



Original Article

The effect of life skills education on children's mental health of family-like centers of welfare organization

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Abstract

Introduction: Education of life skills will promote socio-psychological abilities and help individuals cope effectively with challenges and situations in life. The present research aims to study the effect of life skills education on the mental health of girls between 14-18 years old in welfare like-family centers of Kerman.

Materials and Methods: Statistical population of this clinical research includes all girls aged between 14-18 years in welfare like-family centers in the academic year of 2015-2016 (45 cases). Since the continuous presence of children was essential in all educational sessions and only 30 girls could participate in all sessions, all girls were chosen as the sample size. The experimental group learned life skills within 10 ninety minutes sessions. To collect information, Goldberg and Hiller's mental health questionnaire (GHQ-28) was used, and participants completed it before intervention. To analyze data, T-paired test was used, and the Kolmogorov-Smirnov test was applied to study the normalization of the difference in pre-and post-test mental health scores before the T-paired test.

Results: Education of life skills has significantly affected girls' mental health in like-family centers. In addition to the effect of education of life skills on mental health, such education has the most positive effect on signs of anxiety and sleep disorder, and it has the least positive effect on physical signs in significance level of ($P<0.05$).

Conclusion: Concerning the results, it seems that life skills education significantly affects mental health in girls in like-family centers.

Keywords: Life skills, Mental health, Well-being

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Introduction

WHO defined health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (1). Therefore, mental health is one of the most important needs of a human. To provide mental

health, the individual should know him/herself, perceive others and make an effective relationship with them, identify and control negative emotions and stresses and make proper decisions by solving problems effectively. In

addition, dominance in life skills is required to meet such needs (2).

Life skills are a set of abilities that provide a consistent context and proper and positive behavior. Such abilities cause an individual to accept his social role's responsibilities and effectively face desires, expectations, and daily problems, especially in interpersonal relationships, without damaging self and others (3). In addition, individuals require defending their interests against difficult situations in life. Those who have learned life skills are more aware of their lives and abilities and are self-assured due to self-acceptance and try to progress and reach more advancement (4). World health organization presents a program of life skills education (including ten main skills) in order to increase the mental health of individuals as follows: self-awareness skills, the skill of relationships, skills of interpersonal relations, the skill of problem-solving, skill of creative thinking, the skill of coping with emotions, the skill of coping with stress, the skill of empathy, decision making skill and skill of critical thinking (5). The importance and necessity of life skills education are determined when the individual knows that life skills education promotes socio-psychological abilities. Such abilities help individuals effectively face life's challenges, behave positively and consistently with culture and environment, and supply mental health (6).

Studies on Iranian children showed that children are living in State Welfare Organization centers due to the death of their parents (10%), difficult to treat diseases (5%), loss of one of their parents, or lack of qualification for taking care of children (5%), court decisions (10%), being jailed (15-20%) and foundling (50%). In addition, orphans or unsupervised children of State Welfare Organization live in foster care centers. Foster care is a part of the welfare systems of children and a place like a family is provided for taking care of children when parents are not able to take care of them (7). A few important situations in human life are recognized as turning points in life. One such situation is when severe physical and spiritual changes and fluctuations occur for the individual. This is a relatively long period and includes the second decade of life. This is called adolescence. Changes and fluctuations and sometimes conflicts of individual identity

increase the importance of this period and require paying attention to such individuals in the society. Researchers have confirmed the positive effect of life skills on the reduction of hostile behaviors, reinforcement of self-confidence, self-imagination, and application of capabilities, capacities, and intelligence actions (3). Research has been done in this field by Haraldson et al. (8), Sepulveda et al. (9), Bo Wang et al. (10), and Bob and Roisin. (11) showed that life skills education promotes and improves life quality and increases people's mental health. Moradi indicated that life skills education allows an individual to change his knowledge, values, and feedback into potential capabilities (12). Yadavari indicated that life skills education is effective in students' mental health, self-esteem, and self-expression (13). Haghghi et al. showed that life skills education increases female students' mental health and self-esteem in the first year of high school (14). Concerning the importance and requirement of life skills education and its effect on adolescents' mental health, the present study aims to investigate the effect of life skills education on the mental health of children aged between 14 and 18 years in foster care of the State Welfare Organization centers of Kerman.

Materials and Methods

The present research is a pre-and post-intervention study (life skills education) and applied research. Education of ten life skills is presented within ten sessions (90 minutes) by the researchers based on lecture, question, and answer, role play, and PowerPoint, and the subjects were measured by General Health Questionnaire. It is noteworthy that confidentiality of personal information was explained for participants to attract their trust and receive accurate responses. The statistical population includes girls aged between 14 and 18 years old in State Welfare Organization foster care in academic years 2015-2016. They were 45 girls. The continuous presence of children was essential in all educational sessions. Only 30 girls could participate in all sessions thus all of them were chosen as the sample. After taking permission from the State Welfare Organization of Kerman, the researchers were allowed to enter the center, distribute the questionnaire, and have educated life skills.

Research instrument

A) *General Health Questionnaire (GHQ-28)*: The questionnaire includes 28 items designed by Goldberg and Hiller in 1972. It consists of four subscales of physical signs (items 1 to 7), signs of anxiety and sleep disorder (items 8 to 14), social function (items 15 to 21), and depression signs (items 22 to 28). 5 scores were obtained for each person in the test, and 4 scores are allocated to subscales, and one score belongs to the total score. The scoring was from A to D ranging from zero to three. As a result, each person's score (for each subscale) is from zero to twenty-one and from 0 to 84. The lower the scores, the higher the level of mental health. In the study done by Goldberg and Hiller, the validity of the questionnaire was reported as 95%. Internal consistency has been reported as 93% via Cronbach's alpha in the study of Chan cited by Palahang. The validity coefficient of the Persian version of the 28-item mental health questionnaire was significant at a 1% level by retest (15). The retest for subscales of physical signs, anxiety, insomnia, disturbance in social function, depression, and total questionnaire was obtained at 85%, 78%, 79%, 91%, and 85% respectively (16). In order to analyze data, mental health (physical signs, signs of anxiety and sleep disorder, social function, depression signs) was described before and after life skills education in quasi-family children by using indices of the tendency to the center, dispersal, and box plot. Paired sample T-test has been used (in significance level of 0.05) to determine the effect of life skills education on the mental health of foster care children, and the Kolmogorov-Smirnov test has been applied to study the normalization of the difference between pre-and post-test scores of mental health before completing paired T-test.

Results

The samples were 14 and 18 years old, and all were girls. Since the girls had to be familiar with life skills, researchers divided the girls into control and experimental groups and they studied all of them in one group. Pre-test scores of the group suggest a high mean score of variables showing a low level of mental health in the group under study. The post-test scores suggest the effect of education of ten life skills on the mental health of the group under study (tables 1 and 2).

The effect of life skills education on reducing physical signs in foster care children has been studied by paired T-test. Concerning that, the P value calculated by the Kolmogorov-Smirnov test is less than the significance level of 0.05, meaning that the mean score of a post-test for physical signs is significantly lower than the mean score of a pre-test. As a result, it can be said that life skills education effectively reduces the physical signs of foster care children (Table 1). The effect of life skills education on reducing signs of anxiety and sleep disorder in foster care children has been studied by paired T-test. Concerning that, the P value calculated by the Kolmogorov-Smirnov test is less than the significance level of 0.05, meaning that the mean post-test score for signs of anxiety and sleep disorder is significantly lower than the mean score of the pre-test. As a result, it can be said that life skills education effectively reduces signs of anxiety and sleep disorder in foster care children (Table 1). The effect of life skills education on the increase of social function of foster care children has been studied by paired T-test. Concerning that, the P value calculated by the Kolmogorov-Smirnov test is less than the significance level of 0.05, meaning that the mean post-test score for the increase of social function is significantly lower than the mean score of pre-test. As a result, it can be said that life skills education effectively increases foster care children's social function (Table 1). The effect of life skills education on reducing depression signs in foster care children has been studied by paired T-test. Concerning the P value calculated by the Kolmogorov-Smirnov test, the mean score of the post-test for depression signs is significantly lower than the mean pre-test score. As a result, it can be said that life skills education effectively affects depression signs in foster care children (Table 1). The effect of life skills education on the improvement of mental health of foster care children has been studied by paired T-test. Concerning the P value calculated by the Kolmogorov-Smirnov test, the mean score of the post-test for mental health is significantly lower than the mean score of the pre-test. As a result, it can be said that life skills education effectively improves the mental health of foster care children (Tables 1 and 2).

Table 1. Paired T-test for comparing pre and post-test scores for dimensions of mental health

Variable	Mean score before education	Mean score after education	Mean difference	Standard deviation	T	P
Physical signs	5.43	1.10	4.33	0.552	7.857	0.302
Signs of Anxiety and sleep disorder	8.93	2.27	6.67	0.552	7.957	0.872
Social function	8.1	3.03	5.07	1.008	5.027	0.161
Depression signs	5.6	0.97	4.63	1.072	4.324	0.317
Mental health	28.03	7.37	20.70	2.426	8.523	0.725

Significance level of 0.05

Table 2. Descriptive statistics of pre-and post-test scores of mental health of foster care children

Status	Number	Minimum	Maximum	Mean	Median	Standard deviation
Pre-test	30	8	50	28.03	26.0	12.23
Post test	30	2	22	7.37	5.5	5.65

Discussion

The present study aims to investigate the effect of life skills education on the mental health of children aged between 14 and 18 years in foster care State Welfare Organization centers of Kerman city. After studying theoretical and research basics, criteria and components of life skills were identified, such as the skill of self-awareness, skill of relationship, skill of interpersonal relations, the skill of problem-solving, the skill of creative thinking, the skill of coping with emotions, the skill of coping with stress, empathy skill, the skill of decision making and skill of critical thinking and they were trained to the subjects within ten sessions. Goldberg's mental health questionnaire measured subjects before and after education, and the effect of life skills education on four components of mental health (physical signs, signs of anxiety and sleep disorder, social function, and depression signs) was studied. After data analysis for the main and special hypotheses, it has been concluded that education of ten life skills has a significant and positive effect on the reduction of physical signs, signs of anxiety and sleep disorder, social function and depression signs, and increase of mental health of State Welfare Organization's foster care children. These results are in agreement with those of Pasha and Yadavari (17), Rahimian Bouger et al. (18), Salimi Bajestani and Abedi (19), and Fardad and Dokaneyifard (20). The present research has some limitations, such as the small

size of the sample and time limitation in doing research that led to no follow-up of the samples. It is suggested that to increase the level of mental health of children in foster care centers, Managers and personnel should be familiar with ten dimensions of life skills, their effectiveness, efficiency, and advantages via educational workshops and in-service education as well as holding a book-reading competition between children in the centers based on life skills education.

Conclusion

Results of the research show that education of ten life skills has a critical effect on increasing mental health in girls of State Welfare Organization foster care centers. Insufficient knowledge of life skills causes low ability of adolescents in well-being foster care centers when facing challenges and problems compared to adolescents living with their parents. Thus, they present inappropriate emotional responses to stimulants and events in their life even though they may do high-risk behaviors.

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