

Original Article

The Effect of Life Skills Training on Social and Coping Skills, and Aggression in High School Students

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Abstract

Background: Adolescence is known as a stressful period in the process of growth which they experience a lot of emotional, physical and cognitive changes at the same time. It is important to develop life skills in this age group. The goal of the study was whether life skills training affect the social and coping skills and aggression in high school students.

Materials and Methods: A total of 100 high school students entered the study using a pretest-posttest assessment. All received life skills training (including coping skills, social skills and aggression control) during four sessions that each lasted 120 minutes. To compare the results before and after life skills training, four questionnaires including the individual characteristics of the study samples, the aggression test, the social skills test, and the coping skills checklist were used.

Results: Life skills training had a positive and significant effect on social and coping skills. The results also showed there was a significant decrease in aggression among students.

Conclusion: It is necessary to implement life skills training programs for a better and comprehensive development in students. Moreover, considering the formation of personality at an early age and the current situation of society, learning these skills at an early age seems more desirable.

Keywords: Life skills, Social skills, Coping skills, Aggression, High school

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Introduction

Adolescence is a stressful period in the process of cognitive development that they experience many emotional changes simultaneously with physical and cognitive changes. Generally, based on result of a study, puberty has been known as a particularly stressful period. Repeated encounter with tense situations at this time reveals the importance of learning and applying appropriate methods to counter stress in an individual¹. Based on the program

developed by the world health organization (2000), coping skills consist of 10 skills which are: ability skills in issues such as effective communication, establishing effective interpersonal communication, decision-making, problem-solving, creative thinking, critical thinking, self-awareness, sympathy with others, countering emotions (failure, anxiety, depression) and stress control². Coping strategies are behavioral and cognitive abilities, which are used by an anxious person to control specific external and internal needs³. Inability to deal effectively with stress

is followed by different negative individual and social impacts. The level of stress, depression and social problems is higher in adolescents who lack appropriate coping skills¹. Inefficient coping strategies, and especially those which are irrelevant to homework, have a significant relationship with test anxiety, low educational performance, dissatisfaction and educational failure⁴. The most important variable is the scholars' attention to aggressive behavior, its unfavorable effects on intrapersonal states and consequently on interpersonal behavior among individuals. Given that aggression is an invasive behavior, the causes behind the creation of a negative image among peers and teachers include being abandoned by the peers, poor educational performance, use of drugs, and juvenile delinquency. Therefore, this issue affects their interpersonal social relationships. Therefore, to solve this problem, prevention and treatment methods should be identified, examined and analyzed.

Other major problems are inability to sustain communications and the lack of required social skills that has a preventive effect on efficiency and liveliness among adolescents and prevents the healthy development of identity, the emergence of talents, and emotional and intellectual capabilities⁵. Based on previous research, many of children who lack the necessary social skills or are rejected by their peers are prone to different types of behavioral-emotional abnormalities⁶. Life skills are those cognitive, emotional and practical abilities that are required for success and feeling happiness in ordinary and daily life and the objectives in teaching these skills are also drawn from the necessities and requirements in daily life⁷. A research indicates the efficacy of social skills training in reducing stress, behavioral and emotional agitations, and improving social relationships among adolescents⁸. In this line of enquiry, Stalker showed in their research that teaching communicative skills had effective in reducing social anxiety, increasing problem-solving skills, self-confidence and improving the students' social interactions⁹. Furthermore, a research performed by Hadadi and Badri on effects of life skills training on the coping styles concluded that teaching life skills affects the coping method which is focused on the problem¹⁰. Given that schools as the

first official place for social experience in children therefore they have a determining role in developing shyness, aggression, social isolation or on the contrary, fostering communicative and social skills¹¹. Children learn incorporating programs on social and life skills training into the educational contents at schools, especially for the high schools, which indicate a transition from childhood to adolescence. The propose of the study was to find an answer to the question whether being trained in these ten life skills affects social development in high school students in the city of Shiraz.

Methods

The present study has a pretest-posttest experimental design. The statistical population of this study consists of all high school students in the city of Shiraz (South of Iran) during 2014-15. Inclusion criteria including all samples were age-matched in age group and were selected from each of two gender classes; they were in the same period of educational year. Exclusion criteria including students with psychiatric disorders; positive history for smoking, alcohol or drug abuse; the students did not attend the workshop; the students did not complete the form themselves. Considering Cochran formula¹, ($N=98750$, $d=0.1$, $z=1.96$, $p=0.5$, $q=0.5$) sample size was calculated 100 students. Based on the conducted studies, 100 high school students were selected in this research as the statistical population using multistage random sampling. The sampling was done in the following order: first and two high schools were selected for boys and girls in each of the four educational areas and, in the next step, one class from each level was selected within these two schools. Then, based on the roll call lists of these classes, the required samples were randomly selected. In this research study, prior to the intervention, immediately after the intervention (at the end of the final session), and four months after the intervention, all the participants filled in the questionnaires dealing with aggression, social skills, and coping skills. All the students received instructions on coping and social skills and aggression control in 4 sessions, which lasted 160 minutes with 30-minute breaks.

Aggression Questionnaire: In this study, the Perry

¹ $n = Npqz^2/pqz^2 + Nd^2$

and Buss questionnaires were used to examine aggression. According to the study conducted by Leonard et al., the validity of this questionnaire has been reported as 0.89 based on Cornbach's alpha coefficient for the total score of the questionnaire. Perry and Buss reported the test-retest reliability of this questionnaire as 0.72 – 0.80 and internal consistency of these four factors considering the total score for its validity was reported as 0.72 – 0.89¹². Some studies have also confirmed the reliability and validity of this questionnaire in Iran^{13, 14}. The questionnaire consists of 29 questions that are ranked according to the five-point Likert scale from 1 to 5. The examiner has five options, with a minimum score of one (one for responding to the option "Absolutely contrary to my characteristics") and the most common (for the answer to the "Completely Specifying My Specifications" option), including questions 9 and 16, which are scored on a backdrop. This questionnaire measures quadruple aggression including physical aggression (9 sentences), verbal aggression (5 sentences), anger (7 words), and personality (8 terms). Measures total aggression. The minimum score is 29 and the maximum score is 145.

Social Skills Questionnaire: In the present study, Matson's social skills questionnaire was used to collect data in the social skills scale. This scale was developed by Matson et al. in 1983 to assess social skills for individuals aging between 4 and 18 and was translated by Yusefi and Kheiri in 2003⁶. The reliability coefficient domain was determined as 0.86 using the Cronbach's alpha model and the results confirmed the desired and acceptable reliability of the Matson's scale of social skills for the evaluation of social skills among Iranian adolescents⁶. The questionnaire has 56 items which is used to answer the subject to a 5-point Likert scale with a range from 1 (never) to 5 (always). For this scale, 5 sub-scales: appropriate social skills, anti-social behaviors, aggression and impulsive behaviors, high self-confidence and communication with peers.

The Coping Strategies Questionnaire: In the present study, Caror, Shirer and Wintrobe's

questionnaire (1989) was used to examine the coping strategies. This questionnaire has been obtained based on the Lazarus model of stress and self-regulating behavior. The questionnaire contains 72 questions that the subjects respond to, yes and no, and have 18 sub-scales, 5 subscales related to problem-solving coping strategies, 5 subscales in relation to emotional coping strategies, 3 subscales with low impact and the remaining 5 subscales with ineffective on coping strategies. The score range is 0-20 in the problem-focused scale, 0-20 in the emotion-focused scale, 0-12 in the less effective scale and 0-20 in the ineffective scale. The reliability and validity of this questionnaire were reported as favorable in several studies conducted by Caror et al. (Caror, Shirer, and Wintrobe, 1989). In Iran, this questionnaire developed and examined by Ebrahimi et al. in the context of Iranian culture by drawing on other coping scales. The reliability coefficient of the subscales ranges between 0.63 and 0.95. The reliability coefficient has been obtained through the retest method with an interval of two weeks for the whole questionnaire (Ebrahimi, 1992).

Results

Generally, aggression was observed in 50 participants (55.6%) prior to life skills training and this number decreased to 36 participants (41.4%) after the training. As seen in table 1, it is noteworthy that in the evaluation after the training, although the degree of hostility has decreased in self-reports in students, hostility was the only scale that was not significant in the comparison of pre-intervention and post-intervention for the hostility subscales. According to statistical analyses, the total score of aggression was not significant between the opposite genders before and after the intervention ($p>0.05$). In different subscales of aggression, with the exception of verbal aggression, the mean scores were also higher in males compared to females in all cases. However, these differences were not statistically significant in the aggression subscale ($p>0.05$).

Table 1: The Mean Score of Aggression and Aggression Subscales before and after Life Skills Training.

Scale	Life Skills Training (Total: Mean± SD)	Gender	Mean± SD	Total Level	Significance
Physical Aggression	Pretest (Total: 24.38±6.17)	Female	23.26±7.19	0.004	
		Male	25.71±4.40		
	Post-test (Total: 21.96±5.7)	Female	20.79±4.85		
		Male	23.56±6.42		
Verbal Aggression	Pretest (Total: 14.83±5.22)	Female	14.88±4.35	0.005	
		Male	14.76±6.21		
	Post-test (Total: 12.86±3.47)	Female	13.39±3.36		
		Male	12.15±3.53		
Anger	Pretest (Total: 19.75±6.15)	Female	19.33±6.20	0.005	
		Male	20.21±6.12		
	Post-test (Total: 17.92±4.92)	Female	17.45±5.22		
		Male	18.56±4.45		
Hostility	Pretest (Total: 22.40±6.75)	Female	22.05±7.50	0.54	
		Male	22.85±5.71		
	Post-test (Total: 21.50±5.94)	Female	21.21±6.53		
		Male	21.91±5.05		
Total Score of Aggression	Pretest (Total: 82.06±17.6)	Female	80.18±20.37	0.004	
		Male	84.42±13.22		
	Post-test (Total: 73.8±14.72)	Female	72.33±15.89		
		Male	75.88±12.81		

Given the results of social skills, it was found that the mean difference of the students' scores after life skills training is statistically significant compared to the students' scores before the training ($p < 0.02$) which further shows the effect of life skills training on the students' social skills. All of the subscales except for unsocial behaviors, aggression, and impulsive behaviors ($p > 0.05$) were significant before and after life skills training (Table 2).

Furthermore, it was observed that in the social skills subscale, with the exception of peer relationships, the mean scores among female participants were higher than their male counterparts before and after the test. This relationship only led to a statistically significant difference in relation to appropriate social skills among male and female participants before and after life skills training ($p < 0.05$). As regards the subscale dealing with peer relationship, male participants had

Table 2: The difference of social skill scales among students before and after life skills training.

The Type of Scale	Life Skills Training (Total: Mean± SD)	Gender	Mean± SD	Paired t-test Results	Total Significance Level
Appropriate Social Skills	Pretest (Total: 67.98±12.14)	Female	69.18±10.33	4.31	<0.001
		Male	67.47±14.08		
	Post-test (Total: 75.74±13.73)	Female	78.83±11.54		
		Male	72.44±15.45		
Unsocial Behaviors	Pretest (Total: 46.48±8.15)	Female	46.77±7.65	0.77	0.44
		Male	46.13±8.7		
	Post-test (Total: 45.26±9.90)	Female	45.40±10.03		
		Male	45.05±9.84		
Aggression and Impulsive behaviors	Pretest (Total: 49.75±7.66)	Female	50.76±7.38	0.90	0.36
		Male	50.23±6.17		
	Post-test (Total: 47±10.88)	Female	49.58±7.09		
		Male	49.08±11.10		
Domineering, Overly Self-Confident	Pretest (Total: 19.82±7.11)	Female	19.92±7.13	2.02	0.04
		Male	19.72±7.18		
	Post-test (Total: 18.45±5.56)	Female	18.55±5.69		
		Male	18.29±5.44		
Peer Relationship Social	Pretest (Total: 31.82±6.51)	Female	31.54±6.78	2.78	0.007
		Male	32.20±6.19		
	Post-test (Total: 34.27±6.97)	Female	33.43±6.92		
		Male	35.48±7.01		
Skill Total	Pretest (Total: 216.50±25.89)	Female	217.89±23.90	2.24	0.02
		Male	215.57±28.71		
	Post-test (Total: 223.94±23.02)	Female	223.50±23.42		
		Male	223.50±23.42		

higher mean scores compared to their female counterparts in the social skills features and this

difference was statistically significant before and after the training. Nonetheless, there was no significant

Table 3: Coping strategies before and after life skills training.

Coping Strategies	Groups (Total: Mean± SD)	Gender	Mean± SD	Paired value	t	Total Level	Significance
Problem-focused	Pretest (Total: 11.69±2.05)	Female	11.53±1.99	4.47			<0.001
		Male	12.29±2.17				
	Post-test (Total: 13.03±2.04)	Female	13.17±2.04				
		Male	13.63±3.54				
Emotion-focused	Pretest (Total: 9.65±2.73)	Female	10.30±2.43	1.31			>0.05
		Male	9.22±2.79				
	Post-test (Total: 9.10±2.20)	Female	9.31±2.23				
		Male	8.69±2.11				
Less Effective	Pretest (Total: 5.50±2.37)	Female	5.30±2.15	2.07			0.04
		Male	4.93±2.60				
	Post-test (Total: 4.69±2.44)	Female	4.55±2.23				
		Male	4.47±2.94				
Ineffective	Pretest (Total: 8.84±2.59)	Female	9.29±2.49	2.32			0.02
		Male	8.42±2.48				
	Post-test (Total: 7.99±2.75)	Female	8.42±2.65				
		Male	7.44±2.83				

difference between genders before and after the intervention in the social skills features.

According to the results, it was clear that the students' mean scores were different in each of the four groups with regard to coping strategies before and after the training. These differences were examined using statistical tests and, with the exception of emotion-focused strategies ($p>0.05$), the difference was statistically significant in three remaining groups before and after the intervention ($p<0.05$). However, it did not show any significance before and after the intervention (Table 3). Similar to the general results with regard to use of coping skill strategies and the subscales of this feature, life skills training in both genders caused an increase in use of

problem-focused strategies and a decrease in use of emotion-focused strategies, and less effective and ineffective categories. As you can see in table 3, apart from use of problem-focused coping strategies, in other subscales of this feature, use of these strategies was more popular among female participants compared to male participants, though these differences were not significant based on gender in any of the subscales of coping skill strategies ($p>0.05$).

Discussion

The present study was conducted to examine the effect of life skills training on the degree of aggression, social skills and use of coping skills strategies among

high school students. In general, life skills training affects the features that were investigated in this study. Based on statistical inferences, it was found that the scores in social skills before and after the training were significantly different among the students. These results in the current study are consistent with the results of studies conducted by Ghodraty¹⁵, Ghorbani¹⁶, Gillies¹⁷, Tajik¹⁸, Johnson¹⁹ and Aslavyn²⁰ that confirms that this instruction creates suitable grounds for the growth of social skills. Among the other findings of this research, one can point to the high general scores in social skills among female participants compared to male participants and this difference was statistically significant before and after life skills training. Matson et al did not observe same as our results in his study. Perhaps, the cause of this difference is the age group of the participants in the present study (15-18) compared to that of participants in the research (4-18). It appears that results similar to those of the current study could be achieved in their study, if gender differences were examined with regard to different age groups. Another reason for this issue perhaps be in the cultural differences and especially the single-sex-system, which is practiced in Iranian schools, compared to the co-educational system of Western cultures. Of course, the research results, which pointed to the high scores of female participants in social skills in comparison with their male counterparts, were consistent with the findings of many other studies. This generally indicates that, during adolescence, female students show higher social skills compared to male²¹. The other point in this research study was that from the five social skill subscales, female participants had significantly higher scores compared to their male counterparts within the subscale of appropriate social skills whereas male students had significantly higher scores in peer relationship compared to female students. Research findings have also demonstrated that peer relationship does not always cause favorable effects for children and adolescents and, in some cases; it can foster negative effects as well²². Most of these effects are related to adolescent mental health^{23, 24}. Perhaps, for the same reason, despite experiencing more peer relationships, the male students in this study had fewer social skills in comparison with

female students. In this regard, more research will be needed in the future to collect more detailed and comprehensive information on the way Iranian adolescents relate to their peers, the quality of this relationship and its effect on mental health and individual and social adaptability. The research results also showed that life skills training affects the students' coping strategies. In relation to teaching life skills and coping reactions among students, it has been demonstrated that life skills training affects their coping reactions which corroborates the studies conducted by Lamb et al²⁵, Milne²⁶, Parker²⁷, and Foruzandeh²⁸. Given the general results on the use of coping skills strategies and the subscale of this feature, it has been found that in both genders training in social skills also causes an increase in using the strategic problem-focused subscale and a decrease in emotion-based, less effective and ineffective strategies. Moreover, apart from the application of problem-focused coping strategies, in the other subscales of this feature, female students used these strategies more than male students which are consistent with the results obtained in Samari²⁹. Thus, with respect to the obtained data, it can be asserted that gender has an effective role in the use of coping skills methods and, in other words, female participants have more receptive tendencies for the emotional approach while male participants tend to use the problem-solving approach despite the fact that this relationship was not statistically significant³⁰. The results of this research lend support to the main hypothesis that life skills training can significantly affect the aggression factor and cause a remarkable decrease in the value of this factor. This is consistent with the findings of studies conducted in Iran such as the research performed by Taramian³¹ and also a number of studies conducted in Western countries such as Rapee and Thompson³². In the present study, the comparison of the total mean score of aggression before and after the training in female and male participants did not show any significant statistical difference. This finding corroborates the research results derived from the studies done by Mohammadi³³ and Golchin³⁴. These results are not consistent with some of the research performed on the effect of gender on aggression such as the study conducted by Jenaabadi³⁵ among high school students in the city of Saravan, and in

Birjand³⁶. In addition, research performed by Nichols, on the students from schools with ethnic minorities in New York that showed the effect of gender on aggression³⁷.

Conclusion

In general, it can be said that the results of this research are consistent with the results from the majority of studies in this area and this indicates the necessity of implementing life skills instructional programs for a better and comprehensive development of learners. In addition, with regard to the formation of one's personality at a young age and the current conditions of society, acquiring these skills at this age seems to be desirable, thus it is recommended that coping skills be taught to students and their parents by the counselors and teachers at a younger age. Now, it is worth mentioning that the participants in this study were adolescents. Therefore, it may not be possible to generalize the research results to students at other levels with certainty and it is essential to clarify the accuracy of these findings by comparing them to the findings from future research on other participants, at other educational levels and with a larger sample population.

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