GUIDELINES FOR DEVELOPING TEST ITEMS FOR FAMILY LIFE AND HIV/AIDS EDUCATION (FLHE)

By

Mr. B. O. Bello,
Nigeria Educational Research and Development Council,
Abuja, Nigeria.

Abstract

Responding to emerging global concerns through education in Nigeria is a trend that cuts across decades. Creating spaces for such new educational programmes on the time-table as separate subjects has left curriculum developers and managers helpless because the various school time tables are considered too crowded. The evaluation of such innovative educational concerns as the Family Life and HIV/AIDS education calls for attention. The general notion held by teachers and students is that any subject that is not on the time-table is non-examinable by public examination bodies. Hence, there is little seriousness attached to studying such subjects. However stemming the spread of the dreaded HIV/AIDS requires every seriousness it deserves. This paper therefore focuses on the Family Life and HIV/AIDS Education Curriculum, and strategies of generating test items for it at the primary and secondary school levels.

Introduction

Nigeria in the last three decades has had to contend with evolving various curricula to contain emerging educational issues of global concern. It has been possible to develop curriculum in population education, environmental education, citizenship education; gender education, drug education, sexuality education and now Family Life and HIV/AIDS education, yet the school time-table cannot accommodate any of them (NERDC, 1995). Against this background, NERDC (2003) concludes that the Family Life and HIV/AIDS education curriculum. “...Will guide school curriculum integration efforts...” Hence, it cannot be a separate examinable subject. Going by its own experience, the Action Health
Incorporated reported on the outcome of a meeting with the Lagos State Ministry of Education thus:

the idea of adolescent reproductive health as a separate discipline was ruled out as the curriculum was already overloaded. Many approved courses such as computer education, conservation education... were yet to find places in the time table! (AHI, 2002, p.15)

The school curriculum integration efforts is better described by the approach given by Familusi and Etim in NERDC (1995), as enabling the teacher to ‘plug’ in conveniently the Population and Family Life Education (POP/FLE) concepts and messages (or units) into an appropriate spot without displacing or upsetting the core curriculum content of the host subject. Over the years, it has been established that this integrative approach or strategy is ideal for Nigerian schools. (NERDC, 1995)

If the integrative strategy is considered ideal for the Nigerian schools, then Family Life and HIV/AIDS Education cannot occupy a space on the school timetable. How then will it be evaluated? The evaluation becomes imperative to determine the effectiveness of its introduction into the school system. Also, its evaluation would help determine the justification of the huge resources invested in the programme.

The Coals and Objectives of Family Life and HIV/AIDS Education The Family Life and HIV/AIDS Education emerged after a comprehensive review of the sexuality education which was considered to be too culturally insensitive. Sexuality education itself evolved as an education strategy needed to deal with adolescent reproductive health issues and the scourge of HIV/AIDS in Nigeria. The Population and Family Life Education Programme (Pop/FLE) implemented by the Nigerian Educational Research and Development Council (NERDC) from the mid-eighties serves as the watershed for the Family Life and HIV/AIDS education. NERDC (2003) has defined FLHE as

a planned process of education that fosters the acquisition of actual information, formation of positive attitudes, beliefs and values as well as
development of skills to cope with the biological, psychological, socio-cultural and spiritual aspects of human living. (NERDC, 2003)

The major goal of FLHE is the prevention against HIV/AIDS through awareness and education. The specific goals include providing learners with opportunities to
- develop a positive and factual view of self.
- acquire the information and skills needed to take care of their health and prevent spread of HIV/AIDS.
- respect and value themselves and others
- acquire the skills needed to make healthy decisions about their sexual health and behaviour.

As a preventive education strategy, FLHE aims to:
- assist individuals in having a clear and factual view of humanity
- provide individuals with information and skills necessary for rational decision-making about their sexual health,
- change and effect behaviour change on humanity
- prevent the occurrence and spread of HIV/AIDS.

The Approach and Structure of FLHE Curriculum

The FLHE curriculum was developed for primary, secondary and tertiary levels of education in Nigeria. It was introduced to achieve mainstream HIV/AIDS prevention through a comprehensive approach. It was also developed through an inclusive, representative and participatory process. The thematic approach was adopted for its development, according to NERDC, because of its “robustness and ability to accommodate more content without necessarily overloading the school curriculum”

The framework for the acquisition of knowledge of self and family living from childhood to adulthood determined to a large extent the structure of the curriculum. The curriculum demonstrates a comprehensive approach to HIV prevention education from primary to tertiary levels of education.
- It is structured around five themes.
- The contents to be learnt are spirally arranged for continuity and rising depth of
Contents as the student move from one level to the other.
- There is comprehensive coverage of the topics listed, leading to the achievement of intended learning outcomes.
- It is learner-oriented as the many activities are geared towards making learning practical and pupil-centred.

Family Life and HIV/AIDS Education is pertinent and basic to the survival of the individual and the society. Moreover, article 1 of the JOMTIEN Declaration on Education for All (EFA) identifies basic learning needs as including “the content required by every person for survival”.
The FLHE curriculum contents are developed around five major themes. Each theme covers knowledge, attitudes and skills. These themes are
- Theme 1. Human Development
- Theme 2. Personal Skills Development
- Theme 3. HIV Infection
- Theme 4. Relationships
- Theme 5. Society and Culture.
Each theme has topics identified with performance objectives measurable at the end of each lesson.

**Theme 1** in the lower primary of FLHE curriculum has two topics — parts of the human body, and Body Image. Puberty is added at the upper primary level. Only Puberty and Body Image made the topics of Theme 1 at the junior secondary school level.

**Theme 2** has more topics to treat. Values, Self-esteem, Decision-making, Communication, Assertiveness and Finding Help constitute the topics at the lower primary. It added Goal-Setting and Negotiation at the upper primary and Junior Secondary school levels.

**Theme 3** has lower primary topics such as HI V-what is it?, Body Abuse and Body Care. HIV Transmission, and Sexually Transmitted Infections and HIV/AIDS are the new topics included for upper primary and junior secondary schools respectively.

**Theme 4** covers three topics for the lower primary. These are Families, Friendship and Relationship within the large Society Relationship with visitors to Home is included for the upper primary, while Love is added for the junior secondary.
Theme 5 however covers two topics of FLHE at the lower primary, five at the upper primary and seven at the JS level. Humanity and Religion, Humanity and the Media are the topics at the lower primary, while added to those for upper primary, are Humanity and Society, Humanity and Diversity and Humanity and the Arts. The other 2 added for JS are Gender Roles, and Humanity and the Law. The total number of topics for the lower primary FLHE Curriculum contents is sixteen (16), while the upper primary has twenty-two (22) topics. The Junior Secondary School has twenty-four (24) topics, while the Senior Secondary School level FLHE curriculum contains thirty-four (34) topics. Adara (2004) in a discussion on FLHE Curriculum narrowed its contents down to twenty-six (26) topics, under 6 (six) themes:

Human Development - Anatomy (biological differences
  - Puberty (changes, body, mood etc)
  - Reproduction (at maturity & why)
  - Body Image.

Sexual Health. - Reproductive Health
  - HIV/STIs
  - Contraception
  - Abortion, Drug Abuse, Sex Abuse.

Society and Culture - Gender Roles
  - Myths, Taboos
  - Laws; Rights

Relationships - Families
  - Friendship
  - Marriage and Life Commitment.

Sexual Behaviours - Masturbation, Abstinence
  - Sexual dysfunction
  - Sexual identity (homosexual)

Personal Skills -Life Skills
  - Self Esteem
  - Values
  - Assertiveness
  - Goal setting
  - Decision making
- Negotiation
- Communication
- Finding Help.

These contents are put together to impact on HIV/AIDS at three levels — “before infection, when infection has occurred and when the infection results to death” (Nwagbara, 2003, P.65). The contents aim to equip young Nigerians with adequate knowledge and information capable of influencing positively their attitude and behaviour, and developing in them life coping skills such “that learners will incorporate the useful knowledge, reasoning ability, skills and values that will contribute to their protection against 1-1EV/AIDS” (Kelly, 1999). Scholars agree that curriculum implementation is the process of putting a change into practice. The desired change has many factors which influence the extent to which it can go, so curriculum and its contents, as the change agent need to be regularly, evaluated. This evaluation could be internal or external. The internal evaluation of the FLHE is to determine whether as a new process or product, it achieves the stated objectives of the design i.e. goals and objectives of FLHE. External evaluation on the other hand would help determine “whether the process or product does whatever it does better than some other process or product of the previous method.” (Taylor, NERDC, 1995 p.29). Student evaluation as distinct from curriculum evaluation is concerned with the individual rather than with the group. In assessing intended learning and other outcomes of FEHE, student evaluation becomes a component to be considered under internal evaluation of the FLHE Curriculum. Definitions abound in literature as to what evaluation is Cronbach (1963) as quoted by Taylor in NERDC (1995) defined it as “the collection and use of information to make decisions about an educational programme” NERDC (1988) said, it is “the process of making judgment about the success or failure of a programme”. It can be said therefore that evaluation involves making a judgment in determining the value or worth of something. In the case of FLHE, the primary aim is to bring about positive change and improvement in the implementation of the programme.
The main focus of evaluation of FLHE will be derived from its stated goals and objectives, which are

1. Mastery of social or interpersonal, cognitive and emotional coping skills.
2. Acquisition of knowledge and understanding needed to take care of their health including preventing HIV/AIDS and STIs.
3. Acquisition of attitudes and values necessary for the skills needed to make healthy decisions about their sexual health and behaviour.

Evaluation and development of test items for the Family Life and HI V/AIDS education should involve the systematic and deliberate inclusion of all three aspects of educational objectives. These are the cognitive, affective and psychomotor objectives, which ultimately will prevent the occurrence and spread of HI V/AIDS. There are three types of evaluation relevant to FLHE. First is the evaluation of knowledge, attitude and skills through the pre and post test items. The administration of the pre-test takes place at the beginning of a class interaction while the post-test takes place at the end. The test items administered in both cases are the same. It is to measure whether any gain, improvement or change in behaviour has occurred during the delivery of FLHE lessons.

The second type of evaluation is carried out continuously and periodically as class tests, mid-Term or end of term tests. These tests make up the internal examination of a school. A student is therefore assessed among his mates and rated accordingly. The test items generated for the examinations are usually drawn from the performance objectives which also focus on knowledge, attitude and skills. Some measurement occurs at this level because the tests are concerned with the process of qualifying the degree to which someone possesses the traits of Family Life and HIV/AIDS Education.

The third type of evaluation is the episodic measurement of students’ performance through the external examination by public examination bodies. Bodies such as WAEC, NECO, NTJ, NABTEB etc have their internal mechanisms for items generation, assessment and award of certificates for varying examinations. The first and second ones are relevant for internal evaluation while the third case becomes a subject of focus because of the non-examinable status, since FLHE is not on the school time-table. Elements of FLHE contents can be integrated into the various subjects test.
The first guideline to consider for generating test items for FLHE includes steps on the level of education, the age and types of examination. The second guideline includes steps on items in the curriculum structure such as theme, topic, performance objectives, core contents, activities, teaching/learning materials and evaluation guide.

The third guideline involves types of test items, i.e. verbal questions and answers sessions for lower primary and multiple choice, essay and critical reasoning questions for higher levels. Each type of test item is dependent on the level of education to which the student belongs.

Conscious efforts should be made to take cognisance of the provisions of the National Policy on Education (1998) on the various levels of education. The guideline on the levels, age and types of examination specifies that “children aged 6 to 11 + are given education for a duration that “shall be six years” and, an evaluation system called continuous assessment, which is a cumulative record of the child’s performance in various fields throughout his or her career and should include non-academic activities”. (NPE; 1998). The Policy also provides that the “Junior School Certificate, and the Senior School Certificate shall be based on continuous assessment and examination conducted by the state and federal examination boards, and .. .. a national examination” respectively. The second guideline demands for a careful programming of school curriculum at each level. This is structured from theme, topic to evaluation guidelines. The NPE, (1998) states that “Curriculum for Primary education shall include (among others) language of the immediate environment” and that “teaching shall be by practical, explanatory and experimental methods” while the “medium of instruction in the primary school shall be language of the environment for the first three years” during which period English language shall be taught as a subject. It becomes imperative therefore that administering test items at the lower primary level could be verbal, demonstrative and interactive. The use of multiple choice answers are applicable at all the levels of education, while essay writing and critical reasoning should be adopted more at the secondary and tertiary levels of education. Sample examination/test items.
A. i. **Level: Lower primary**
   ii. **Age Range:** (5) or 6 to 8
   iii. **Type of Test:** Pre and Post Test (to determine level of entry).

B. i. **FLHE THEME:** Human Development (Theme1)
   ii. **TOPIC** Body Image
   iii. **Performance objectives** — Pupils should be able to (1) recognise different sizes, height, and complexion of people (2) state ways of ensuring personal hygiene

iv. **CONTENTS**
1. Differences in sizes of the body (fat, slim); height of people (tall; short) and Complexion (fair, dark)
2. Personal hygiene include, keeping your nails short,
   > wearing clean and decent clothes, regular bath
   > mouth care etc.

C. **Examination type:** Verbal Administration.

**TEST ITEMS:** Multiple Choice Answers, and True or False.
(1) Regular bath is a good way of taking care of your body. (True/False)
(2) Keeping long nails can bring germs into our food. (True/False.)
(3) is not a way of taking care of your body.
   (a) regular bath (b) well kept hair (c) dirty mouth.

The test items will be repeated after the delivery of the lesson by the teacher, if it is a pre-post test.

2. A. i. **Level:** Junior Secondary
   ii. **AGE RANGE:** 11 TO 13 years
   iii. **TYPE OF EXAMINATION:** End of Term Test.
   iv. **CARRIER SUBJECT:** ENGLISH LANGUAGE - Letter Writing. B. i. **FLHE THEME:** Personal Skills.
   ii. **TOPIC:** Goal-setting
   iii. **OBJECTIVE:** Students should be able to
   (3) define goal setting
   (4) identify types of goals
   (5) describe the steps necessary for achieving the goals.

iv. **Contents**
(i) definition of goal setting
(ii) identification of types of goals: short-term goals; long-term goals.
(iii) Steps necessary for achieving goals
identify the goals
set time limit to achieve the goal
set achievable goals/realistic goals
always try to achieve set-goals.

C. Test items

Write on one of the following:

(i) A letter to your friend telling him/her why you want to become a medical doctor, for instance to help take care of PLWI-IA (Not more than 250 words).
(ii) A letter to your school magazine giving reasons why you should be appointed the next Health Minister by the President of Nigeria.

3. A. i. Level: Senior Secondary
   ii. AGE RANGE: 16+
   iii. TYPE OF EXAMINATION: National Examination.
   iv. CARRIER SUBJECTS: English Language/Biology.

B. i. Define Theme: HIV Infection
   ii. TOPIC: Sexually Transmitted Infections and HIV/AIDS.
   iii. OBJECTIVES: Students should be able to:
   2. Define STIs and HIV/AIDS
   3. Name different types of STIs
   4. list the signs and symptoms of AIDS
   5. describe modes of transmission of STIs, HIV
   6. list ways in which HIV is not transmitted
   7. identify the effects of HIV/AIDS
   8. enumerate the effects of STIs
   9. describe the behaviours that put people at risks of getting STIs, HIV/AIDS.
   10. list modes of prevention of STI/HIM
   11. describe ways of helping people that are infected and affected with HIV/AIDS.

C. Test items (to be moderated)
English language — Theory Questions

Answer one question from this part.

1. You are a speaker in an inter-school debate on the topic: “People leaving with HIV/AIDS need love and care from the Society than being stigmatised”. Write your speech for or against the proposition.

2. Write a story on “HIV/AIDS... A stroke too many.”

ii. Biology—Objective Questions.

1. One way by which HIV can be contacted is through
   (a) swimming pools (b) mosquito bites (c) shared syringes.

2. One way by which HIV cannot be contacted is through
   (a) barbers clippers (b) sharing clothes (c) deep kisses.

3. One effect of HIV is the damages to the body’s
   (a) blood system (b) Immune System (c) Sexual System.

4. A person with AIDS looks
   (a) ‘emaciated (b) robust (c) ferocious.

5. Make (J) against the level of risk you consider appropriate.
   b. Using a friend’s towel High-low-No Risk.
   c. Holding Hands with a PLWHA High-low-No Risk.
   d. From infected mother to her baby High-low-No Risk.

Public examination bodies assetable experienced teachers, curriculum experts and evaluators to develop examination items for their examinations. The items generated are then moderated through some mechanisms that standardise all the items before the administration of such on students. All relevant measurement criteria are taken into consideration during such exercise.

Conclusion

The prevailing scourge of HIV/AIDS in Nigeria has necessitated the adoption of the “education vaccine”. The Family Life and HIV/AIDS Education curriculum is a starting point for developing a comprehensive approach to I-fly/AIDS preventive education. The curriculum has been developed for the primary, secondary and tertiary level of education. FLI-IE though not a subject on the school time-table, its relevance and urgency to address the age group of 15—24 years that make up more than 50% of the national population cannot be overlooked. Added to this
is that in 1998, 60% of all HIV/AIDS cases came from this group of Nigerians. Evaluators, teachers and public examination moderators, cannot allow the non-examinable status of the FLHE (as an off-the-time-table subject) to prevent students and pupils from giving it all the seriousness it deserves. This paper posits that all mechanisms of evaluation (internal/external) be employed to checkmate students! pupils’ apathy to its study.

References


