



Original Research Article

Use of multiple choice questions to assess the knowledge and awareness about HIV/AIDS - A core competency, among first and second MBBS students of KBNIMS, Gulbarga

Shilpa N¹, Shashidhar V^{2,*}¹Dept. of Physiology, Khaja Banda Nawaz Institute of Medical Sciences, Gulbarga, Karnataka, India²Dept. of Paediatrics, ESIC Medical College, Gulbarga, Karnataka, India

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ABSTRACT

Introduction: Multiple choice questions (MCQ's) are a reliable and an efficient method of assessment. It is an objective type of assessment where, its efficiency depends on the item and the options given. A well framed MCQ is a very good tool for formative and summative assessment of the student. It is also been introduced in medical education, different entrance exams. The student can be assessed for the depth of the knowledge he/she has using MCQs. Also, the MCQs are less time consuming, cost effective and efficient and reliable.

Aim and Objective: To compare the knowledge and awareness about HIV/AIDS in 1st and 2nd MBBS students using MCQs as an assessment method

Materials and Methods: The study comprised 100 1st MBBS and 100 2nd MBBS students from KBNIMS, Gulbarga. Students were given 14 MCQs on HIV/AIDS and were asked to tick the correct answers.

Results: In our study we found that the performance of 2nd MBBS students was better compared to 1st MBBS students in majority of the MCQs

Conclusion: In this study we found that MCQs can be used as assessment tool to compare the knowledge and awareness about HIV/AIDS among UG medical students. We found that the knowledge and awareness of AIDS is better among 2nd year students who have the topic as core competency to learn.

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1. Introduction

The ultimate aim of medical education is to improve the health and the health care of the population.¹ The outcomes of all medical education programs, in general, are focused on this aim. So assessments become necessary to measure accurately the students' progress towards achievement of this outcome.^{1,2} Test with multiple choice questions (MCQ) and analyzing their options have become the choice of many examiners in medical colleges.^{1,3} Multiple-choice questions (MCQs) are one of the popular and accepted means of evaluation in medical education. MCQ test items are advantageous as they can cover wider section of lessons and scrutinize large numbers of students in

lesser time simultaneously. The tests can be employed for both paradigms of assessment (formative and summative). Colleges are incorporating MCQs tests in their examinations as there is rising trend of adopting MCQs for postgraduate medical entrance examinations. Its acceptance is based on its objectivity, feasibility, high internal consistency and accuracy.⁴ Although MCQs are not commonly used in assessment of MBBS and medical postgraduate students, these are often the choice for most of the graduate and postgraduate medical entrance examinations. MCQs can be designed to assess the higher cognitive levels of the students.⁵

With this prospect, the study was conducted to assess the knowledge and awareness on HIV/AIDS using MCQ as an assessment tool to cover wider area on a topic.

* Corresponding author.

E-mail address: docshilpasnandi@gmail.com (Shashidhar V).

2. Materials and Methods

The study included 100 1st MBBS students and 100 2nd MBBS students under the age group of 18-22 years of KBNIMS, Gulbarga. Institution Ethical Clearance was obtained for the study. Written consent was obtained from the students. The students were given 14 MCQ's on HIV/AIDS. The options given were yes or no type and true or false type. The numbers of options were between 2-4. The results were analysed using frequency and percentage and then compared.

2.1. Inclusion criteria

Students under the age group of 18-22 years.

3. Results

The study showed a better performance of 2nd year students compared to first year students. The Study shows that 2nd year students, as compared to 1st year students, knows the cause of HIV/AIDS (100%). 100% of 2nd year students answered correctly that it is not curable, whereas, 83% of 1st year students answered that it is not curable. There was no much difference in answering whether HIV/AIDS is contagious (37% and 30%). Regarding the modes of transmission, 2nd year students answered 100% for blood transfusion, unsterile needles and sexual transmission, whereas, mother to child transmission, the results were 92%, 73% and 76% respectively for pregnancy, delivery and breastfeeding. 98% of 2nd MBBS students knows that HIV/AIDS is not spread by mosquito, whereas, 83% in 1st MBBS students. On prevention of HIV/AIDS, majority of the 2nd MBBS students answered correctly compared to 1st year students, though not of much difference. Graph 1 shows the prevention of HIV/AIDS, and Graph 2 shows the modes of prevention of HIV/AIDS and Graph 3 shows the modes of transmission of HIV/AIDS.

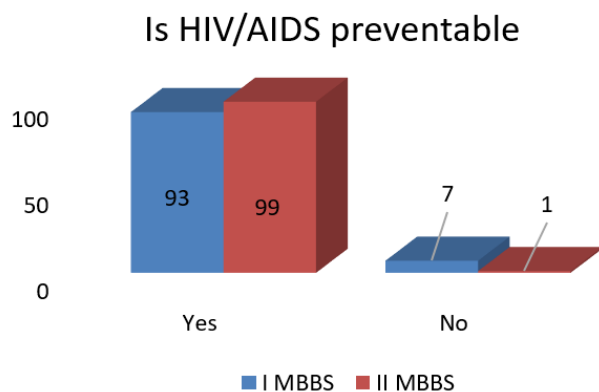


Fig. 1:

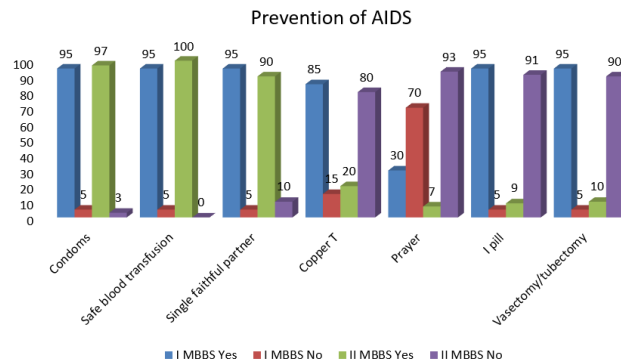


Fig. 2: Modes of prevention

4. Discussion

According to Angelo (1995) "Assessment can be defined as an ongoing process aimed at understanding and improving student learning".^{6,7} The goal of assessment in medical education is usually to support learning or to establish the competence of individual doctors; it helps person being assessed, identify and respond to his or her own learning needs.⁸ MCQs are considered as an efficient and reliable testing tool and could yield valid information of clinical reasoning skills.^{6,9} It has also been demonstrated that MCQs have predictive value for more recognized problem solving tasks and can elicit higher order problem solving ability such as forward reasoning.^{6,10,11} Magzoub et al concluded that the MCQ test is able to detect learning outcomes in the cognitive domain.¹²

MCQs bring a lot of advantages into the assessment process. In the first place, as a result of case specificity; the reliability and content validity of an examination depends on a broad sampling of problems; such sampling is easier to do with tests such as MCQs.¹⁰

In undergraduate medical education, a well-constructed MCQ can easily assess a student's ability to apply, evaluate and judge medical education knowledge.^{13,14} Scully (2017) invalidated the perception that MCQs can only assess lower ordered thinking¹⁵ and Palmer EJ and Devitt (2007) illustrated that the percentage of question testing lower ordered thinking is same in both MCQs and MEQs.¹⁶ It also shows that a well-constructed MCQ is a better tool to assess higher ordered thinking in medical students than an MEQ (Palmer & Devitt, 2007). There is nothing innate in the MCQ assessment format which prevents testing of higher-ordered thinking.¹⁷ Besides, medical schools are training their faculty members to develop multiple-choice questions which ensure assessment of higher ordered thinking of their students.¹³

There is a general perception that MCQs emphasize on knowledge recall i.e. Level I of revised Bloom's Taxonomy and MEQs are capable of testing higher ordered thinking. The criticism against MCQs is basically due to

Table 1:

| Have you heard about AIDS | 1 st year MBBS | | 2 nd year MBBS | |
|---------------------------|---------------------------|-----|---------------------------|-----|
| | N | % | N | % |
| Yes | 100 | 100 | 100 | 100 |
| No | 0 | 0 | 0 | 0 |

Table 2:

| What causes HIV AIDS | 1 st year MBBS | | 2 nd year MBBS | |
|----------------------|---------------------------|----|---------------------------|-----|
| | N | % | N | % |
| Virus | 98 | 98 | 100 | 100 |
| NA | 2 | 2 | 0 | 0 |

Table 3:

| Is HIV/AIDS curable | 1 st year MBBS | | 2 nd year MBBS | |
|---------------------|---------------------------|----|---------------------------|-----|
| | N | % | N | % |
| Yes | 11 | 11 | 00 | 00 |
| No | 83 | 83 | 100 | 100 |
| Don't know | 4 | 4 | 0 | 0 |
| NA | 2 | 2 | 0 | 0 |

Table 4:

| Is HIV/AIDS contagious | 1 st year MBBS | | 2 nd year MBBS | |
|------------------------|---------------------------|----|---------------------------|----|
| | N | % | N | % |
| Yes | 54 | 54 | 63 | 63 |
| No | 30 | 30 | 37 | 37 |
| Don't know | 10 | 10 | 0 | 0 |
| NA | 6 | 6 | 0 | 0 |

Table 5:

| What are the modes of sexual transmission | Yes | 1 st year MBBS | | | | 2 nd year MBBS | | | | |
|---|-----|---------------------------|----|-----|----|---------------------------|----|------------|----|----|
| | | No | | Yes | | No | | Don't know | | |
| | N | % | N | % | N | % | N | % | N | % |
| Heterosexual | 79 | 79 | 21 | 21 | 89 | 89 | 3 | 3 | 9 | 9 |
| Homosexual | 46 | 46 | 54 | 54 | 89 | 89 | 4 | 4 | 7 | 7 |
| Anal intercourse | 40 | 40 | 60 | 60 | 67 | 67 | 20 | 20 | 13 | 13 |
| Vaginal intercourse | 81 | 81 | 19 | 19 | 96 | 96 | 3 | 3 | 1 | 1 |

Table 6:

| Is unprotected sex harmless between two HIV infected people? | 1 st year MBBS | | 2 nd year MBBS | |
|--|---------------------------|----|---------------------------|----|
| | N | % | N | % |
| Yes | 25 | 25 | 30 | 30 |
| No | 63 | 63 | 70 | 70 |
| Don't know | 0 | 0 | 0 | 0 |
| NA | 12 | 12 | 0 | 0 |

Table 7:

| Percentage of prevention of HIV/AIDS by condom | 1 st year MBBS | | 2 nd year MBBS | |
|--|---------------------------|----|---------------------------|----|
| | N | % | N | % |
| 100% | 95 | 95 | 95 | 95 |
| 0% | 1 | 1 | 00 | 00 |
| < 100% | 4 | 4 | 05 | 05 |

Table 8:

| Knowledge about disease per se | True | 1 st year MBBS | | | 2 nd year MBBS | | |
|---|------|---------------------------|----|------|---------------------------|----|--|
| | | False | NA | True | False | NA | |
| A. Infected person need not show symptoms and signs of AIDS | 65 | 29 | 6 | 71 | 29 | 0 | |
| B. Body cannot defend itself from certain diseases | 88 | 7 | 5 | 89 | 11 | 0 | |
| C. HIV/AIDS can be cured if detected early | 50 | 34 | 6 | 46 | 54 | 0 | |
| D. HIV/AIDS can be identified by how he or she looks | 11 | 85 | 4 | 21 | 79 | 0 | |
| E. Vaccine available to prevent HIV infection to occur | 26 | 67 | 7 | 7 | 93 | 0 | |

Table 9:

| Knowledge about disease per se | Yes | 1st year MBBS | | | | 2nd year MBBS | | | |
|---|-----|---------------|----|----|----|---------------|----|----|---|
| | | Yes | No | % | % | Yes | No | % | % |
| F. Is there any difference between HIV and AIDS | 81 | 81 | 19 | 19 | 90 | 90 | 10 | 10 | |
| G. Symptoms of AIDS include | | | | | | | | | |
| a. Weight loss | 90 | 90 | 10 | 10 | 97 | 97 | 3 | 3 | |
| b. prolonged fever | 86 | 86 | 14 | 14 | 89 | 89 | 11 | 11 | |
| c. diarrhoea | 72 | 72 | 28 | 28 | 73 | 73 | 27 | 27 | |
| d. repeated infections | 93 | 93 | 7 | 7 | 96 | 96 | 4 | 4 | |

Table 10:

| Source of information about HIV/AIDS | | 1st year MBBS | | 2nd year MBBS | |
|--------------------------------------|----|---------------|-----|---------------|-----|
| | | % | % | % | % |
| A. TV | 84 | 84 | 100 | 100 | 100 |
| B. Radio | 68 | 68 | 100 | 100 | 100 |
| C. Friends | 71 | 71 | 100 | 100 | 100 |
| D. Parents | 58 | 58 | 100 | 100 | 100 |
| E. Partners | 53 | 53 | 100 | 100 | 100 |
| F. Community health workers | 69 | 69 | 100 | 100 | 100 |
| G. Civil Society | 55 | 55 | 100 | 100 | 100 |
| H. News papers/magazines | 82 | 82 | 100 | 100 | 100 |
| I. School | 83 | 83 | 100 | 100 | 100 |
| J. PU College | 88 | 88 | 100 | 100 | 100 |
| K. Internet | 86 | 86 | 100 | 100 | 100 |

Table 11:

| Was any formal sex education imparted in your school or college | | 1st year MBBS | | 2nd year MBBS | |
|---|----|---------------|----|---------------|---|
| | | % | % | % | % |
| Yes | 72 | 72 | 76 | 76 | |
| No | 25 | 25 | 24 | 24 | |
| NA | 3 | 3 | 0 | 0 | |

Table 12:

| Was it a part of the regular biology classes or was it taken differently | | 1st year MBBS | | 2nd year MBBS | |
|--|----|---------------|----|---------------|---|
| | | % | % | % | % |
| a. was part of biology class | 86 | 86 | 84 | 84 | |
| b. was taken differently | 10 | 10 | 16 | 16 | |
| c. Not answered | 4 | 4 | 0 | 0 | |

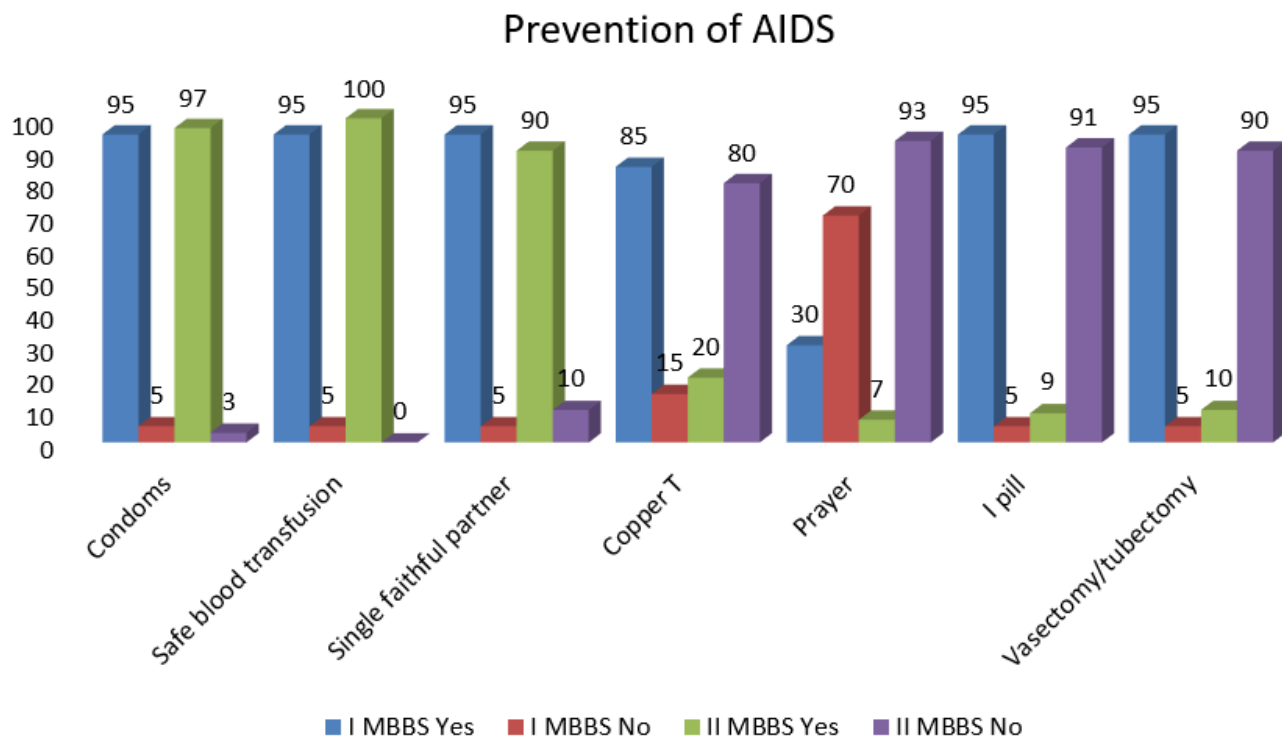


Fig. 3: Modes of transmission

its poor construction rather than the format itself. A study reveals that in assessing cognitive skills, MCQs significantly correlate with MEQs when their assessment's content is matched.^{13,16}

5. Conclusion

In this study we found that MCQs can be used as assessment tool to compare the knowledge and awareness about HIV/AIDS among UG medical students. We found that the knowledge and awareness of AIDS is better among 2nd year students who have the topic as core competency to learn.

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7. Conflict of Interest

None.

8. Source of Funding

None.

References

- Namdeo S, Sahoo B. Item analysis of multiple choice questions from an assessment of medical students in Bhubaneswar, India. *Int J Res MedSci.* 2016;4(5):1716–1719.
- Chandratilake M, Davis M, Ponnampuruma G. Evaluating and designing assessments for medical education: the utility formula. *Intern J Med Edu.* 2009;1:1–7.
- Hingorjo MR, Jaleel F. Analysis of one-best MCQs: the difficulty index, discrimination index and distracter efficiency. *J Pak Med Assoc.* 2012;62:142–148.
- Chandra K. Creating Valid Multiple-Choice Questions (MCQs) Bank with Faculty Development of Pharmacology. *Indian J Physiol Pharmacol.* 2018;62(3):359–366.
- Patil R, Palve S, Vell K, Boratne A. Evaluation of multiple choice questions by item analysis in a medical college at Pondicherry, India. *Int J Community Med Public Health.* 2016;3(6):1612–1616.
- Olayemi E. Multiple Choice Questions as a tool for assessment in medical education. *Ann Biomed Sci.* 2013;2(1).
- Angelo T. Reassessing (and defining) assessment. *AAHE Bull.* 1995;48:7–9.
- Auewarakul C, Downing SM, Jaturatamrong U, Praditsuan R. Sources of validity evidence for an internal medicine student evaluation system: an evaluative study of assessment methods. *Med Educ.* 2005;39(3):276–283.
- Farmer EA, Page GA. Practical guide to assessing clinical decision-making skills using the key features approach. *Med Educ.* 2005;39:1188–1194.
- Fenderson BA, Damjanov I, Robeson MR, Veloski JJ, Rubin E. The virtues of extended matching and uncued tests as alternatives to multiple choice questions. *Hum Pathol.* 1997;28(5):526–532.
- Gruppen L, Grum C. Multisite reliability of a diagnostic pattern-recognition knowledge - assessment instrument. *Acad Med.* 1994;p. 65–67.
- Hakstian AR. The Effects of Type of Examination Anticipated on Test Preparation and Performance. *J Educ Res.* 1971;64(7):319–324.

13. Javaeed A. Assessment of Higher Ordered Thinking in Medical Education: Multiple Choice Questions and Modified Essay Questions. *Med Ed Publish*;doi:10.15694/mep.2018.0000128.1.
14. Vanderbilt A, Feldman M, Wood I. Assessment in undergraduate medical education: a review of course exams. *Medical Education Online*. 2013;18(1):20438–20438. Available from: <https://dx.doi.org/10.3402/meo.v18i0.20438>. doi:10.3402/meo.v18i0.20438.
15. Scully D. Constructing multiple-choice items to measure higher-order thinking. *Res Eval*. 2017;22(4):1–13.
16. Palmer EJ, Devitt PG. Assessment of higher order cognitive skills in undergraduate education: modified essay or multiple choice questions? Research paper. *BMC Med Educ*. 2007;7(1):49.
17. Norcini JJ, Swanson DB, Grosso LJ, Shea J, Webster GD. A comparison of knowledge, synthesis, and clinical judgment. Multiple-choice questions in the assessment of physician competence. *Eval*

Health Prof. 1984;7:485–499.

Author biography

Shilpa N Assistant Professor

Shashidhar V Associate Professor

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