

A health science book for primary school children

---

# The Health Choices Book: Learning to think carefully about treatments



**Informed Health Choices**

Title The Health Choices Book: Learning to think carefully about treatments. A health science book for primary school children

Authors Matt Oxman,<sup>1</sup> Sarah Rosenbaum,<sup>1</sup> Allen Nsangi,<sup>2</sup> Daniel Semakula,<sup>2</sup> Angela Morelli,<sup>1</sup> Astrid Austvoll-Dahlgren,<sup>1</sup> Andrew D. Oxman,<sup>1</sup> Nelson K. Sewankambo,<sup>2</sup> Margaret Kaseje,<sup>3</sup> Laetitia Nyirazinyoye,<sup>4</sup> Claire Glenton,<sup>1</sup> Simon Lewin<sup>1</sup>

Illustration Sarah Rosenbaum, Miriam Grønli

Design Sarah Rosenbaum, Angela Morelli

Publisher Norwegian Institute of Public Health

ISBN 978-82-8082-709-8 (978-82-8082-708-1: digital version)

Date March 2016

Citation The Informed Health Choices Group. The Health Choices Book: Learning to think carefully about treatments. A health science book for primary school children. Oslo: Norwegian Institute of Public Health; 2016.

<sup>1</sup>Global Health Unit, Norwegian Institute of Public Health, Oslo, Norway <sup>2</sup>College of Health Sciences, Makerere University, Kampala, Uganda

<sup>3</sup>Great Lakes University of Kisumu, Kenya

<sup>4</sup>School of Public Health, College of Medicine and Health Sciences, University of Rwanda, Kigali

Unrestricted non-commercial use, distribution and reproduction of this book is permitted, provided the source is properly cited. Feedback about how to improve this book is welcome and should be sent to: [contact@informedhealthchoices.org](mailto:contact@informedhealthchoices.org).

This book was prepared as part of the Informed Health Choices project ([www.informedhealthchoices.org](http://www.informedhealthchoices.org)), which was supported by the Research Council of Norway, project number 220603/H10. The funder did not have a role in drafting, revising or approving the content.



# 7

## Fair comparisons with many people

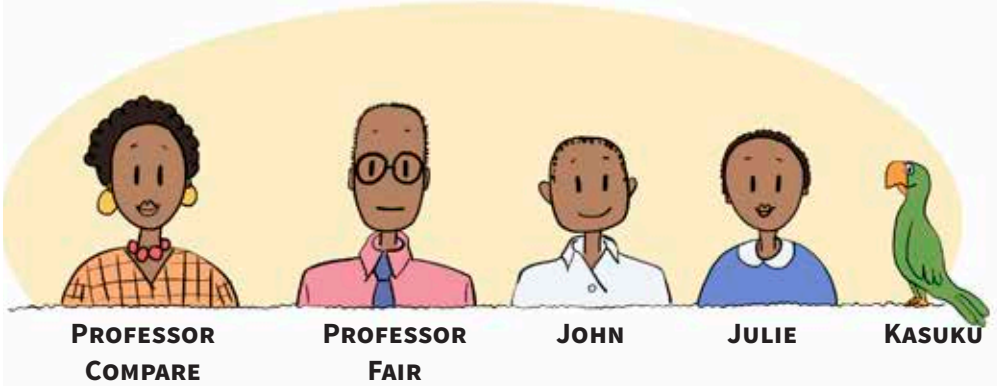
### What you will learn in this lesson:

1. Why health researchers should give the treatments to many people in their fair comparisons

### Keyword for this lesson:

*Finding something by **CHANCE** in comparisons that were too small is finding something without knowing why it happened because the comparisons were too small.*

## People in this lesson



**PROFESSOR  
COMPARE**

**PROFESSOR  
FAIR**

**JOHN**

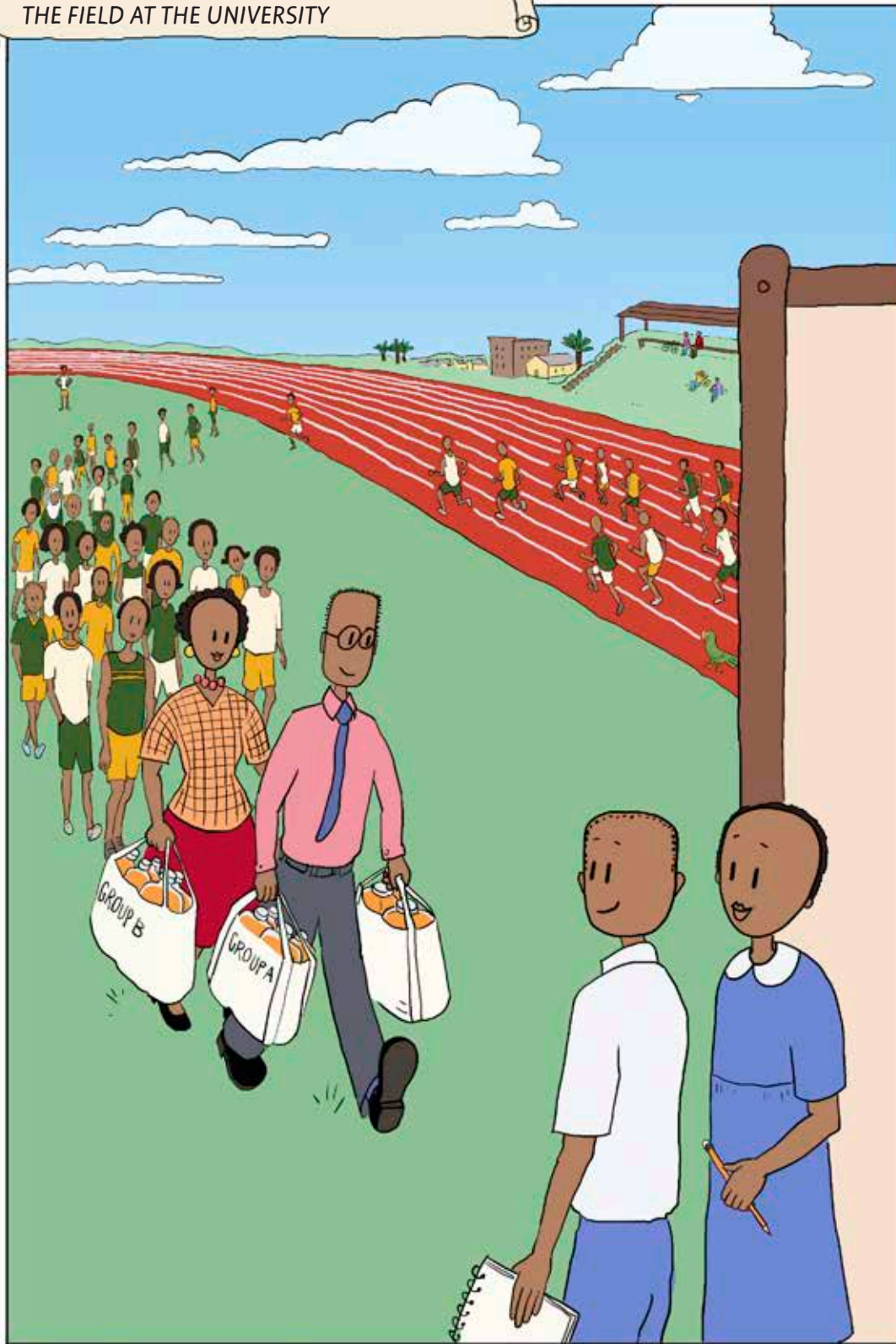
**JULIE**

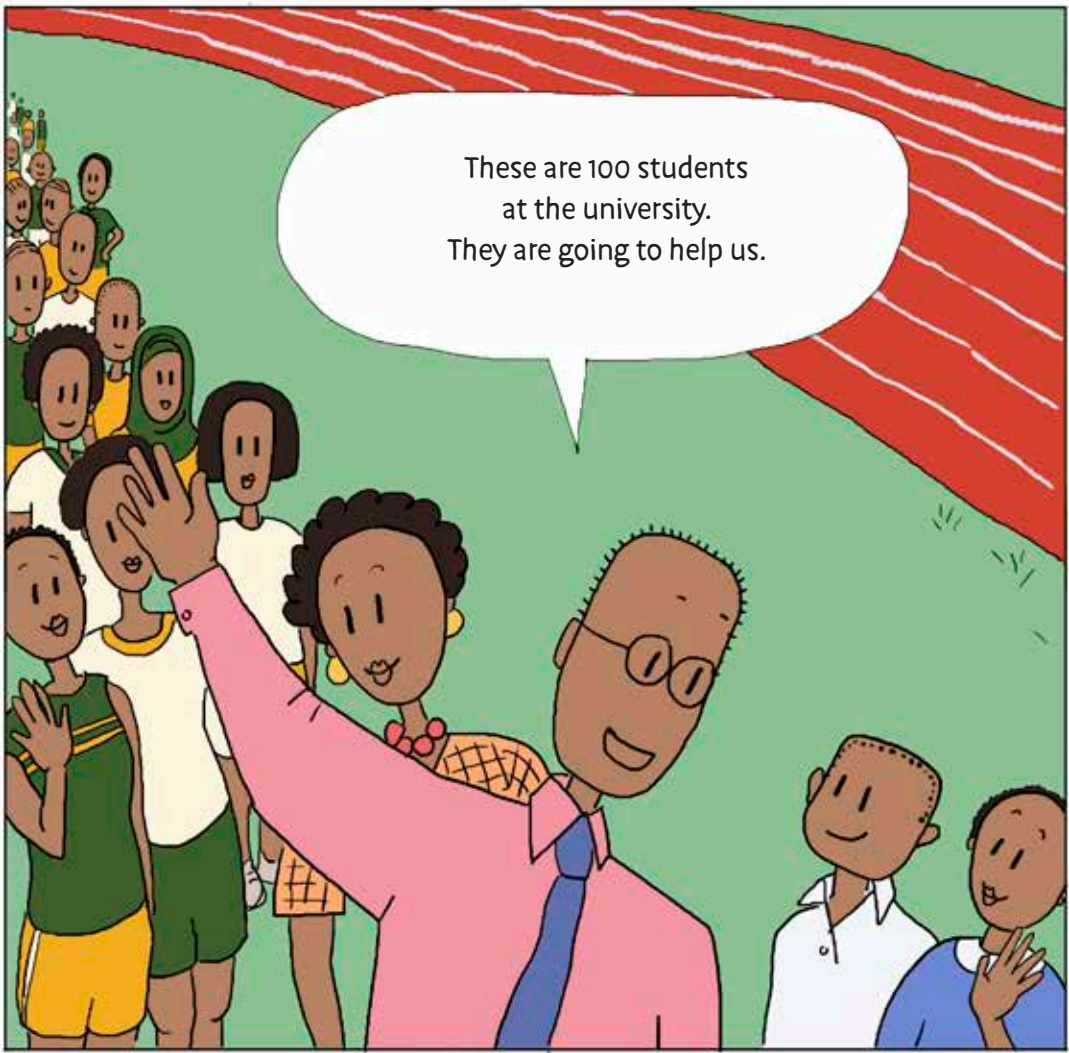
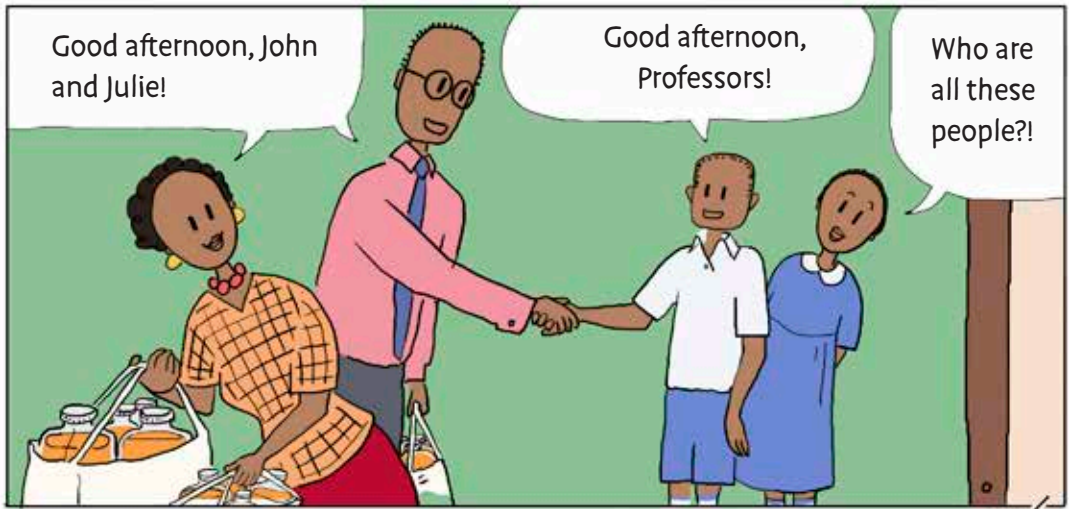
**KASUKU**



### **RUNNERS AT THE UNIVERSITY**

*These are 100 runners at the university. They have come to the field to help John, Julie and the Professors make comparisons.*





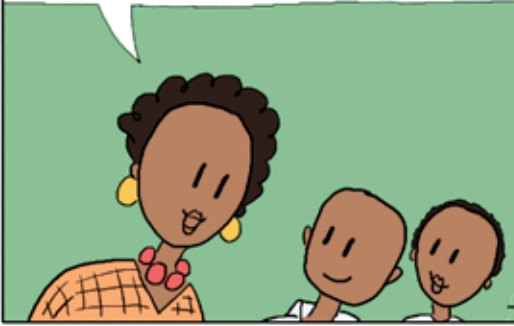


*Finding something by **CHANCE** in comparisons that were too small is finding something without knowing why it happened because the comparisons were too small.*

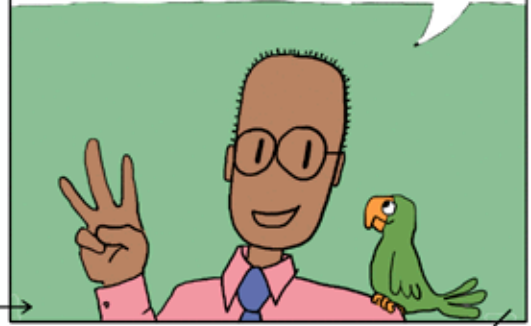
*IN LUGANDA: “Ekintu okuzuulibwa oba okusangibwa lwa mukisa bukisa oba lwa lukisakisa”*

*IN KISWAHILI: “Kibahati”*

We will use the same treatments as last week: juice and water.

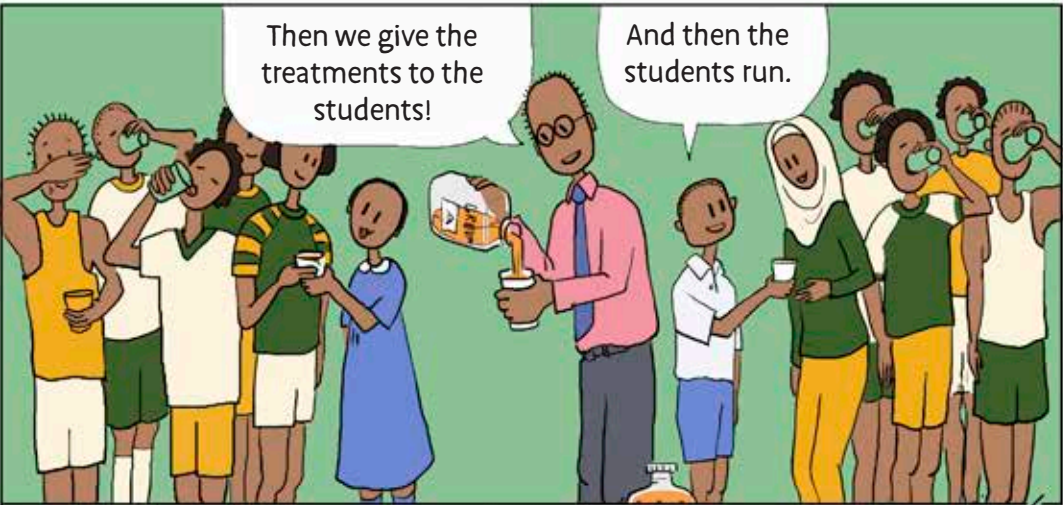


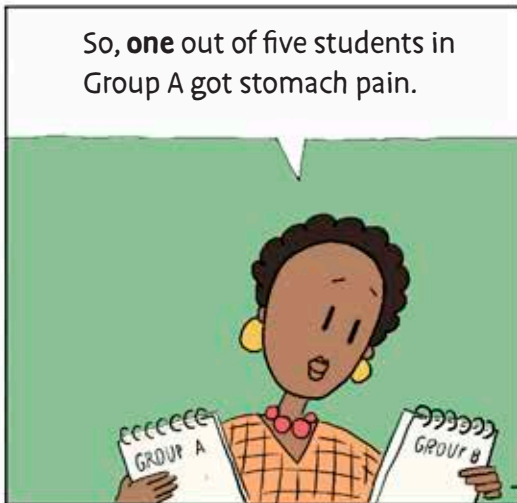
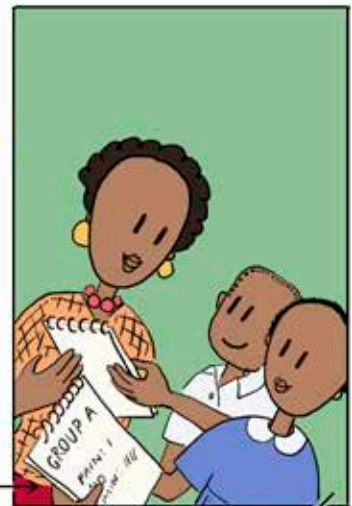
First we will make three comparisons with only 10 runners.



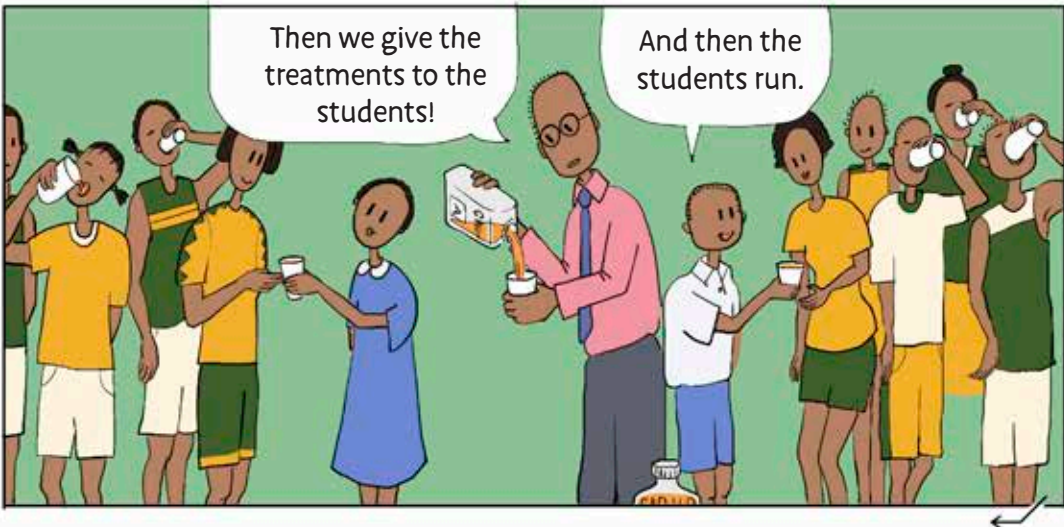
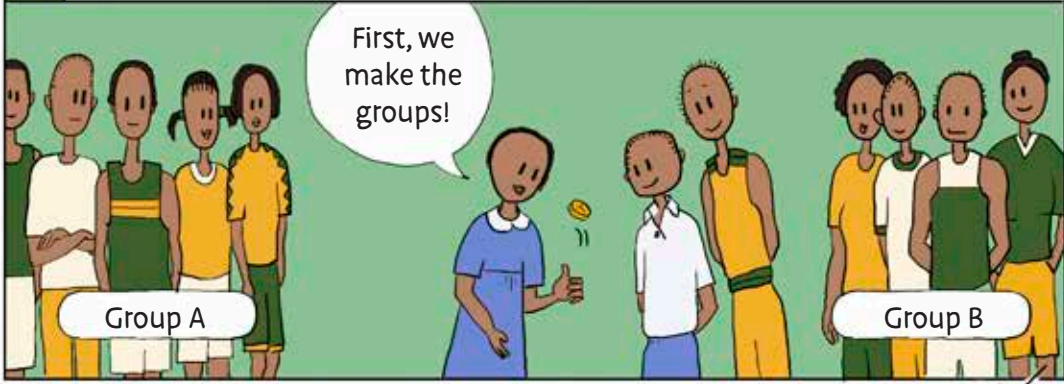


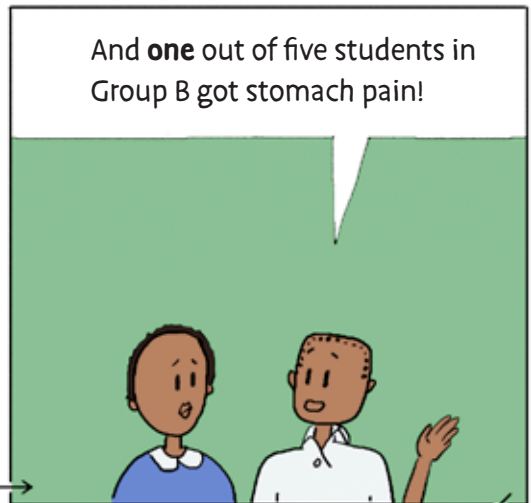
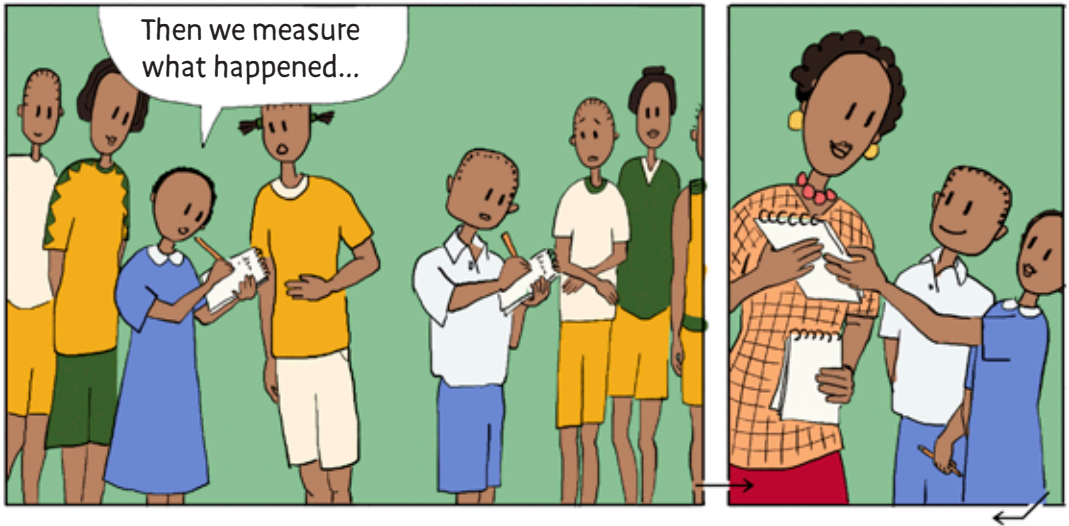
1 First fair comparison with 10 runners





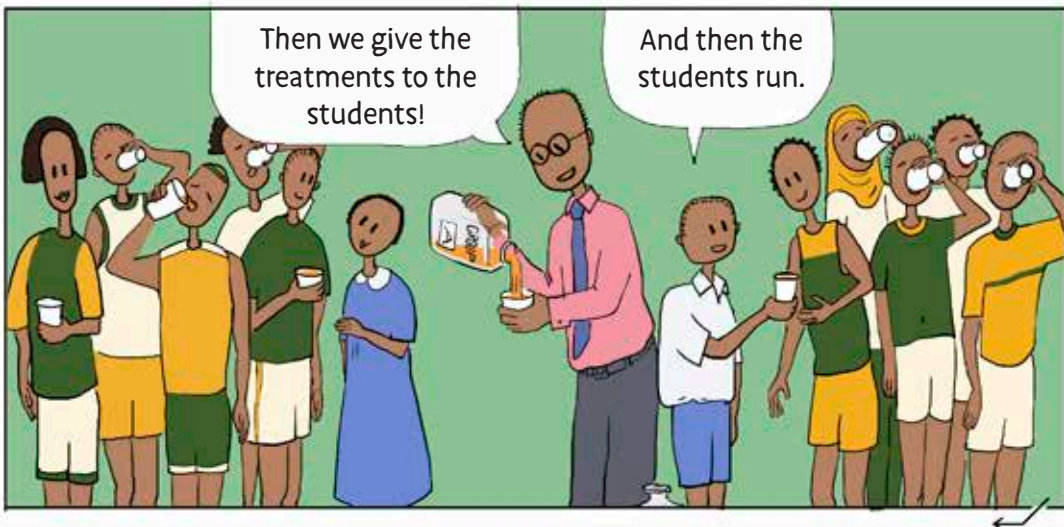
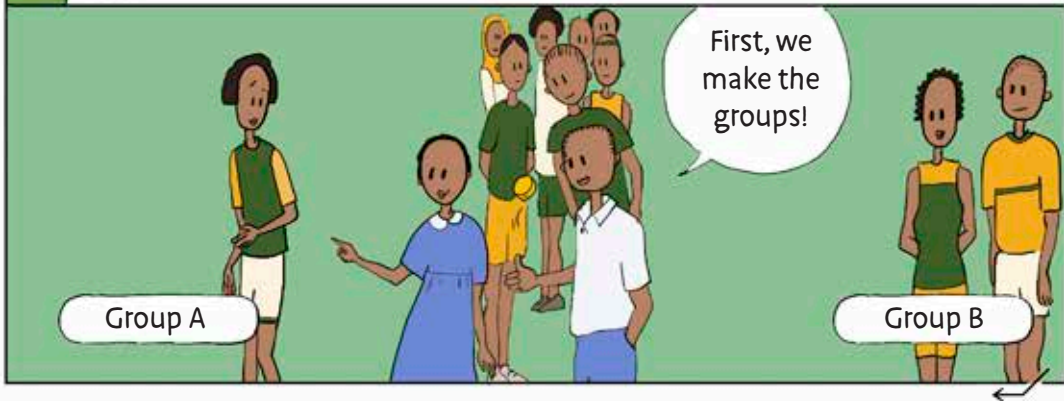
2 Second fair comparison with 10 runners

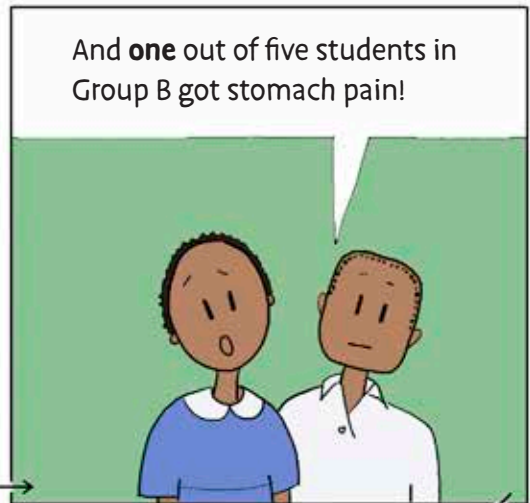
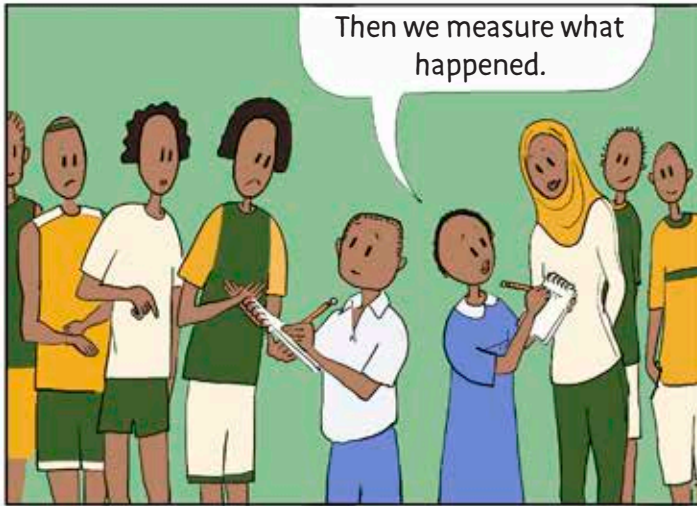






### Third fair comparison with 10 runners



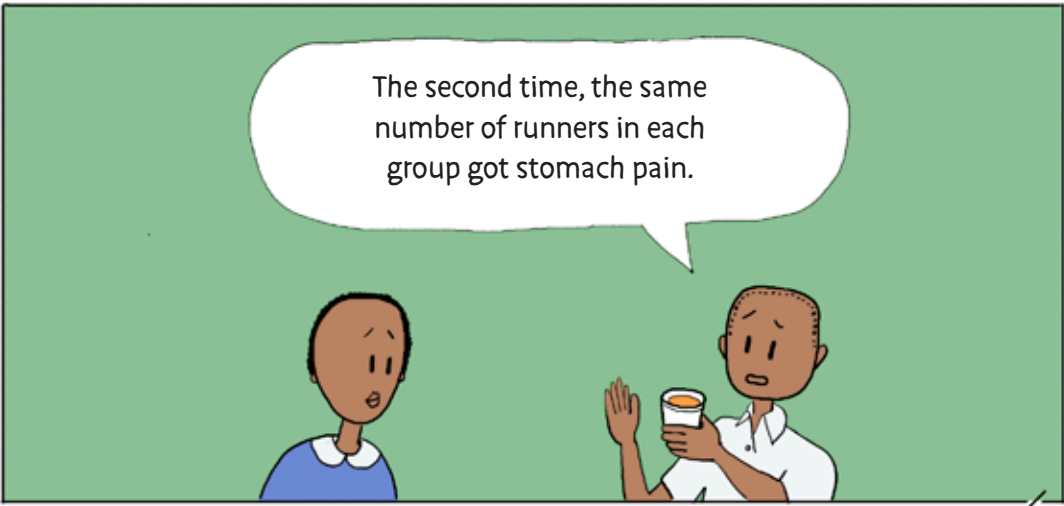
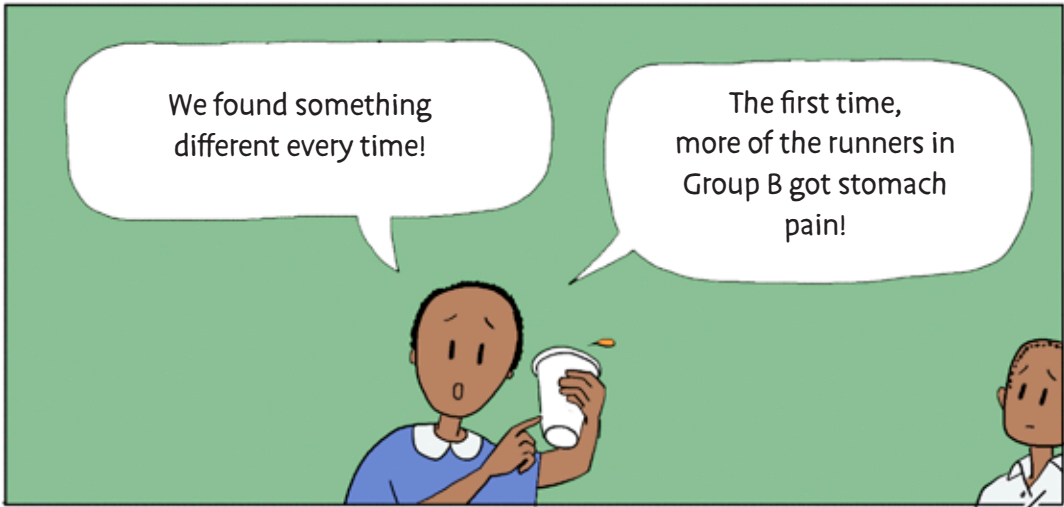


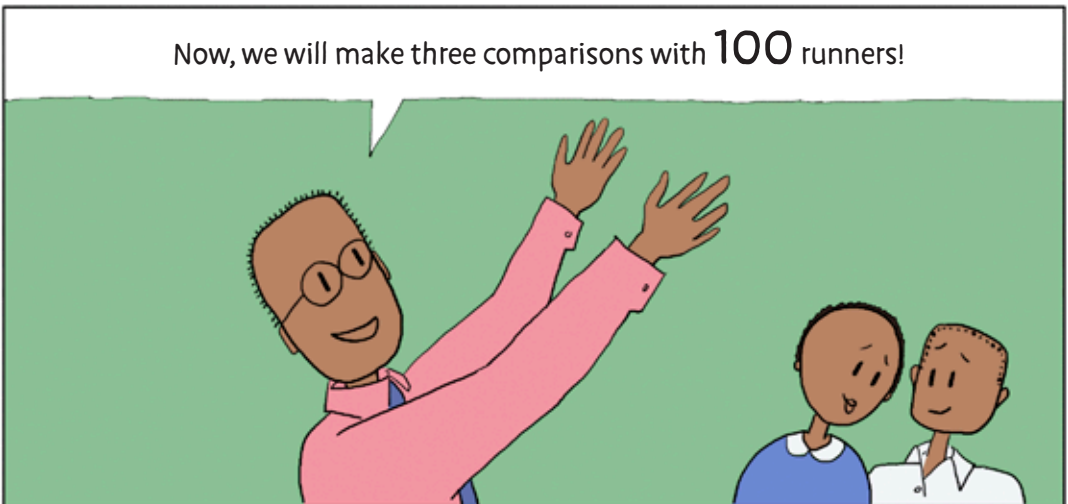
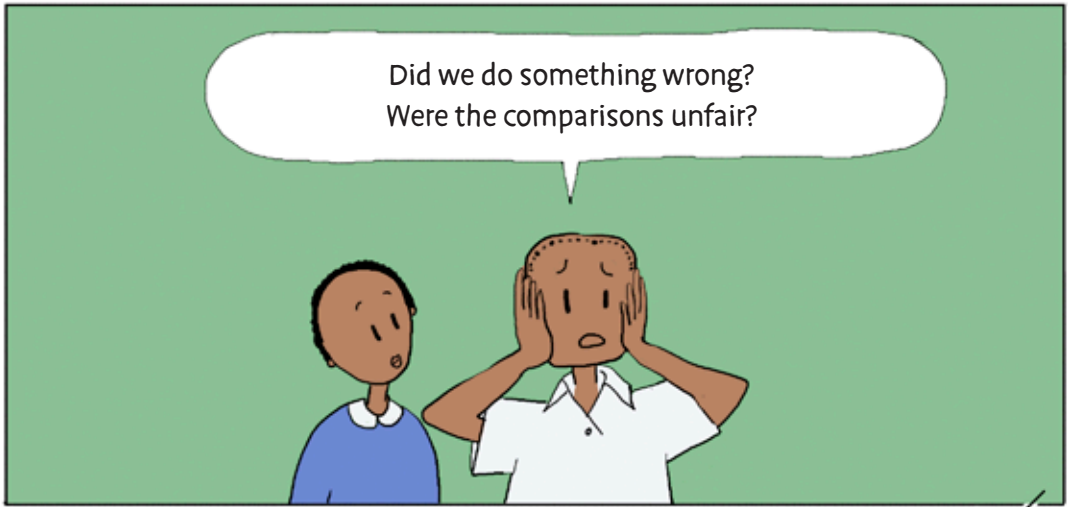
So what do you think of these findings, John and Julie?

DOES DRINKING JUICE BEFORE RUNNING GIVE MORE PEOPLE STOMACH PAIN COMPARED TO DRINKING WATER ?

Number of people with pain:

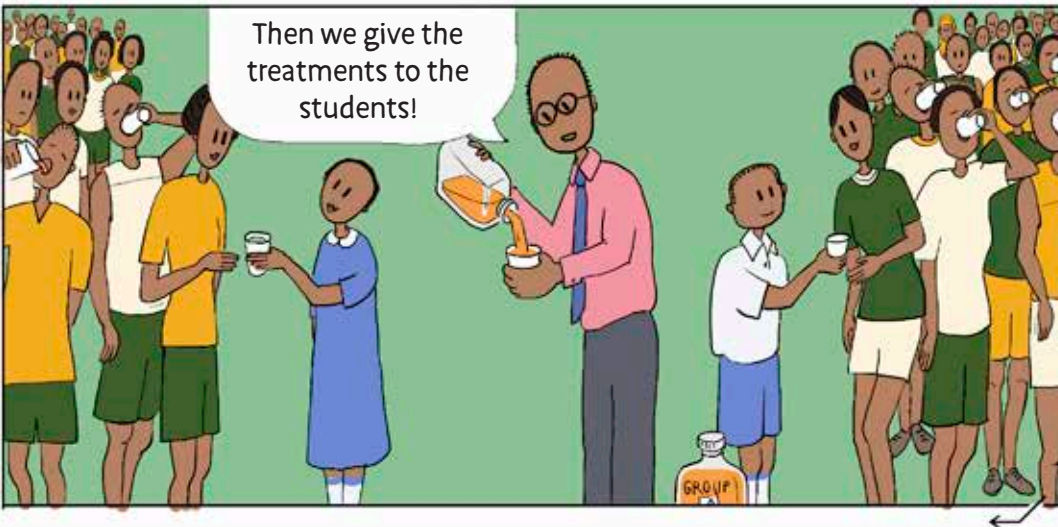
	GROUP A	GROUP B
①	1	2
②	1	1
③	3	1

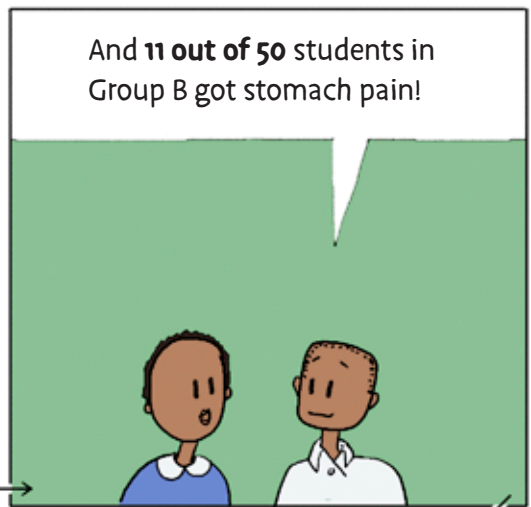
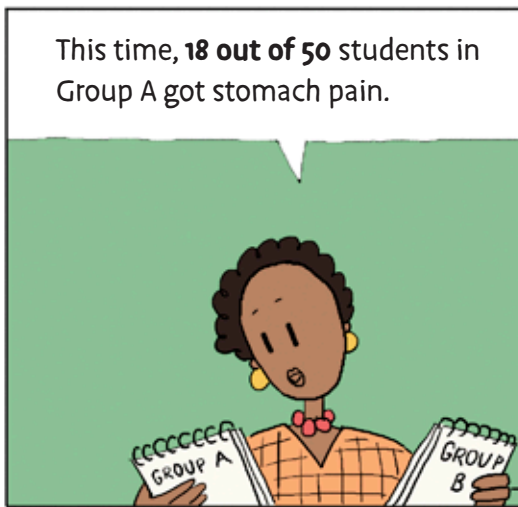






1 First fair comparison with 100 runners

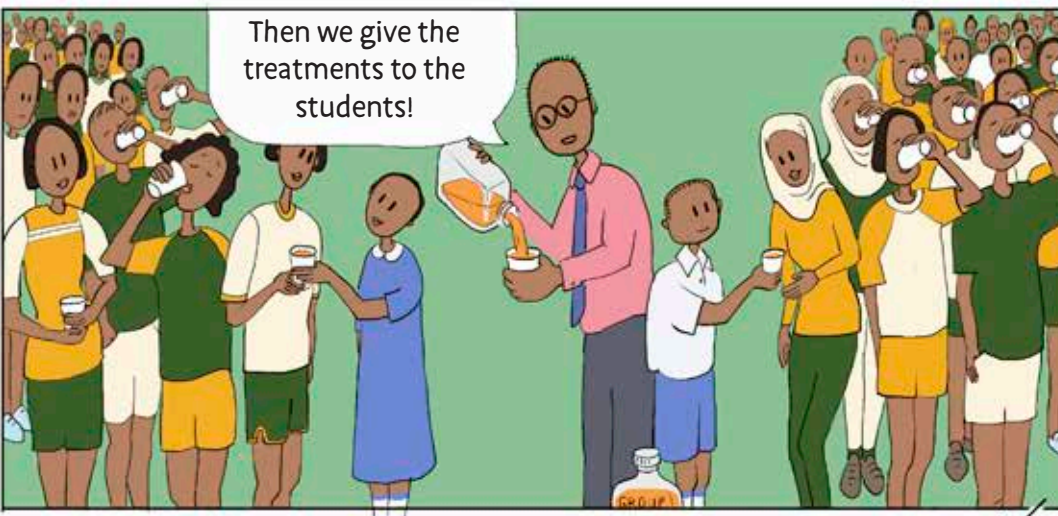


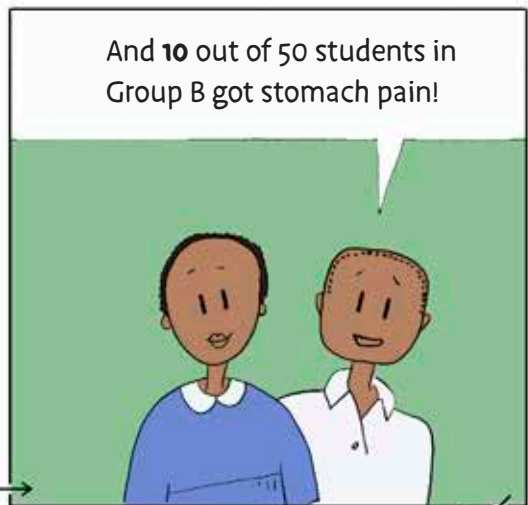
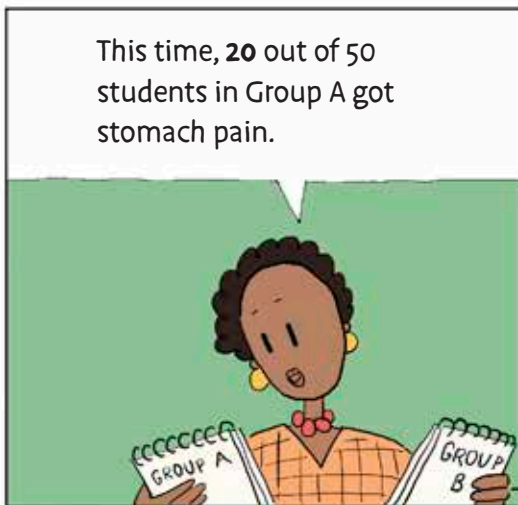


STOMACH PAIN COMPARED TO DRINKING WATER ?

Number of people with pain:

	GROUP A	GROUP B
①	1	2
②	1	1
③	3	1
①	18	11
②		
③		





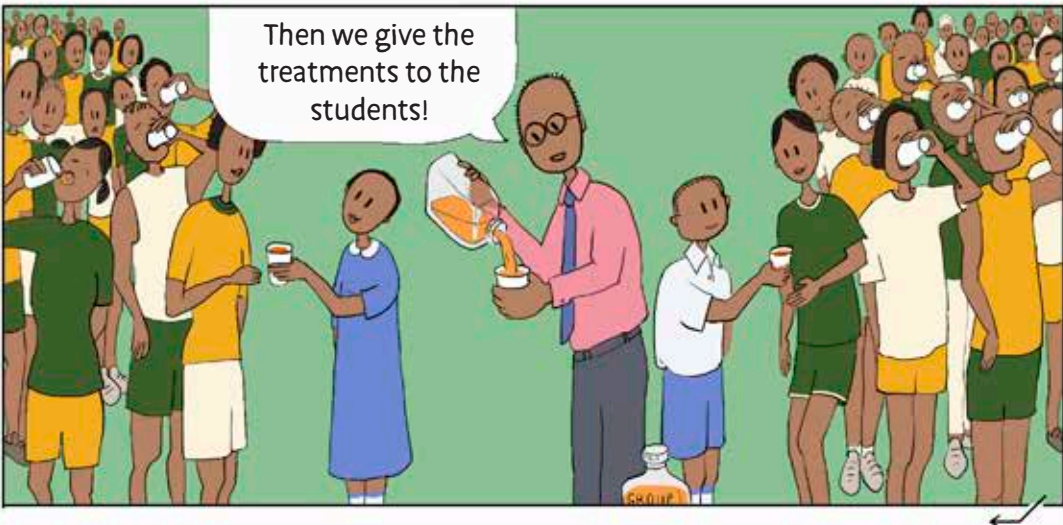
That is almost the same as what we found in the first comparison with 100 students!

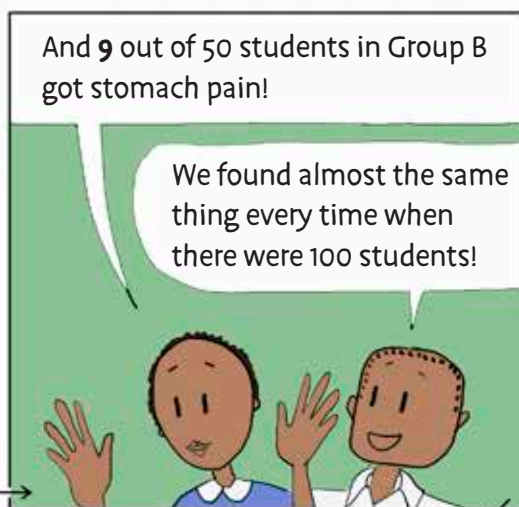
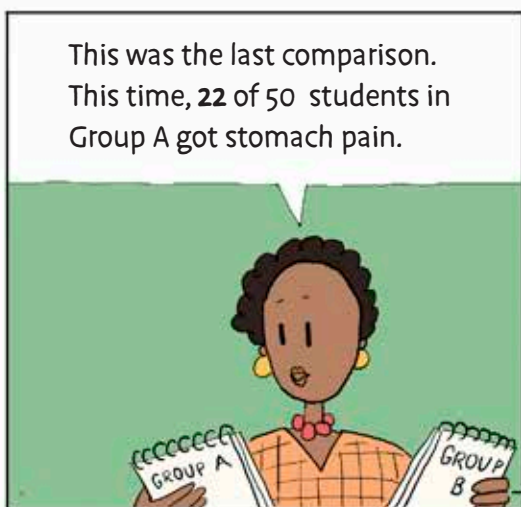
**STOMACH PAIN COMPARED TO DRINKING WATER ?**  
Number of people with pain:

	GROUP A	GROUP B
	1	2
	1	1
③	3	1
1	18	11
2	20	10
3		



### Third fair comparison with 100 runners





STOMACH PAIN COMPARED TO DRINKING WATER ?

Number of people with pain:

	GROUP A	GROUP B
	1	2
	1	1
③	3	1
①	18	11
②	20	10
③	22	9

So, when the comparisons were small, you found something different each time.



But when they were big, about ten more runners out of 50 who drank juice got stomach pain compared to those who drank water.



The more times that you find the same thing, the more sure you can be that it was because of the treatments!



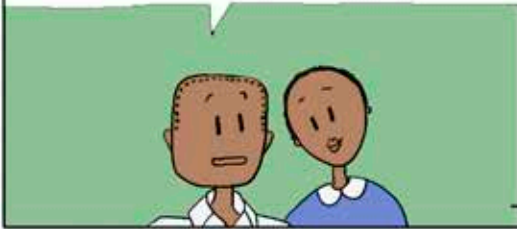
And it was not by chance!



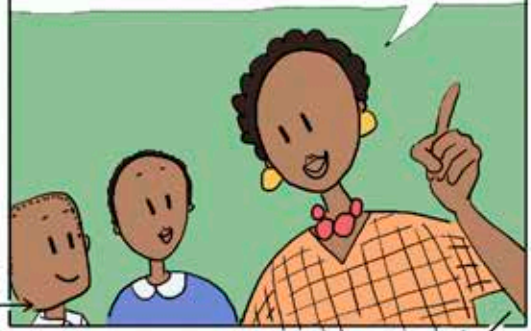
And to find something many times, health researchers must make fair comparison with many people!



So big enough fair comparisons are a good basis for claims about treatments?



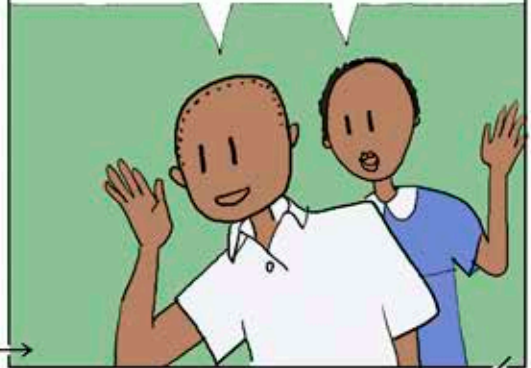
Yes! Claims that are based on big enough fair comparisons are reliable!



So, remember: health researchers must compare, be fair...



And make their comparisons big enough!



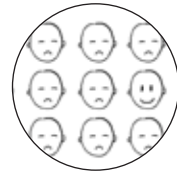
Exactly!



Thank you, Professors!



## ACTIVITY

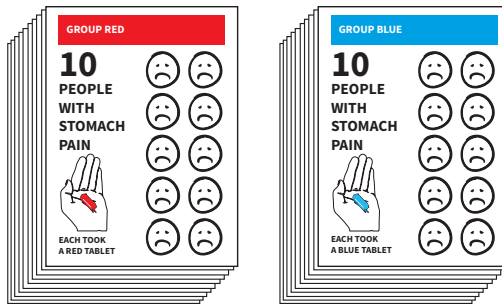


### Instruction

**Objective:** Explain how comparisons with few people can be misleading

*Step 1:* The children imagine that they are health researchers. The teacher has two sets of 10 papers. One set is red and the other is blue. Children imagine that each set is a group of people in their comparison.

On the front of each paper, there are 10 sad faces. The sad faces are people who have stomach pain. That means there are 100 people with stomach pain in each of the two groups.

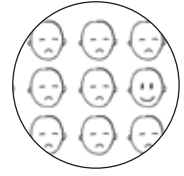


*Step 2:* The children imagine they have given a red tablet for stomach pain to people on the red papers. These people are in Group Red. They imagine they have given a blue tablet for stomach pain to people on the blue papers. These people are in Group Blue.

The people have used their treatments, so now the children can measure what happened.

*More instructions* →

## ACTIVITY



*Step 3:* Led by the teacher, the children measure what happened to 10 people in each group.

The teacher chooses two children. One child turns over the top red paper to show the back. The other child turns over the top blue paper. On the back of each paper, some of the faces are smiling. Each smiling face is a person who no longer has stomach pain.



*Step 4:* The teacher and children count how many people in each group no longer have stomach pain. In the chart in their exercise book, each child writes how many people in each group no longer have stomach pain. The teacher writes how many in a chart on the board.

*Step 5:* Led by the teacher, children discuss which tablet seems best to take if you have stomach pain.

*Step 6:* The teacher and children repeat Steps 2 to 4 until they have turned over all the papers

*Step 7:* When all the papers have been turned over, led by the teacher, children discuss whether the same tablet seemed best at the beginning of the activity as at the end.

## EXERCISE 1

Tick whether each point is true or false.

**Example:**

In a fair comparison, the groups are similar.

True    False

1. In fair comparisons, health researchers can be more sure why something happens when it happens many times.  
 True    False
2. If a comparison is big enough, it is not important whether it is fair.  
 True    False
3. Most of the time, health researchers should make more than one fair comparison of the same treatments.  
 True    False

## EXERCISE 2

Remember that the two meanings of “by chance” are in the back of the book

1. What does it mean to choose “by chance” who gets which treatment?

---

---

---

---

2. What does it mean to find something “by chance” in a comparison that was too small?

---

---

---

---