-Esteem Scale-Urdu Version with a given time period.

To sum up, the results with respect to all three types of reliability that is estimated in the present study provide the evidence that Urdu Version of State Self-Esteem Scale is a reliable measure.

Validity estimate of the State Self-Esteem Scale-Urdu Version was also done. Convergent validity - a type of construct validity - is estimated. The convergent validity is referred to as a test should correlate highly with other variables with which it should theoretically correlate (Anastasi, 1988). Theoretically, state self-esteem is found to be correlated with constructs such as depression (Fung, Lui, & Chau, 2006; Franck & Raedt, 2007), anxiety (Besser, Flett, Hewitt, & Guez, 2008; Oosterwegel, Field, Hart, & Anderson, 2001) and suicidal ideation (Simons & Murphy, 1985; DeMan & Gutierrez, 2002) etc. Thus, to estimate convergent validity, Pearson Correlation between the scores of State Self-Esteem Scale-Urdu Version and the scores of Rosenberg Self-Esteem Scale - Urdu Version (Sardar, 1998); Beck Scale for Suicidal Ideation-Urdu version (Ayub, 2008); and The Aga Khan University Anxiety and Depression Scale (Ali, Reza, Khan, & Jehan, 1986) was computed. Results show statistically significant correlation between scores of State Self-Esteem Scale-Urdu Version and all three measures. It is evident that State Self-Esteem Scale-Urdu Version is positively correlated with Rosenberg Self-Esteem Scale - Urdu Version (r =.49, p< .05) and negatively correlated with Beck Scale for Suicidal Ideation-Urdu Version (r = -.29, p< .05) and The Aga Khan University Anxiety and Depression Scale (r = -.51, p< .05). These results provide an evidence of good convergent validity of the State Self-Esteem Scale-Urdu Version.

Additionally, item - total correlation of the Urdu Version of State Self-Esteem Scale was also estimated to judge the strength of relationships between every item and total scores. The correlation values range from .25 to .60. All the items significantly correlate with the total score (p < .05), however item # 6 shows weak correlation (r = .26; p< .05). The minimum acceptable item-total correlation in any scale is suggested to be .30 (e.g., Medina-Shepherd & Kleier, 2010) and excluding items with values lower than .30 is suggested only when Cronbach's Alpha is too low i.e., lower than .70 (Pallant, 2005). In case where Crobanch alpha is above .70, score range below .20 is considered as poor (Streiner & Norma, 1989). In our study, the Crobanch alpha obtained is .80 hence item # 6 was decided to include in the scale.

In conclusion, the analysis demonstrates that State Self-Esteem Scale-Urdu Version has a good psychometric soundness. Hence, it is a reliable and valid measure to use in Pakistan for assessing state self-esteem in young adults. Present study accomplished the need of a valid and reliable translated instrument for assessing the state self-esteem in young adults. In social sciences, even in carefully designed and conducted researches there appears certain limitations because one study conclusively cannot rule out all possible explanations. Similarly, this research also has some limitations which need to be considered while interpreting and generalizing the findings of the present study. The sample for the present study consisted of young adults with an age range of 18-25 years. Thus, the significant results should be interpreted with caution while generalizing any findings to a more varied population. Hence, in future research, a larger sample size and varied age groups can be employed. This would not only further validate the findings of the present study but would determine the utilizations of the adapted scale in different age groups.

REFERENCES

Ali, B. S., Reza, H., Khan, M. M., & Jehan, I. (1998). Development of an Indigenous Screening Instrument in Pakistan: The Aga Khan University Anxiety and Depression Scale. *Journal of Pakistan Medical Association, 48*(9), 261-265.

Anastasi, A. (1988). *Psychological testing* (6th ed.). Macmillan Publishing Company, Now York.

Anastasi, A., & Urbina, S. (1997). Psychological testing. In S. M. Havercamp (2009), *Evaluating the reliability and validity of the questionnaire for situational information: Test-Retest reliability*. Final Report: Series of six psychometric reports: Tallahassee, FL: Agency for persons with disabilities.

Ayub, N. (2008). Validation of Urdu translation of Beck Scale for Suicide Ideation. *Assessment, 15*(3), 287-293.

Bashir, M., Afzal, M. T., & Azeem, M. (2008). Reliability and validity of qualitative and operational research paradigm. *Pakistan Journal of Statistics and Operational Research, 4*(1), 35-45.

Battle, J. (2002). *Culture-Free Self-Esteem Inventories Examiner's Manual*. Austin, TX: Pro- Ed.

Beaton, D. E., Bombadier, C., Guillemin, F., & Ferraz, M. B. (2000) Guidelines for the process of cross-cultural adaptation of self-report measures. *SPINE, 25*(24), 3186-3191.

Beck, A. T., Kovacs, M., & Weissman, A. (1979) Assessment of suicidal ideation: The Scale for Suicidal Ideation. *Journal of Consulting and Clinical Psychology, 47,* 234-352.

Besser, A., Flett, G. L., Hewitt, P. L. & Guez, J. (2008). Perfectionism, and cognitions, affect, self-esteem, and physiological reactions in a performance situation. *Journal of Rational Emotive Cognitive-Behavior Therapy, 26*, 206-228.

Blascovich, J., & Tomaka, J. (1991). Measures of self-esteem. In J. P. Robinson, P. R. Shaver & L. S. Wrightsman (Eds.), *Measures of Personality and Social Psychological Attitudes* (Vol.1). San Diego, CA: Academic Press.

Bobbio, A. (2009). Relation of physical activity and self-esteem. *Journal of Perceptual and Motor Skills, 108,* 549-557.

Chau, J. P. C., Woo, J., & Chang, A. M. (2007). Psychological and physical factors predicting handicap following stroke. *Hong Kong Medical Journal, 13*(5), 34-36.

Crocker, J., Brook, A. T., Niiya, Y., & Villacorta, M. (2006). The pursuit of self-esteem: Contingencies of self-worth and self-regulation. *Journal of Personality*, *74,* 1749-1771.

Crocker, J., & Park, L. E. (2004). The costly pursuit of self-esteem. *Psychological Bulletin, 130*(3), 392-414.

DeCoster, J., & Claypool, H. (2004). Data Analysis in SPSS. Retrieved December, 02, 2010, from http://www.stat-help.com/notes.html.

DeMan, A. F., & Gutierrez, B. D. (2002). The relationship between level of self-esteem and suicidal ideation with stability of self-esteem as moderator. *Canadian Journal of Behavioral Science, 34*(4), 235-238.

De Vaus, D. A. (1995). Surveys in social research. In M. Rizwan & N. Syed (2010), Urdu translation and psychometric properties of Social Provision Scale. *The International Journal of Educational and Psychological Assessment, 8,* 33-47.

Fleming, J. S., & Courtney, B. E. (1984). The dimensionality of self-esteem II: Hierarchical facet model for revised measurement scales. *Journal of Personality and Social Psychology, 46*, 404–421.

Franck, E., & Raedt, R. D. (2007) Self-esteem reconsidered: Unstable self-esteem outperforms level of self-esteem as vulnerability marker for depression. *Behaviour Research and Therapy, 45,* 1531–1541.

Fung, L. C., Lui, M. H., & Chau, J. R. (2006). Relationship between self-esteem and the occurrence of depression following stroke. *Journal of Clinical Nursing, 15,* 505-506.

Golfashani, N (2003). Understanding reliability and validity in qualitative research. *The Qualitative Report, 8*(4), 597-607.

Geisinger, K. F. (1994). Cross-cultural normative assessment: Translation and adaptation issues influencing the normative interpretation of assessment instruments. *Psychological assessment, 6*(4), 304-312.

Greenier, K. D., Kernis, M. H., McNamara, C. W., Waschull, S. B., Berry, A. J., Herlocker, C. E., & Abend, T. A. (1999). Individual differences in reactivity to daily events: Examining the roles of stability and level of self-esteem. *Journal of Personality, 67*(1), 185-208.

Hamachek, D. E. (1971). Encounters with the self. New York: Holt, Rinehart & Winston.

Hambleton, R. K. (2005). Issues, designs, and technical guidelines for adapting tests into multiple languages and cultures. In K. H. Ranold, M. F. Peter

& S. D. Charles (Eds.), *Adapting educational and psychological tests for cross-cultural assessment.* New Jersey; Lawrence Erlbaum Associate.

Heatherton, T. F., & Polivy, J. (1991). Development and validation of a scale for measuring state self-esteem. *Journal of Personality and Social psychology, 60*, 895-910.

Ikegami, T. (2002). State self-esteem as a moderator of negative mood effects on person impression. *Journal of Experimental Social Psychology, 38*, 1-13.

Janis, I. L., & Field, P. B. (1959). Sex differences and factors related to persuasibility. In C. I. Hovland & I. L. Janis (Eds.), Personality and persuasibility. New Haven, CT: Yale University Press.

Johanson, I., & Malak, B. (2008). *Translation and National Adaptations of TIMSS 2007 Assessment and Questionnaires*. In J. F. Olson, M. O. Martin & I. V. S. Mullis (Eds). TIMSS 2007 technical report. Chestnut Hill, MA: TIMSS and PIRLS International Study Center, Boston College.

Jones, E. E., Rhodewalt, F., Berglas. S., & Skelton, J. A. (1981). Effect of strategic self-presentation in subsequent self-esteem. In F. H. Todd & P. Janat (1991), Development and validity of a scale for measuring state self-esteem. *Journal of Personality and Social Psychology*, *60*, 895-910.

Kemeny, A. (2007). Split-Half reliability of MLU and MLU2 in two methods of Utterance segmentation. Unpublished Master's Thesis, Brigham Young University, Pvovo, Utah.

Kernis, M. H., Grannemann, B. D., & Barclay, L. C. (1992). Stability of self-esteem: Assessment, correlates, and excuse making. *Journal of Personality, 60*, 621-644.

Kirk, J., & Miller, M. L. (1986). Reliability and validity in qualitative research. In G. Nahid (2003), Understanding reliability and validity in qualitative research. *The Qualitative Report, 8*(4), 597-607.

Lakey, B., & Scoboria, A. (2005). The relative contribution of trait and social influences to the links among perceived social support, affect, and self-esteem. *Journal of Personality, 73*(2), 361-388.

Linton, K. E., & Marriot, R. G. (1996). Self-esteem in adolescents: Validation of the state self-esteem scale. *Elsevier Science, 2*(1), 85-90

McDonald, R. P. (1999). Test theory: A unified treatment. London: Lawrence Erlbaum Associates.

Medina-Shepherd, R., & Kleier, J. A. (2010). Spanish translation and adaptation of Victoria Champion's Health Belief Model Scales for breast cancer screening--mammography. *Cancer Nursing, 33*(2), 93-101.

Merenda, P. F. (2005). Cross-cultural adaptation of educational and psychological testing. In R. K. Hambleton, P. F. Merenda, & C. D. Speilberger (Eds.), Adapting educational and psychological tests for cross-cultural assessment. Mahwah, NJ: Erlbaum. 321-334.

Merlin, T. J., Rajkumar, A. P., Reema, S., Tsheringla, S., Velvizhi, S., & Jacob, K. S. (2011). Construct validity and factor structure of Tamil version of Beck Cognitive Insight Scale to assess cognitive insight of patients with schizophrenia. *Acta Neuropsychiatric.* doi: 10.1111/j.1601-5215.2011.00571.x

Milton, J. (2009). Translation studies and Adaptation Studies. Intercultural Studies Groups In A. Pym & A. Perekrestenko. (Eds.) *Translation Research Projects 2*. (pp. 51-58). Tarragona: Intercultural Studies Group

Nussbaum, A. D., & Dweck, C. S. (2008). Defensiveness versus remediation: Self-theories and modes of self-esteem maintenance. *Journal of Personality and Social Psychology, 34*, 599- 613

Oosterwegel, A., Field. N., Hart, D., & Anderson, K. (2001). The relation of self-esteem variability to emotion variability, mood, personality traits, and depressive tendencies. *Journal of Personality, 69*(5), 689-708.

Pallant, J. F. (2005). SPSS survival manual: A step by step guide to data analysis using SPSS. In O. B. O. Monica & B. X. Lorena (2010). *Translation and*

cultural adaptation of the breastfeeding Self-Efficacy Scale to Portuguese. Acta Paul Enferm, 23(2), 230-238.

Pliner, P., Chaiken, S., & Flett, G. (1990). Gender differences in concern with body weight and physical appearance over the life span. *Personality and Social Psychology Bulletin, 16,* 263–273.

Rahman, A., Iqbal, Z., Waheed, W., & Hussain, N. (2003). Translation and cultural adaptation of health questionnaires. *Journal of Pakistan Medical Association, 53*(4), 142-147.

Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.

Rudolph, A., Schutz, A., & Schroder-Abe, M. (2008). *Validation of a German Version of the State Self-Esteem Scale.* Poster presented at the 29th. International Congress of Psychology, Berlin.

Sardar, S. (1998). Study of relationships among childhood paternal loss, sex-role orientation, self-esteem and locus of control in male and female students. Unpublished Doctoral Dissertation, Institute of Clinical Psychology, University of Karachi, Karachi, Pakistan.

Simons, R.L., & Murphy, P. I. (1985). Sex differences in the causes of adolescent suicide ideation. *Journal of Youth and Adolescence, 14*(5), 423-434.

Stansfield, C. W. (2003). Test translation and adaptation in public education in the USA. *Language Testing, 20*(2) 188-206.

Streiner, E. L., & Norma, G. R. (1989). *Health measurement scales: A practical guide to their development and Use.* Oxford: Oxford University Press. 39-52.

Wong, D. F., Chan, K. S., & Lau, Y. (2008). The reliability and validity of the Chinese Version of the Dysfunctional Attitudes Scale Form A (DAS-A) in a community sample. *International Journal of Psychiatry in Medicine, 38*(2), 141-152.