

TRANSFORMATIVE MODEL OF LIFE'S SKILLS BASIC EDUCATION FOR GENDER IMPACT OF VIOLENCE, SEXUAL COERCION AND VULNERABILITY TO HIV/AIDS THROUGH DISTANCE MODE OF TEACHER TRAINING

By

Prof. Dr. M. Zafar Iqbal*

Abstract

The challenges facing the developing world in seeking long-term solutions to prevent the transmission of HIV are daunting. Youth and adolescent in Pakistan are prone to a number of novel problems due to changing social norms and values. These include HIV/AIDS, sexual transmitted infections, use of drugs, violence sexist attitude and sexual coercion. It is, thus, imperative to equip the adolescent of Pakistan with necessary life-skills to deal with challenges of life effectively and not letting it drift away towards the failure in life. The education system in Pakistan lacks the ability to inculcate life skills through its traditional teaching-learning process. It is the need of the hour that educational programmes with appropriate learning environment are necessary for the development of life-skills; using the Life Skills Based Education (LSBE) approach. Thus, empowering adolescents in challenging situations. Whole of this scenario demands for the development of this Life Skills Basic Education. This study aimed at identifying the activities for the secondary school teachers which they can plug into the daily classroom teaching for inculcation of life skills in adolescents. Pre and post tests were conducted on sample of 341 teachers who were given training through distance mode of AIOU on 10 modules **manual** developed for this purpose. The manual focused on various approaches to address risk behaviours of adolescents and to sensitize the participants on adolescents' risk behaviour, learn basic concepts related to sexuality, violence among adolescent transmitted infections including HIV and core of life-skills. The post test indicated a significant difference Transformative Index (TI) of 2.05 on all the 25 parameters of LSBE with 204.11 percentage gain maximum 821.96% for decision making skill.

* The writer is the Ex-Dean, Faculty of Education, Allama Iqbal Open University, Islamabad, Pakistan.

Preamble

Youth and adolescents make up a large segment (45%) of the population. Youth and adolescents in Pakistan are facing a numbers of problems on account of changing, like societal norms. These problems include HIV/AIDS, sexual transmitted infections, use of drugs, tobacco, alcohol, unemployment, delinquent behaviour and discrimination. Violence, gender abuse and sexist attitude also pose a challenge due to changing roles of men and women in our society.

It is imperative to equip the adolescents of Pakistan with necessary skills of life to deal effectively with challenges of life and not letting it drift away towards the failure in life. Life skill education improves the health of adolescent by promotion of physical, mental and social well being particularly, where health problems are related to behaviour. Behaviour is related to inability to deal effectively with stresses and pressures in life. Enhancement of life skills could make an important contribution to the promotion of health and well-being, since behaviour is more and more implicated as the source of health problems. In this way they can lead healthy life styles and contribute positively to the society rather than adolescent becoming a burden on it.

Few health issues have been more challenging to community values and capabilities than HIV/AIDS. More than 33 million adults and children are now suffering with HIV/AIDS (UNICEF, 2000). About nineteen million persons have died due to this epidemic so far. There still seems no cure. Social and economic powerlessness and low status of females than males is the root cause and greater vulnerability of females to HIV infection resulting in their disadvantaged position in coping with it and their greater suffering from its effects.

The rate of infection among women and girls has been increasing most rapidly in recent years (for example, from 41% in 1997 to 47% in 2000 worldwide; from 1% in 1984 to 24% in 1994 in Brazil). In Sub-Saharan Africa, the rate among women (12.2 million) has already surpassed that of men (10.1 million), and AIDS is now a leading cause of death among women aged 20-40 in Europe and North America. Half of all new HIV infections are in young people, aged 10 to 25, with adolescent girls in some places as much as five times more at risk than adolescent boys. Leading global institutions, working in HIV/AIDS prevention, agree that programmes must address these social, economic and political factors if they are to be successful. Gender is the recommended tool of analysis.

Adolescent girls of age (10-25) are at more risk than the peer boys. About 50-60% new HIV infections are adolescent people. According to the

estimate, AIDS is the main cause of death of females between age 20-40 in Europe and North America.

Life-skills may be defined as abilities to attain the adaptive and positive behaviour enabling the individual to cope with the changing demands of daily life. Life skills determine the valued behaviour and include critical thinking, interpersonal relationship, problem solving, self awareness and assertiveness. These help inculcate in young people the qualities, such as managing stress building, self-concept and better self development. Lack of these life skills cause a serious threat for HIV infection in adolescents.

Life-skills based education is helpful in providing experiences to the young people in acquisition of new knowledge and attitude as well as skills to change and share the pattern of behaviour. These skills are specifically helpful in higher secondary schools. UNICEF has created a special website for providing guidance on implementing life skill based education. The same website provides information on programmes by different countries. It contains the catalogue of the status in this regard.

The gender perspective examines female and male roles, responsibilities, opportunities and resources within the context of the distribution of power between women and men. A gender perspective is a critical tool in health matters related to sex because it aims for both women and men to be able to make informed and free sexual and reproductive decisions and gives them the means to do so. But, it is not a neutral instrument nor does it seek to exchange the places of dominance and subordination. Rather, it promotes equality and comprehensive human development. Women's empowerment is a key objective of any gender oriented development process and, moreover, of any development process aimed at achieving equity and sustainability.

Gender equality, empowerment and the advancement of women and girls are both gender and human rights goals. Combining gender and rights in the areas of sexuality and reproduction is critical.

For HIV/AIDS educators, the challenge is to understand gender differences and discrimination in social relations and to address this vulnerability and direct HIV/AIDS related risk in their work.

The teacher is the linch-pin in the total success of any innovation in educational programme like LSBE. As has been envisaged in the General Framework of Adolescence Education, efforts will be made to integrate elements

of adolescence education in syllabi and textbooks of relevant subjects being taught at different stages of school education. Even when this task is accomplished, the knowledge in these elements can be imparted effectively only through teachers.

Most of the elements of adolescence education are very sensitive, delicate and value-laden. Interaction with students on these elements can be effective only when a holistic approach is adopted. The entire school environment is to be made congenial to the imparting of knowledge in these elements to students. Beyond all the abstract arguments put forth in favour of the introduction of adolescence education in the school curriculum interaction between students and teacher is most significant.

Purpose of the Study

The aim of this research crystallizes from the need to develop LSPRE generic for package secondary school teachers which could be within the ODL system of AIOU, seeking the collaboration of relevant stakeholders particularly those of the teacher's associations. The objectives followed naturally: To facilitate several forms of the collaboration for developing the open distance learner in life skills training. To provide a deep motivation through grounded in domain expertise of life skills which may produce an immersive pedagogical environment for the teachers. To measure the enhancement in the achievement of integrating life skills with usual classes subject teaching.

Methodology

The purpose of this study was to identify the activities to the secondary school teachers which they can plug into the daily classroom teaching for inculcation of life skills in adolescent. Pre and post tests were conducted. The assessment provided the information at individual and group levels.

Sample

341 secondary school teachers were randomly selected from the Islamabad models schools, 178 were male and 163 female. Four months (one semester) training of AIOU on nine modules was conducted and these teachers plugged Life Skills Based Education in their daily teaching for 4 months. Pre-test and post tests were conducted in the classes where the teachers plugged these LSBE.

Table – I
Showing Sampling Frame for the Study

Teachers	Population	Sample	Characteristics of Sample
Male	1272	178	I. Married

Female	963	163	2. Qualification BA + B.Ed 3. Willing to take the course on LSBE through ODL system 4. Age not more than 35 years 5. Experience 3-5 years. 6. Teaching subjects of English, Urdu, Islamiyat, Pakistan Studies, General Maths and General Science adolescent 7. Studied education course during B.Ed.
Total	2235	341	

Delimitations of Life Skills Training

1. **Social Skills:** including
 - Communication skills
 - Negotiation skills
 - Assertiveness skills
 - Interpersonal skills
 - Cooperation skills
2. **Cognitive Skills:** including
 - Decision-making
 - Critical-thinking skills
3. **Emotional Skills:** including
 - Managing stress
 - Managing emotions
 - Self awareness

Training Package

1. Teacher's Manual

The Teacher's Manual developed aimed at integrated the compulsory subjects such as Urdu, English, Social Studies and Islamiyat. The Teacher's Manual was based on two chapters and ten modules. Basic knowledge and information related to life skills, sexually transmitted infections and HIV, and adolescent issues narrated in the chapters. Each module focused on one life skill. Each module described basic concepts and principle of the life skill, followed by two to three activities. The objectives, process and relevant material for each activity was included. Each module included plug-in- points for specific activities. The plug in points guides and facilitates the teachers to identify specific lesson where the life skill can be linked. However, the individual teacher can come up his/her ideas of integrating the activities and information with the lessons.

2. **Students' Workbook**

The student workbook meant to be provided to the students. The workbook had additional two to three activities on each life skill. The activities were practices with children in schools, along with formal curriculum and as co-curricular activities.

3. **Microteaching**

Lessons were delivered, observed and evaluated using microteaching equipment (video camera, TV, VCR etc)

Treatment

The training was based on principles of adult learning through distance education with drawing on experiential, participatory approach. The training included intense tutorial work with the tutors. The tutorial opted small groups or work in peers. The modules were developed in such a way that gives basic information on life skills and reproductive health and provided opportunity for developing life skills of participants for addressing reproductive health related issues, both in workshops and tutorial meetings in community and study centers respectively. The training provided in tutorial meeting and workshops included the following methods:

- Brainstorming
- Discussion
- Questions and Answers Method
- Presentations
- Group work
- Case studies
- Role Plays
- Practicum

The training based on ten modules was conducted for 4 months through distance education. The pre-test and post tests observations on 25 item schedule developed on 5-point scale were conducted. The researcher assessed the change in the level of knowledge by comparing the two observations. Trained teachers were asked to develop lesson plans in the subject of their choice while integrating the activities for the inculcation of at least two life skills. Then, they were required to teach to 10th or 11th grade student using microteaching. The post-test observation was done during microteaching. **Training was evaluated continuously on every step.** Modules and upcoming trainings **were improved in the light of feedback from this continuous evaluation.** The

tutorial meetings, workshops and individual assignments helped in formative evaluation.

Data Analysis

Data was analyzed using percentage gain of integrating the life skills into teaching by trainees alongwith calculating the transformation index of each group of male and female trainees separately alongwith the aggregate. The following is the fundamental formula which was used to find out transformative index, in this study:

Transformation Index

$$(TI) = \frac{M_{Post} - M_{Pre}}{S}$$

In this formula, M_{Post} is Mean of pre-test observation score, M_{Pre} Mean of post-test observation score and S is Standard Deviation. A transformation index of 1.0 indicated an increase of one standard deviation. Transformation index are often expressed as percentiles of percentage improvement to help with interpretation of what particular transformation index means. For example, an transformation index of 1.0 indicates that 341 of the treatment group (teachers) transformed their teaching so as to inculcate the particular life skill in adolescents upto 25%.

Table 2 indicates that there is 204.11% increase in the overall transformation with the manipulation of life skills by teachers the percentage gain for information on HIV/AIDS for males (384.62%) is less than those of females (441.67%). Achievement of females teachers in inculcation of decision making skills (728.57%) is maximum while that gain for gender roles was 960.50% by males against an aggregate of gain on this parameter. However percentage gain remained minimum (103.06%) on the parameter of respect for females transformative index (TI) of 2.1 on the inculcation of biological risks information on the part of teachers indicates a positive sign for LSBE through ODL.

Table 2 : Showing the net gain and transformative index in tier teaching of different subjects

PARAMETER	PERCENTAGE GAIN						TRANSFORMATIVE INDEX (TI)												
	Male			Female			Aggregate			Male			Female			Aggregate			
	Pre-test	Post-test	PG	Pre-test	Post-test	PG	Pre-test	Post-test	PG	Pre-test	Post-test	PG	Pre-test	Post-test	PG	Pre-test	Post-test	PG	
Integration in teaching of conceptual information on:																			
HIV/AIDS	2314	11214	384.62	1956	10595	441.67	4270	21809	410.75	1.89	2.69	0.7	1.81	2.73	0.92	1.95	2.71	0.75	
Transmission of epidemic	3026	10858	258.82	3097	10758	247.37	6123	21616	253.03	0.6	2.4	1.8	0.61	2.42	1.18	0.61	2.41	1.80	
Prevention from epidemic	3738	8366	123.81	4727	9943	110.34	8465	18309	116.29	0.71	1.84	1.11	0.81	1.92	1.11	0.77	1.88	1.11	
Youth violence and delinquene	3382	10146	200.00	1956	9454	383.33	5338	19600	267.18	0.76	2.01	1.25	0.45	1.83	1.38	0.61	1.92	1.31	
Drugs abuse	5518	12282	122.58	2771	10106	264.71	8289	22388	170.09	0.91	2.6	1.69	0.51	2.02	1.51	0.71	2.31	1.60	
Adolescence as general	6230	12638	102.86	3749	11736	213.04	9979	24374	144.25	0.93	2.81	1.68	0.85	2.82	1.97	0.89	2.815	1.92	
Gender sensitivity	2136	8366	191.67	4727	11899	151.72	6863	20265	195.28	0.65	1.93	1.28	0.97	2.91	1.94	0.81	2.42	1.69	
Biological risks	4628	10680	130.77	2119	10432	392.31	6747	21112	212.91	0.71	2.4	1.69	0.53	2.82	2.59	0.62	2.53	2.01	
TOTAL	30972	84550	172.99	25102	84923	238.31	56074	169473	202.23	0.90	2.34	1.40	0.82	2.43	1.58	0.87	2.37	1.52	
Integrating in teaching the activities on:																			
Communication skills	1958	7298	272.73	1956	7009	258.33	3914	14307	265.53	0.59	1.71	1.12	0.47	1.73	1.26	0.53	1.72	1.19	
Negotiation skills	1602	5874	266.67	1304	4727	262.50	2906	10601	264.80	0.48	1.69	1.01	0.46	1.53	1.07	0.47	1.51	1.04	
Assertiveness skills	4984	11748	135.71	978	7987	716.67	5962	19735	231.01	1.11	2.76	2.68	0.51	1.73	1.22	0.81	2.145	1.34	
Interpersonal skills	5162	11392	120.69	1793	8639	381.82	6955	20031	188.01	1.17	2.69	1.52	0.63	2.13	1.5	0.9	2.41	1.51	
Cooperation skills	3738	10502	180.95	5379	9617	78.79	9117	20119	120.68	1.06	1.99	0.93	1.81	2.79	0.98	1.43	2.39	0.96	
Decision-making	5874	9434	60.61	1141	9454	728.57	7015	18888	169.25	1.81	1.96	0.15	0.61	3.01	1.4	1.21	1.96	0.65	
Critical-thinking skills	1068	5162	383.33	2445	7335	200.00	3513	12497	255.74	0.54	1.58	1.04	0.92	1.87	0.95	0.73	1.725	0.99	
Managing stress	712	4806	575.00	978	5053	416.67	1690	9859	483.37	0.33	1.51	1.18	0.54	1.73	1.9	0.44	1.62	1.18	
Managing emotions	3738	7298	95.24	1467	6683	355.56	5205	13981	168.61	1.49	1.81	0.32	0.61	1.81	1.04	1.02	1.97	0.95	
Self awareness	2848	9256	225.00	1793	9128	409.09	4641	18384	296.12	1.07	1.93	0.92	0.97	2.01	1.02	1.02	1.95	0.64	
Sexist attitude	5874	8010	36.36	3423	7661	123.81	9297	15671	68.56	1.81	2.31	0.5	1.21	1.99	0.22	1.51	2.17	0.95	
Gender roles	890	9434	960.00	1141	9291	714.29	2031	18725	821.96	0.41	2.01	1.6	0.61	2.23	1.61	0.51	2.12	1.61	
Tolerance	1958	7654	290.91	5053	9943	96.77	7011	17597	150.99	0.61	1.76	1.15	1.13	2.42	1.29	0.87	2.13	1.26	
Violence control	2136	7476	250.00	2119	8802	315.38	4255	16276	282.56	0.99	1.73	0.74	1.07	1.82	0.75	1.03	1.77	0.65	
Respect for females	2314	7654	230.77	6031	9291	54.05	8345	16945	103.06	1.06	1.78	0.72	1.42	2.32	0.9	1.24	2.00	0.76	
Indiscriminate behaviour	3738	11392	204.76	3749	10432	178.26	7487	21824	191.49	1.37	2.62	1.25	1.07	2.48	1.41	1.22	2.5	1.28	
Gender sensitivity	1602	8544	433.33	2608	11573	343.75	4210	20117	377.84	0.98	1.91	0.93	1.31	2.66	1.35	1.15	2.285	1.03	
TOTAL	50196	142934	184.75	43358	142625	228.95	93554	285559	205.23	0.99	1.99	1.04	0.90	2.13	1.18	0.95	2.012	1.05	
Cumulative	81168	227484	180.26	68460	227548	232.38	149628	455032	204.11	1.39	3.33	1.92	1.27	3.50	2.16	1.34	3.38	2.05	

• PG stands for percentage gain

Limitations

1. Only one cycle of microteaching could be observed.
2. A score of extraneous variables may have distorted the findings.
3. Many of variables could not be controlled which could have effect on conclusion.

Conclusion

The study concludes that there is substantial impact of integration of life skilled based activities into teaching of career subjects if teachers are properly trained with this focus in mind. Training of teachers ensures the competence and challenge patriarchal attitudes and behaviours of teachers particularly male teachers.

This relates to the diagnosis of learning needs, developing the learning package, execution, harnessing new technology, updating the learners' skills and linkage with transformative model.

Recommendations

As a consequence, the study recommends that the transformative model of teacher training through open and distance system may be successful if it:

- Includes accurate and appropriate information on HIV/AIDS, risks and vulnerability and gender in all teacher training programmes, from in-house workshops through university courses.
- Provides all the information teachers require, in durable packaging, especially in rural areas where recommended texts may be difficult to access due to availability and cost.
- Establishes face-to-face, component, life skills-based training programmes for teachers and provide a back-up of substantial content and methodological guidance in training materials, including guidelines on how to conduct participatory lessons and activities.

It also emphasizes that this model may be properly tested as an operative model at national/international level. Hopefully it may prove a building block for achieving the desired goals. The study may be extended to larger numbers and more number and types of teachers in the second phase. ODL institutions may replicate study on larger sample and then make part of their system. The experiment may be conducted on longitudinal basis such that all the teacher trainees may be included in it.

REFERENCES

- AIDSCAP. (1996) *Behaviour Change - A Summary of Four Major Theories*. Arlington, LISA: Behaviour Research Unit BRU.
- IDSCAP (n.a) *Assessment and Monitoring of BCC Interventions: Reviewing the Effectiveness of BCC Interventions*. Arlington, VA: Family Health International.
- ANC (1994) 'Implementation Plan for Education and Training', ANC Education Department
- APAC-VHS. (n.a) *Training of Peer Educators in STD and HIV/AIDS Prevention*. Training manual from the AIDS Prevention and Control Project (APAC), Voluntary Health Services (VHS): a joint project supported by USAID and the Government of India. Ayadar, India: VHS. Email: apacvhs@vsnl.com
- APCASO. (2002) *HIV and Human Rights: A Training Manual for NGOs, Community - Groups and People Living with HIV/AIDS*. Manila: APCASO.
- Barnes, R. (1999) *Positive Teaching, Positive Learning*. London: Routledge.
- Bedworth, A.E. and Bedworth, D.A. (1992) *The Profession and Practice of Health Education*. Dubuque: Wm C. Brown Publishers.
- Biott, C. and Easen, P. (1994) *Collaborative Learning in Staffrooms and Classroom*. London; David Fulton Publishers.
- Brithard, J.K. and Galanes, G.J. (1989) *Effective Group Discussion*. Dubuque: Wm. C. Brown Publishers.
- Budlender D (1992) 'Human resource development and gender affirmative action' NEPI working paper.
- Collins, J. and Rau, B. (na) *AIDS in the context of development*, (no place/date of publication provided) See: www.JUstiGeafnca.org/aids7.html
- 'Draft White Paper on Education and Training' (1994) Government Gazette, 351, September, Pretoria.
- FHI/Nepal. (2001) *Operational Definitions and Working Guidelines for Behaviour Change Programs*. Nepal! Version. Kathmandu: FHI.

- Flanagan, D. and Mahler, H. (na) *How to Create an Effective Peer Education Project: Guidelines for AIDS Prevention Project*. Arlington, VA: FHI/AIDSCAP. /
- Frosyth, I., et al. (1999) *Delivering a 'Course: Practical Strategies for Teachers and Trainers*. London: Kogan Page Limited.
- Helland, A-M; Lexow, J; Carm, E. (1999). *The impact of HIV/Aids on Education, LINS Report No. 4*, Oslo: Centre for International Education, Faculty of Education, Oslo College.
- UNAIDS (1997) *Impact of HIV and Sexual Health Education on the Sexual Behaviour of the Young people, An overview Update*, UNAIDS, Geneva, Switzerland. 1997
- Introducing Change in the Curriculum: Life Skills in ESAR* (1999, Nairobi: ESARO)
- JHU/CCP and FHI. (2001.) *Training Guide on Interpersonal Communication and Counseling on HIV/AIDS and Sexually Transmitted Infection*. A project with funding from USAID in Nepal. Kathmandu: FHI.
- Johnson, D.W. et al. (1998) *Cooperation in the Classroom*. Minneapolis: Interaction Book Co.
- Kauchak, D.P. and Eggen, P.D. (1998) *Learning and Teaching: Research-based Methods*. Boston: Allyn and Bacon.
- Kemp, I.E., et al. (1994) *Designing Effective Instruction*. New York: Macmillan International.
- Kotecha P (1994) 'The Position of Women Teachers' in *Agenda21*, 21- 35.
- McKeachie, W.J. (1999) *Teaching Tips: Strategies, Research, and Theory for College and University Teachers*. New York: Houghton Mifflin Co.
- NAIDS, (2004) *Report on the World AIDS Epidemic*. Geneva: UNAIDS
- Rivers, K. and Aggleton, P. (n.a.) *Adolescent Sexuality, Gender and the HIV Epidemic*. London: University of London.
- Sees, B. and Glasgows, Z. (1998) *Making Instructional Design Decisions*. Princeton, NJ: Prentice Hall.

- Silberman, M. (1996) *Active Learning: 101 Strategies to Teach Any Subject*. Boston: Allyn and Bacon.
- Thousand, J.S. et al. (1994) *Creative and Collaborative Learning: A Practical Guide to Empowering Students and Teachers*. Baltimore; Brookes Publishing Co.
- UNAIDS. (1999) *Summary Booklet of Best Practices*. Geneva: UNAIDS.
- UNAIDS. (2005) *Fact Sheet on Stigma and Discrimination*. Geneva: UNAIDS
- UNAIDS. (2006) *AIDS Epidemic Update 2004*. Geneva: UNAIDS.
- UNESCAP. (2003) *Working Draft Life skills Training Guide for Young People: HIV/AIDS and Substance Abuse Prevention*. Bangkok: UNESCAP.
- UNESCO (2002) *A Cultural Approach to HIV/AIDS Prevention and Care, A Handbook for India*, UNESCO, Paris.
- UNESCO. (1991) *Adolescence Education modules, unpublished papers*, UNESCO Bangkok.
- UNESCO/UNAIDS. (2003) *HWAIDS and Education: A Toolkit for Ministries of Education*. Paris: UNESCO.
- UNESCO/UNICEF/WHO/ World Bank. (2000) *Focusing Resources on 'Effective School Health: A FRESH Start to Enhancing the Quality and Equality of Education*. Dakar: UNESCO.
- UNESCO: International Institute for Educational Planning, 2000, *Planning for Education in Context of HIV/Aids.*, Paris.
- UNESCO's strategy for HIV/AIDS preventive Education, Paris, April 2001.
- UNODC. (2004). *World Drug Report. Volume I*, Vienna: UNODC.
- WHO/UNAIDS/UNODC. (2004) *Advocacy Guide: HIV/AIDS prevention among injecting Drug Users*. Geneva: WHO.
- Women and AIDS: UNAIDS Point of View" (1997) "Technical Update. Learning and Teaching about AIDS at School"
- World Health Organisation www.who.org WHO Information Series on School Health www.who.int/hpr/archive/gshi/docs