

## Effects of Life Skills Training on Stress Reduction and Coping Style in Adolescents Living in Foster Homes

ZareiEghbal, SheikhiFini Ali Akbar and Bavaghar Behjat\*

University of Hormozgan, Bandar Abbas, Iran

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### ABSTRACT

The aim of this study was to investigate the effect of life skills training on stress reduction and coping style in adolescents living in foster homes of Shiraz. Study was a quasi-experimental research with pretest-posttest control group design. The sample of study consisted of 64 adolescents (31 female and 33 male) who were selected through convenience sampling and assigned into two groups randomly. Data was collected by using index of feeling mental pressure and Coping Skills Checklist. Results of the study indicated that life skills training could reduce stress and emotion-oriented coping style in these adolescents significantly but this effect was not significant for increasing problem-oriented coping style and academic performance. Generally, preparing a multidimensional and structured program for training life skills which are proportionate to the special needs of adolescents living in foster houses can be helpful for enhancing mental health and reducing the effects of family loss in these adolescents.

**Keywords:** life skills, stress, emotion-oriented coping, problem-oriented coping, foster home.

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### INTRODUCTION

Adolescence is a transition period between childhood and youth. During this period, adolescent is faced with numerous difficulties evolutionary challenges [1]. The family support is one of the most important factors for coping with stress in adolescents. If the adolescent is being deprived of this source of support and this exclusion is started, especially from childhood, it will have damaging negative effects on him/her. In fact, dereliction is one of phenomena which cause much mental stress among specific age groups including the adolescents. Studies suggest that institutionalized adolescents are living in poor conditions. They are facing with many tensions, environmental, physical and emotional problems [2].

Since Iran is a young country, risks such as identity crisis among adolescents, increasing unemployment, the confusion of youth and their dependence are common and predictable problems. These problems may weaken the families' foundation and cause unpleasant products such as house of derelict children and adolescents. Children and adolescents living in boarding complexes belong to families which their relation systems are suffering from imbalance. These children have experienced parents' conflict, addiction, incarceration, mental illness, antisocial behavior, parental separation and etc. which may result in increasing their stress level [3].

According to the State Welfare Organization of Iran, 17000 children and adolescents are covered by this organization which 8375 of them are living in boarding centers. Several risk factors are present in the life of this group of adolescents. In fact, these factors are considered as the consequence of living in such circumstances which threaten their mental health [1]. According to the results of past researches, such adolescents are exposing higher-risk of inconsistent behaviors. Studies show that the negative consequences among adolescents are due to numerous reasons including the nature of individual relationship with others than his original family, supervision or care of individual behaviors by parents and other effective factors such as relationship quality with peers and interpersonal cognitive thinking skills [4]. Due to structural problems of the family and its disintegration among adolescents living family-like centers, also since the children of these complexes typically not touched the life taste from childhood and because they always lived in tension, conflict and non-pity and environments filled with fear and sometimes birthed unwanted, they are faced some problems. Thus, such adolescents are faced problems such as enuresis, aggression, lying, restlessness, isolation, shyness, feelings of worthlessness, low self-esteem, feelings of inferiority, lowering power of decision making, depression, academic problems, hyperactivity with attention deficit and addiction compared with the society's norm [5].

Enabling adolescents with special needs through interventions and appropriate training programs can improve their self-, social-, and educational-sufficiency and their consistency with social life. This may help them to have better performance in school, work place and society. Studies show that appropriate therapeutic interventions can greatly reduce the risk of high-risk behaviors including drug addiction, teenage suicide and run away before and after the intervention. However, a small percentage of these people are still well-treated or exposed to serious interventions. Also, few research works have been conducted on appropriate and formulated methods with controlled framework for reducing the risk of high-risk behaviors in these adolescents [6]. Among

the important risk factors for this group of people are: lack of coping and problem solving skills, negative attitude about themselves and their environment and lack of proper communication with others. Lack of these skills may cause the person to adopt maladaptive and ineffective behaviors against stresses and tensions. As a result, training such skills may develop the feeling of self-efficient and effectiveness, ability to overcome the problem and the ability for planning and targeted and appropriate behavior with the problem [7].

In this regard, the effectiveness of life skills training programs in reducing drug abuse, developing necessary skills to deal with AIDS and prevention of pregnancy in adolescence have been verified. Since the skills training is a short-term and effective method and the subjects can easily learn it and also because its deployment has no adverse effects and it focuses directly on individual problems, the researchers recommend using such training programs [8].

Given the above discussion about the effectiveness of life skills training, special needs of adolescents living in family-like centers and the necessity of obtaining social skills in stressful period of adolescence, the aim of the present study is to answer whether providing a curriculum including the skills of problem-solving and decision-making, stress management and communication skills can affect the stress level, stress coping skills and academic performance of adolescents living in family-like centers of Shiraz or not?

## MATERIALS AND METHODS

In this study, a quasi-experimental method with a pre- and post-test plan with a control group was used. The statistical population consisted of boys and girls in foster homes centers of Shiraz in 2011. The study sample consisted of 64 adolescents in foster homes centers of Shiraz (31 girls and 33 boys) which were selected using convenience sampling method and randomly assigned in the experimental and control groups.

Markham stress measurement scale used to measure the students' stress. This scale developed by Markham in 1992 and has 38 Yes/No questions. It is translated into Persian and it has been consistent with population and cultural conditions of Iran. Markham scale evaluates the symptoms of mental-emotional disorders such as amnesia, anxiety, inability to make decisions and fear of illness in the form of "Yes" or "No" answers. Its validity and reliability can be cited to theories which the scale is based on them and also relevant constructive researches [9]. A reliability coefficient of 0.83 was calculated by Cronbach's alpha method for this scale which indicates the significant reliability of Markham scale.

Coping skills checklist used to measure the students' coping skills. The Checklist which has been designed by Carver et al [10] contains 72 items and 18 classes. Each class is composed of four options. It measures the following general categories including problem-oriented coping, emotion-oriented coping, less useful and non-effective coping. The subjects respond to each question based on a four degree Likert scale. This questionnaire has been translated into Persian. According to one study, the reliability coefficients were variable from 0.42 to 0.76 for different scales. A total scale reliability coefficient of 0.93 has been reported [11].

### Implementation Method

In the present study, a training program which includes four skills, mainly communication, stress management, problem-solving and decision-making skills was used. The training program has been developed according to the headlines and criteria of State Welfare Organization of Iran. All subjects filled out the stress and stress coping questionnaires before and immediately after interventions. The data relevant to their average was obtained through the school before and after the intervention. All participants in the experimental group received 4 sessions of 160 minutes life skills training. The sessions were held weekly by two senior psychology experts. Students were divided into 4 groups of 8 people during the sessions. Each group was trained separately. Teachers were trained for 4 hours before beginning the training to coordinate them in terms of learning materials content and teaching methods. Skills taught in the experimental group include communication skills (including familiarity with communication, barriers to communication, express thoughts and feelings, listen up), coping with stress (including the topics of stress, personality-coping styles relationship, stress coping strategies), problem-solving (including issues related to different stages of problem solving, the importance of step by step going through the process of problem solving) and decision making (including issues related to the reasons for decision making in individual life, the reasons for importance of certain decisions, the correct decision-making methods).

The control group participants were not trained separately apart from their regular school curriculum during the study period. After completing the training sessions of life skills in the experimental groups, they also were assessed again in terms of the score of stress and coping with stress questionnaires. Towards participating in the research, a free life skills training workshop was held for this group of students after completing the study.

## RESULTS

There was no significant difference between two groups before the training. As shown in Table 1, there was no significant difference between the mean scores of mental stress, emotion-oriented coping, problem-

oriented coping and academic performance of the two groups in the pre-test stage. Given the homogeneity of groups, the t-test and covariance analysis were used to evaluate the impact of life skills training.

**Table 1.** Comparison of experimental and control groups at pretest

Variable	Experimental group		Control group		DF	T value	Sig.
	Mean	SD	Mean	SD			
Stress	31.19	6.11	29.85	6.03	30	0.43	0.66
Emotion-oriented coping	62.31	16.96	57.13	15.89	30	0.43	0.89
Problem- oriented coping	39.57	12.36	37.89	11.95	30	0.31	0.31
Academic performance	15.21	2.12	13.82	3.15	30	0.14	0.96

**First hypothesis:** life skills training result in reducing the stress.

Since the experimental and control groups had no significant difference in terms of pre-test scores (Table 1), the difference between the mean scores of stress in pre- and post-test stages was calculated in order to test the research hypotheses. Then, this difference was compared between the experimental and control groups using independent t-test. Also, analysis of covariance was used to test the hypothesis. The results have been presented in Tables 2 and 3.

**Table 2.** Compare experimental and control groups on differential mean scores of stress

Group	Mean	SD	DF	T value	Sig.
Experimental	7.09	6.5	62	4.75	0.001
Control	0.56	4.2			

Table 2 shows that the difference of two groups is significant. In other words, life skills training has been able to reduce the stress levels in the experimental group compared with the control group, significantly.

**Table 3.** Covariance analysis results on the pre- and post-test stress mean scores of experimental and control groups

Resource of Changes	Mean Squares	DF	F value	Sig.
Pre-test	36.15	1	1.44	0.23
Group	702.14	1	28.09	0.00

According to Table 3, the difference of the two groups is significant. It also shows that life skills training has reduced the stress in the experimental group compared with the control group, considerably.

**Second hypothesis:** life skills training result in reducing the emotion-oriented coping.

For testing this hypothesis, the t-test and the analysis of covariance were also used for comparison of the difference of pre- and post-test mean scores in the control and experimental groups. The results have been presented in Tables 4 and 5.

**Table 4.** Compare experimental and control groups on differential mean scores of emotion-oriented coping

Group	Mean	SD	DF	T value	Sig.
Experimental	2.87	3.5	62	2.56	0.01
Control	0.53	3.7			

As can be seen from Table 4, the difference of emotion-oriented coping score of the subjects in the experimental and control groups is significant. It can be said that the life skills training has reduced the emotion-oriented coping in the experimental group.

**Table 5.** Covariance analysis results on the pre- and post-test emotion-oriented coping mean scores of experimental and control groups

Resource of Changes	Mean Squares	DF	F value	Sig.
Pre-test	1231.67	1	135.29	0.001
Group	48.25	1	5.3	0.02

As shown in Table 5, life skills training has been able to reduce the use of emotion-oriented coping style.

**The third hypothesis:** life skills training result in increasing the problem-oriented coping.

The t-test and analysis of covariance were used to investigate this hypothesis. The results have been presented in Tables 6 and 7. According to the results of Tables 6 and 7, there is no significant difference between the problem-oriented coping score of the subjects in pre- and post-test stages. This indicates that life skills training programs were not effective in increasing the problem-oriented coping.

**Table 6.** Compare experimental and control groups on differential mean scores of problem-oriented coping

Group	Mean	SD	DF	T value	Sig.
Experimental	1.34	2.2	62	0.85	0.39
Control	0.78	2.9			

**Table 7.** Covariance analysis results on the pre- and post-test problem-oriented coping mean scores of experimental and control groups

Resource of Changes	Mean Squares	DF	F value	Sig.
Pre-test	1139.16	1	166.91	0.001
Group	5.65	1	0.82	0.36

As can be seen from Tables 6 and 7, there is no significant difference between the mean of the subjects in pre- and post-test stages. This indicates that life skills training were not able to influence the problem-oriented coping of the students in the experimental group.

**The fourth hypothesis:** life skills training improve the academic performance.

Table 8 shows the results of the independent t-test for comparing the pre- and post-test mean grades differences of the experimental and control groups. The results of covariance analysis were shown in Table 9.

**Table 8.** Compare experimental and control groups on differential mean scores of academic performance

Group	Mean	SD	DF	T value	Sig.
Experimental	1.5	2.12	62	1.06	0.099
Control	0.75	2.46			

**Table 9.** Covariance analysis results on the pre- and post-test academic performance mean scores of experimental and control groups

Resource of Changes	Mean Squares	DF	F value	Sig.
Pre-test	216.28	1	8.09	0.04
Group	39.74	1	1.52	0.19

As can be seen from Tables 8 and 9, there is no significant difference between the average of the subjects in pre- and post-test stages. This indicates that life skills training were not able to influence the academic performance of the students in the experimental group.

## DISCUSSION

The present study has been carried out to examine the effectiveness of life skills training in reducing the stress of adolescents in the foster homes centers of Shiraz. In addition to this overall goal, the current study examined the impact of life skills training on stress coping styles and academic performance of these adolescents. According to the results of the current study, the life skills training programs reduced the stress level of adolescents in foster homes centers. This finding is in good agreement with the results of Rezai et al and Malekpour et al [8 and 12]. These studies had shown that life skills training generally reduce the mental stress. The results showed that life skills training programs have failed to increase the use of problem-oriented coping among the adolescents in foster homes centers. The obtained results for this hypothesis are inconsistent with the results of Mishara [13] and Rezaei et al [8]. Although, the post-test score of the experimental group increased for problem-oriented coping style, but its value was not significant. This is likely that it the short time of training programs prevented the subjects to use the obtained information in normal life situations, properly. Applying problem-solving skills needs more practice.

In contrast, the findings of the present study suggested that the life skills training programs reduce the use of emotion-oriented coping in the stressful situation among adolescents in foster homes centers. The result of these findings is consistent with the results of Rezaei et al [8], Malekpour [12], Moradi and Kalantari [14] and Refahi [15]. Finally, the results showed that the life skills training has not improved the academic performance of the subjects. The finding is inconsistent with the results of Gersham and Elliott [16] and Mangrulkar et al [17]. Their findings showed that children who have desirable social skills have higher academic performance. But, it is in good agreement with the results of Zins et al [16]. It can be said that several variables influence the academic performance. Factors such as the classroom structure, teachers' expectation, general intelligence, academic skills and etc. affect the performance of adolescent in school. Therefore, learning some life skills only partially can improve the academic performance of adolescents.

Generally, results of present study indicated that life skill training affected on stress reduction and decreased use of emotion-oriented coping in adolescents. Future researches can investigate the impact of life skills on psychological features such as resiliency, self-esteem and academic efficacy among adolescents.

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