There are different English scales present that measure the construct but it was not according to Pakistan culture, so to overcome this situation to handle the biasness it was required to translate the scale in English for those who understand English better than Urdu. Emphasize to English in the global market added its universal importance. The Diagnostic and Statistical Manual of Mental Disorders introduced a category of adjustment disorder characterized by the changes in the emotions and behavior related symptoms and a feeling of inability to cope in response to any recognizable stressor or stresses that occur in the time period of 3 months from the commencement of the stressors. Conduct disturbance specifier of adjustment had conduct issues that include disobeying the norms of society, violation of the rights of others, anger bursts; revenge taking and drug use or abuse. The rate of prevalence of adjustment disorder was 11.5% among lowest educational level, 53.5%, single persons 54.8%, students 39.7, urban areas 71.2% and is more common among females (61.6%).

INTRODUCTION
Humans' adjustment is very necessary as it may create many problems which can affect any society. There are primarily different phases of human livelihood. According to world health organization a person is considered as adult if he or she is above age 19 years. In Pakistan number of adults are growing rapidly. Adults face many difficulties in their lives which triggered their adjustment level. Adjustment was referred as an unnatural and extreme reaction that results from sudden life stressors.

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There are different English scales present that measure the construct but it was not according to Pakistan culture, so to overcome this situation to handle the biasness it was required to translate the scale in English for those who understand English better than Urdu. Emphasize to English in the global market added its universal importance.
Due to no scales available in official language that is English according to Pakistani culture there was a dire need for it. So, in the current research the translation, adaptation and validation of Scale of Adjustment for Adults was done.

**METHODOLOGY**
The translation validation study design was used and the study was conducted at Department of Psychology, University of Gujrat from February to April 2019. The study was conducted in two phases. Ethical committee of department approved the study and written informed consent was taken from all participants.

**Phase I: Translation and adaptation of the scale**
**Sample:** The data were collected from 250 residents of district of Gujrat by using purposive sampling. Adult were population that was aged 19 years who had good fluency in English with the education above 16 years from the English medium institutions. Participants with any psychological disorder and physical disease were excluded from the study along with adolescents and children population. There was test retest administration of the scale with the time gap of 15 days in the administration. Mean age of the respondents was 25.80±9.55 years (range 19-72).

**Measure:** The Scale of Adjustment for Adults measured the psychological adjustment. It comprised of 48 items with 8 sub-scales related to depression, anxiety and conduct. The reliability was in between .711 to .938 with established validity of the scale.

**Procedure:** There was an excessive literature documenting the process of translation of questionnaires/scales that would enable their application in cross cultural settings and standardization of procedure, following steps were taken to translation the scale of adjustment for adults in international language (English). The translation was done using Forward-Back translation method. In the first step, Urdu scale was forward translated in English and was followed by backward translation in Urdu. In the next step, expert evaluation was conducted which was confirmed by an expert for linguistic and conceptual verification. Finally, a final English translated version was finalized by experts. The participants attempted to read items carefully and respond accordingly.

**Phase II: Validation of the scale**
**Sample:** The data were collected from 100 adults selected from Gujrat using purposive sampling.

**Measure:** The validity of the scale was established with the English version of Scale of Adjustment for Adults, Adjustment Disorder New Module-815 and perceived stress scale.

**Statistical Analysis:** All data analysis was performed using SPSS Statistics 21 and AMOS-21 for windows using Correlation, Confirmatory Factor Analysis (CFA) and reliability tests.

**RESULTS**
The English translated scale was modified by the panel of experts but no item was deleted. The correlation of 48 items was in the range of .300 to .672 indicating moderate to above significant correlation in test-retest administration. The confirmatory factor analysis indicated a p<0.001 thus confirming the model with GFI and AGFI indices were near to the appropriate limit of .90 (Table 1). The reliability of the scale shows alpha value above .915 thus indicated the scale as reliable (Table 2).

**Table 1. Model Fit Summary of Confirmatory Factor Analysis (n=250).**

<table>
<thead>
<tr>
<th>P Value</th>
<th>CMIN/DF</th>
<th>GFI</th>
<th>AGFI</th>
<th>CFI</th>
<th>RMSEA</th>
<th>RMR</th>
</tr>
</thead>
<tbody>
<tr>
<td>.000</td>
<td>1.340</td>
<td>.847</td>
<td>.823</td>
<td>.90</td>
<td>.037</td>
<td>.021</td>
</tr>
</tbody>
</table>

**Table 2. Cronbach Alpha of Scale of Adjustment for Adults (n=250).**

<table>
<thead>
<tr>
<th>Scale of Adjustment Problems</th>
<th>Total Items</th>
<th>Cronbach Alpha</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>41</td>
<td>.915</td>
</tr>
</tbody>
</table>

**Table 3. Correlation between Scales of Adjustment for Adults English, Adjustment Disorder and perceived stress (n=100).**

<table>
<thead>
<tr>
<th>Measures</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjustment Problems</td>
<td>-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adjustment Disorder</td>
<td>.310**</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>
| Perceived stress scale   | .168 | .041 | -
The CFI value of .901 was acquired after running five covariance and one regression weight. Further, among the 48 items 7 problematic items were deleted after inspecting the regression weights. Hence, the 41 items were reliable and valid as seen in the model below. The convergent validity of the English version was confirmed with Adjustment Disorder scale with the correlation of .310. The divergent validity showed no relation between the construct of adjustment and stress hereby confirmed the validity. Factor analysis is shown in the Fig.

DISCUSSION
In context of Pakistan, the construct of adjustment was not well developed. The available assessment tools are in English language and developed by emphasizing the western cultures and when those instruments used in different cultures possible biased result can be obvious. So, in this framework cultural difference mostly ignored when test administered on a population on which it is not originally developed. The main purpose of the study was to translate, adapt
and validate scale of adjustment for adults in international language (English). The result indicated a test retest correlation of items in the range of .300 to .672. There is a correlation value in between .300 to .700 shows moderate level of acceptance. To confirm the already established structure of Scale of Adjustment for Adult Urdu version in English the Confirmatory Factor Analysis was done. The model fit summary gave the p-value of 0.000 which is less than 0.001 hence confirmed the appropriateness of the structure of the English version as well. The structure was based on 8 factors that measure the anxiety, depression and conduct in terms of Cognitive, Physiological and Behavior Responses. The CFI of the scale was .901, which is acceptable limit for model fit. The indices of CMIN/DF and RMSEA were 1.517 and .038, respectively. Byrne confirmed that the CMIN/DF value should not exceed 320 whereas RMSEA is acceptable, if it is less than 0.0521 therefore, the results supported by literature. In case of GFI and AGFI the acceptable value is 0.90 or greater and the current study shows a value .847 and .823 that is near to .900 hence confirming the model. The reliability of the scale was .915 and literature indicated that the reliability values of .70 or greater is considered as statistically significant. The convergent and divergent validity was also established with the correlation of .310** and .168 respectively. According to the statistically acceptable limits the values of translated, validated and adapted scale of adjustment for Adults were in significant ranges.

CONCLUSION
The 41 item translated English version of the Scale of Adjustment for Adults was found reliable and valid.