



EFFECT OF LIFE SKILL TRAINING ON MENTAL HEALTH AMONG B.ED. INTERNS IN RELATION TO THEIR IMPULSIVE BEHAVIOUR

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Abstract

The present study aimed to examine the effect of life skill training on mental health among B.Ed. interns in relation to their impulsive behavior. This is an experimental study conducted on two groups: control and experimental using pretest- posttest design. The sample of the study constituted 120 students studying in B.Ed. course of Amritsar district of Punjab, India. Before implementing the life skill training, the two groups experimental (N=60) and control group (N=60) were formed using pretest-posttest research design. The experimental group received life skill training for 10 days (One session per day and 30-35 minutes each session). The control group did not receive any training sessions during the same period. Mental health and impulsive behaviour in both groups were assessed by Mental Health Battery (Singh & Gupta, 2012) and Impulsiveness Scale (Rai & Sharma, 2013) respectively pre- and post-training. Results indicated the positive effect of life skills training on mental health of B.Ed. interns. This study also revealed that the impulsive behaviour of the students had a significant impact on the mental health of B.Ed. interns.

Keywords: Life Skills, Mental Health, Impulsive Behaviour



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Introduction

Life skills includes skills and abilities that build one's resilience in life situations and challenges for one to deal effectively with the demands and challenges of everyday life (Sohbi

Gharamaleki, 2010). Life skills for a better life, helps people to deal with life's problems in a positive way, in order to achieve more success (Jennifer and Hosseini, 2009). Life skills help individuals understand more about themselves, their characteristics, needs, desires, goals, weaknesses, strengths, passions, values and identity (Fati, Motabi, Mohammadkhani, Bolahri and Kazemzadeh Otof, 2006).

The need for life skills is growing due to changing trends that affect modern life such as family structures and the decline of religion (WHO, 1999). People with strong life skills are considered to have more maturity and professionalism. Lack of life skills could cause detrimental effects in the long term while on the other hand; life skills development empowers one to lead a fulfilling and happy life in the long term (Wurdinger, 2011). Life skills training and coping with stress significantly increases mental health and self esteem of students (Khalatbari and Aziz Zadeh, 2011). Due to the increasing changes and complexity of society and developing social relations, preparing individuals to deal with difficult situations seems necessary. Therefore, psychologists emphasize life skills training in order to prevent mental illnesses and social abnormalities. Life skills training helps in increasing mental and physical health, pro-social behavior and decreasing in behavioral, social problems & self-destructive behaviors. Life skills instruction is effected in the growth of physical health Ramesht and Farshad, 2009)

In August 1993, the World Health Organization provided a life skill training program in collaboration with UNICEF. The life skills i.e self- awareness, empathy, critical thinking, creative thinking, decision making, ability of problem solving, effective communication, interpersonal relationship, coping with stress and coping with emotions though independent of each other are interlinked and overlap each other. An important point is, all of these skills are attainable. Students communication skills dramatically increase students self-confidence and communication skills and flexibility (Bob and Roisin, 2010). Studying life skills training such as problem solving and effective communication on adolescents indicates that these skills increase their abilities to solve problems and effectively use social support (Turner, Macdonald and Somerset, 2008). Teaching life skills and strategies to cope with mental pressure reduces students anxiety, insomnia and depression (Haghighi, Mosavi, Mehrabzadeh Honarmand, and Bashbalide, 2006).

Life skills help individual in controlling problems such as depression, anxiety, lone lines, rejection, diffidence, anger, confliction in interpersonal relationship, lack and failure (Smith, 2004). The primary goal of the World Health Organization is to develop a mental health skills plan for life in different societies around the world to address the development, application, and evaluation of a life skill training program that focuses on the development of basic psychological capabilities such as problem solving, coping with emotions, self- awareness, social adjustment, and stress control. Life skills training improves mental health and reduces aggression (Mansoureh, 2019).

In 1947, WHO declaration that “health is not merely the absence of illness but a complete state of physical, psychological and social well-being” by separating mental health into three domains. First, mental health involves self-realization in that individuals are allowed to fully exploit their potential. Second, mental health includes a sense of mastery by the individual over their environment, and, finally, that positive mental health also means autonomy, as in individuals having the ability to identify, confront, and solve problems (Jahoda, 1958). Mental health includes a state of well- being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make contribution to his or her community (WHO, 2002). Mental health means that anybody who comes with his/her deep problems, compromises with others and the self and not be paralyzed against internal inevitable conflicts and thrown by community (American Psychiatric Association, 2000). Mental health for each person is affected by individual factors and experiences, social interaction, societal structures and resources, and cultural values. It is influenced by experiences in everyday life, in families and schools, on streets, and at work (Lehtinen, Riikonen & Lahtinen, 1997). Factors such as insecurity and hopelessness, rapid social change, and the risks of violence and physical ill-health may explain the greater vulnerability of poor people in any country to mental illnesses (Patel and Kleinman 2003). Mental health promotion is more effective when a person is taught skills of coping, adaptability and flexibility early in life. In 2019, WHO launched the WHO Special Initiative for Mental Health (2019-2023): Universal Health Coverage for Mental Health to ensure access to quality and affordable care for mental health conditions in 12 priority countries to 100 million more people.

An individual may become a failure to learn how to control oneself as a young person. However, impulses can prove problematic at times. Some of these impulses can be symptoms of underlying mental health issues that may require professional treatment by trained counselors or psychiatrists. Impulsivity is generally associated with a deficit in reflectiveness and planning, rapid decision-making and action, and a failure to inhibit a behavior that is likely to result in negative consequences. Impulsivity is characterized by unplanned risky behaviors, and making up one's mind quickly (Eysenck, 1993). The three factors contributing to impulsivity are acting on the spur of moment (motor activation), not focusing on the task at hand (inattentiveness) and not planning and thinking carefully (non-planning) (Patton, Stanford and Barratt, 1995). A person with an impulse control disorder is often unable to resist the sudden, forceful urge to do something that may violate the rights of others or bring about conflict with societal norms. These impulsive behaviors may occur repeatedly, quickly and without consideration of the consequences of that behaviour. Training of coping skills caused the improvement of interpersonal relationship and the reduction of aggression and behavioral problems in instructed people (Sukhodolsky, Golub, Stone and Orban, 2004).

Review of Related Studies

Bastian, Burns and Nettelbeck (2005) showed that higher emotional intelligence was significantly correlated with higher life satisfaction ($r=0.51$), coping with stress ($r=0.36$) and problem-solving ($r=0.55$), and lower stress ($r=0.25$). Yadav and Iqbal (2009) reported a significant positive influence on life skill training on self-esteem, emotional adjustment, educational adjustment, total adjustment and empathy. Nasser and Soran (2010) had undertaken an experimental study and revealed that life skills training affects on decreasing mental disorders symptoms especially anxiety, depression and stress of students suspected to the mental disorder. Also it was inferred that life skills training is a good method in decreasing mental disorders symptoms among the students suspected to the mental disorder. Kaur (2011) revealed that life skills based intervention program has a significant impact on the emotional intelligence of adolescents. Lolaty, Ghahari, Tirgari and Fard (2012) revealed that emotional intelligence after life skills training were significantly improved. Gholam and Javad (2013) showed that college students training in anger management skills, improves their social adjustment, social skills, and mental health. Agric (2014) showed that means scores of life skill development was significantly

better on post test over the pre test. Hossein, Bahareh, Rozita and Rezvan (2015) indicated that the more the life skills training to teachers at schools with normal students and teachers at schools with exceptional students, the less their mental health scores would be. Mahdi, Hamid, Fereshteh, Fatemeh, Mahmood and Zahra (2016) revealed a direct positive relationship between mental health and self-efficacy of students. Saman, Sekineh, Hamid, Amir, Sima and Kelly (2016) revealed that Life skills training had positive effects on mental health of the participants. Prajapati (2017) showed a positive consequences of imparting life skills education to students and acquiring the change in adolescent's attitude, thought and behavior. Ahmad, Fariba, Faramarz and Ellahe (2018) showed the effect of life skills training on increasing self-esteem, increasing assertiveness and reducing aggression. Khodakhast and Gholamreza (2019) showed that Life skills training had a positive and significant effect on social and coping skills. Also it was inferred that there was a significant decrease in aggression among students. Mansoureh (2019) revealed that Life skills training improve student mental health and student self-esteem.

Sample

The sample of the study constituted 120 students studying in B.Ed. course (Semester 3) of Amritsar district of Punjab, India. Simple random sampling was used to select the samples of the study.

Tools

Mental health: Mental health in both groups was assessed by Mental Health Battery (Singh & Gupta, 2012) before and after training. This tool consisted of 130 items with Yes or No responses on six popular indices of mental health i.e. emotional stability, overall adjustment, autonomy, security-insecurity, self-concept, and intelligence.

Impulsiveness: For measuring impulsiveness among students Impulsiveness Scale (Rai & Sharma, 2013) was administered. This scale consisted of 30 items and each item of the scale has two alternative responses. The response indicating impulsiveness is scored as 1 and response indicating no impulsiveness is scored as 0.

Intervention

The intervention program for providing Life Skill training to the students was designed in a systematic way in ten sessions. 10 Life Skills Modules were developed by the researcher based on 10 Life skills given by WHO. The training program modules for experimental group was based

on Life Skills as laid down by WHO including: i) Self-awareness, ii) Empathy, iii) Critical thinking, iv) Creative thinking, v) Decision making, vi) Problem solving, vii) Interpersonal relationship skills, viii) Effective communication, ix) Coping with stress, and x) Coping with emotions. The training method involved lecture, PowerPoint presentations, youtube videos and group activities including question and answer opportunities. The training method involved lecture, PowerPoint presentations, youtube videos and group activities including question and answer opportunities.

Procedure

Before implementing the life skill training, the two groups experimental (N=60) and control group (N=60) were formed using pretest-posttest research design. The experimental group received life skill training for 10 days (One sessions per day and 30-35 minutes each session). The control group did not receive any training sessions during the same period. Mental health and impulsive behaviour in both groups were assessed by Mental Health Battery (Singh & Gupta, 2012) and Impulsiveness Scale (Rai & Sharma, 2013) respectively pre- and post-training.

Statistical Analysis

Analysis of variance (ANOVA) was employed to examine the effect of life skills training on the mental health of the students in relation to their impulsive behaviour . Also, t-test was used to examine the significance of difference in mental health gain scores of experimental and control groups.

Results and Discussion

The study was conducted using the responses of 120 students. Results of t-test (Table 1) showed that the mean gain score of mental health of experimental group (12.58) and control group (9.93) was statistically different, t-value (4.88) at 0.01 level of confidence.

Table 1 : Result of test of significance of difference in mental health gain scores of experimental and control group

Groups	N	Mean	SD	SE _D	Critical Ratio
Experimental	60	12.58	3.19	0.41	4.88
Control	60	9.93	2.73	0.35	

The results of this study revealed that in general, life skill training for B.Ed interns had a significant effect on mental health. It may be concluded that mental health of the group provided life skill training is better than that of control group. In other words, life skills are effective in

improving mental health of the students. In one research, it has been revealed that Life skills training had positive effects on mental health of the participants (Saman, Sekineh, Hamid, Amir, Sima & Kelly; 2016).

Table 2 : Result of 2x3 ANOVA for interactional effect of life skill training and impulsive behaviour on gain scores of mental health

Source	Sum of Squares	df	Mean Square	F- value
Corrected Model	323.82 ^a	5	64.76	7.94
Intercept	14450.07	1	14450.07	1772.88
Life Skill Training (A)	221.48	1	221.48	27.17
Impulsive Behaviour (B: High, Avg., Low)	87.04	2	43.52	5.34
Group (A) x (B)	26.10	2	13.05	1.60
Error	929.17	114	8.15	
Total	16463	120		
Corrected Total	1252.99	119		

• *Main Effects*

From table 2, the F-value (21.17, with df 2/114) for effect of life skill training on mental health is significant at 0.01 level of confidence. It means that there is significant effect of life skill training on mental health of B.ed. Interns. It is also evident from table 2, the F-(5.34 with df 2/114) for effect of impulsive behaviour on mental health is significant at 0.01 level. It means that there is significant effect of impulsive behaviour on mental health of B.ed. Interns.

To analyse the difference of mental health among the groups i.e. with high, average and low impulsive behaviour; t-test is applied. The results of t-test are presented in table 3 below:

Table 3 : Results of t-test for mean gain score of mental health of High , average and low impulsive behaviour group

Group	Impulsive Behaviour	N	Mean	SD	SE _D	t-value
I	High	32	12.66	3.80	0.71	2.50
	Average	56	10.86	2.87		
II	High	32	12.66	3.80	0.84	2.47
	Low	32	10.56	2.90		
III	Low	32	10.56	2.90	0.64	0.46
	Average	56	10.86	2.87		

It is evident from the results given in Table 3 that the t-values of mean scores of mental health of group I (t=2.50) and group II (t=2.47) are significant at 0.01 level of confidence, but not

significant in group III. It is concluded that the significant difference in the mental health of B.ed interns is found only in two groups i.e. high impulsive behaviour group and average impulsive behaviour group, high impulsive behaviour group and low impulsive behaviour group. But no significant difference in the mental health of B.ed interns is found in low impulsive group and average impulsive behaviour group.

- *Interactional Effect*

It may be seen from the Table 3 that F-value (1.60 with df 2/114) for interaction between life skill training and impulsive behaviour on mental health is not significant. It may be concluded that there is no significant interactional effect of life skill training and impulsive behaviour on mental health of B.ed Interns.

Conclusion

According to the results, life skills training had a considerable effect on mental health of the B.Ed interns. Considering the significance of mental health in modern societies, it is importance to incorporate these skills in curriculums at both school and college level. This study also revealed that the impulsive behaviour of the students had a significant impact on the mental health of B.ed interns. The prospective teachers should shoulder the responsibility of guiding their students to improve mental health and reduce impulsiveness among the students. The life skills approach aims at assisting prospective teachers to gain new ways of learning as well as control over their behaviour and to take informed decision that can lead to positive values.

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