



Research Paper

Moulding the young generation through life skill education: How far have we come?

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ABSTRACT: Life skills are defined as psychosocial abilities for adaptive and positive behavior that enable individuals to deal effectively with the demands and challenges of everyday life. They are loosely grouped into three broad categories of skills: cognitive skills for analyzing and using information, personal skills for developing personal agency and managing oneself and inter-personal skills for communicating and interacting effectively with others. Life skills are problem solving behavior used appropriately and responsibly in management of personal affairs. Life skills may be learnt by teaching or simply by personal experience. Actually no life skill is used alone, there's always a combination of more than one. To broadly classify, according to UNICEF, major life skills include problem solving skills, decision making skills, creative thinking, effective communication skills, interpersonal relations skills, empathy, self-awareness, coping with stress and coping with emotions. The present paper tries to study the role and effectiveness of life skill education with particular reference to a developing country like India.

Keywords: Life skills, psychosocial abilities, adaptive behavior.

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I. Introduction:

We can initiate the discussion with the story of an adolescent named Raju. Raju is a 15-year-old boy studying in 10th standard. His board examinations begin today and he is getting ready to go to school. He is sure that he is well prepared and is confident about passing the exam with good grades. When he was about to leave for school, his mother told that she would accompany him as she is going to the temple on the way to the school. She asked Raju to wait for five minutes so that she can have a quick bath. Raju saw his mother moving into the bathroom and suddenly he heard a loud sound and the screaming of his mother. He ran into the bathroom and saw his mother lying down, unable to move her leg indicating a fracture. He lifted her slowly and supported her to a chair in the next room. Raju's father and elder brother are away at their work sites. Except the two, there is no one at home. Time is already 9:00 and exam would begin at 9:30 A.M. What will Raju do now? He is in a challenging situation where he has to attend the exam, has to deal with the mother's accident, get her hospitalised and none of the other immediate family members was available near him.

Normally, an adolescent of the age of Raju may get anxious and frightened in that situation. Raju, however, handled the situation brilliantly. He immediately called his uncle who was few meters away from his house over phone and informed about the accident. Uncle informed him that he will be at their home in few minutes. Next, he called the school headmaster, informed him about the situation and told him that he'll be little late. He then informed his elder brother and asked him to come to the hospital. Meanwhile, his uncle and aunt came with a car and took his mother to the hospital. Raju told his uncle that he has to give the exam and asked him to drop him at the school on the way. He consoled his mother in the car and told her that everything will be alright. He told his uncle that his father and brother are on the way to the hospital and he'll also be there after the exam.

Raju had managed the challenging situation well because he was aware of his "life skills" and to use it appropriately. So what is this life skill? World Health Organization (WHO) (1997)¹ defines life skills as, 'the abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and

¹ World Health Organisation (1997) Life skills education in schools (revised edition). Geneva: World Health Organisation - Programme on Mental Health

challenges of everyday life.’ ‘Adaptive’ means being flexible and adjusting to various situations. ‘Positive behaviour’ refers to a positive outlook even in the most difficult situation and/or anticipation of a “way out” in the difficult situation. The 10 core skills which are together known as “life skills” that promote the psychosocial competence among individuals are critical thinking, creative thinking, decision making, problem solving, effective communication, interpersonal relationship, self-awareness, empathy, coping with emotions and coping with stress.(World Health Organization, 1997). If we look back at the case of Raju, we can see that he was able to use all these 10 skills in the real life situation.

Life skills education in India:

Life skills education (LSE) programme took off in India, in the community mental health unit of the National Institute of Mental Health and Neurosciences (NIMHANS), Bangalore under the guidance of Dr. R. Parthasarathy, Professor, Department of Psychiatric Social Work. He had developed a ‘student enrichment programme’(Vranda and Rao, 2011)² which encompassed the 10 skills listed by WHO in 1993. Hence, he is known as the father of LSE programmes in India. A comprehensive LSE module subsequently developed at the Department of Psychiatry, NIMHANS (Bharat et al. 2005)³ is being widely used in the country now. LSE workbook developed at the Department of Psychiatric Social Work, NIMHANS for “Children in difficult circumstances” is another addition.(Sekar et al. 2008)⁴.

Realising the significance of LSE, Central Board of Secondary Education (CBSE) had implemented and is continuing with LSE programme for high school children. The National Council of Education Research and Training (NCERT) in collaboration with the Human Resource Development (HRD) ministry and the National AIDS Control Organisation (NACO) had adopted life skills based “Adolescent Education Programme”(Vranda and Rao, 2011)⁵ as a preventive approach against HIV/AIDS. School of Life Skills Education and Social Harmony, Rajiv Gandhi National Institute of Youth Development (RGNIYD), Tamil Nadu had initiated an annual international conference and research activities to disseminate and share the perspectives of life skills approach to education and help to stimulate new thinking in the area of education for the 21st century.

Theories of life skills education:

The foundation on which the life skills approach is developed is drawn from various theories that have positively contributed to the growth and enrichment of LSE. Social learning theory is prominent among them. The other theories include child and adolescent development theory, cognitive problem solving theory, social influence theory, multiple intelligences theory, problem behaviour theory and risk and resilience theory. (Mangrulkar et al. 2001)⁶ From a cognitive-behavioural viewpoint, the perception is that life skills are skills that are learned and a person can be made conscious of its importance through training.

Life skills methodology:

LSE is generally implemented through methodologies such as group discussion, discussion based on case vignette, role-play, simple games, storytelling, debate, etc. These methodologies unlike the lecture method, arouse and sustain attention and interest, ensure participation and team work and also facilitate learning through fun and humour. Therefore, it’s important for the trainer to be well versed in these methodologies; it in turn helps in internalising the skills by the participants in a better way.

Life skills education and adolescents:

Adolescence is the most critical phase of an individual. It denotes the transitional stage from childhood to adulthood marked by conspicuous physical, cognitive, emotional and social changes. The inbuilt buffers existing in the society in the form of control and support from the near and dear ones guide the adolescents to grow into a mature adult.

However, in the recent years, big changes have taken place in our traditional society owing to industrialization and globalization. The impact is evident in the entire society, with no exception to adolescents. The family ties have weakened; moral, social, religious and cultural controls rarely exist and a new life style

² Vranda MN, Rao MC (2011) Life skills education for young adolescents – Indian experience. Journal of the Indian Academy of Applied Psychology 37:9-15;

³ Bharat S, Kishore Kumar KV, Vranda MN (2005) Health promotion for adolescents in schools (8th, 9th and 10th Standard) (English version). Bangalore: NIMHANS-WHO (SEARO) Collaboration

⁴ Sekar K, Roncalli TA, Manoj K, Raj AE, Kumar S (2008) Life skills education for children in difficult circumstances – my work book. Bangalore: Department of Psychiatric Social Work

⁵ Vranda MN, Rao MC (2011) Life skills education for young adolescents – Indian experience. Journal of the Indian Academy of Applied Psychology 37:9-15

⁶ Mangrulkar L, Whitman CV, Posner M (2001) Life skills approach to child and adolescent healthy human development. Washington, DC: Pan American Health Organization

emerged among the adolescents. The highly competitive world of today and the absence of traditional norms and support have heightened the stress among adolescents resulting in multiple mental health issues such as depression, anxiety, loneliness, rejection, diffidence, anger, confliction in interpersonal relationship and failure.(Smith et al. 2004)⁷ Alcohol abuse and criminal behaviour among the adolescents too are not uncommon.

LSE is suggested by many as a prevention and development approach to this serious scenario. As the definition by WHO (1997) suggests, internalising the core essential life skills helps the adolescents to deal with the concerns in the modern world in a dignified and mature way bringing success to them. These skills will help them to resist peer pressure as they learn how to accept themselves for who they are. These basic skills will help young people in coping with difficulties they face in their personal, emotional and social development. Life skills are essentially those abilities that help promote mental well-being and competence in young people as they face the realities of life. With life skills one is able to explore alternatives, weigh pros and cons and make rational decisions in solving each problem or issue as it arises.

Research evidence for life skill education training:

There is an emerging consensus among mental health professionals worldwide that LSE trainings to adolescents are effective. The life skills program focus on the development of the skills needed for life such as self-awareness, communication, decision-making thinking, managing emotions, assertiveness, and relationship skills. Also, the training programme aims at bringing comprehensive behaviour change in the adolescents.(Rahmati et al. 2010)⁸ Through life skills based training programmes mental health professionals attempt to address varied issues of the adolescents such as alcohol and other substance use, reproductive and sexual health, criminal acts, HIV/AIDS prevention and suicide prevention.

Maryam and her colleagues (2011)⁹ in their investigation to find the effectiveness of training life skills on adolescent students found that life skills training lead to significant increase of self-esteem in the study group. The authors concluded that mental health programs such as life skills training can decline school and educational problems. In another study,(Ramesh and Farshad 2010)¹⁰ in a sample consisting of 500 students, life skills training was proved to be effective in increasing mental and physical health and also in decreasing the behavioural and social problems. An increase in pro-social behaviour level and decrease in negative self-destructive behaviour was also reported in a longitudinal study (Elias et al. 1991)¹¹ among elementary school children subsequent to life skills training.

In yet another study, following life skills training programme, the treatment group reported significant improvement in the total behaviour problem scores.(Misener,1995)¹² A research also showed that life skills training significantly reduced the alcohol and drug use among the studied adolescents.(Smith et al. 2004)¹³ Improvement in interpersonal relationship and reduction in aggression and behavioural problems was found among the participants who had attended a coping skills training by Sukhodolsky and his team.(2004)¹⁴.

Life skills training can promote social adjustment.(Rahmati et al. 2010)¹⁵ Anger control,(Feindler et al. 1986)¹⁶ enhanced self-esteem (Young et al. 1997)¹⁷ and improvement in academic performance (Elias et al. 1991)¹⁸ were reported in various researches that evaluated the effectiveness of life skills training.

⁷ Smith EA, Swisher JD, Vicary JR, Bechtel LJ, Minner D, Henry KL, et al. (2004) Evaluation of life skills training and infused-life skills training in a rural setting: outcomes at two years. *J Alcohol Drug Educ* 48:51-70

⁸ Rahmati B, Adibrad N, Tahmasian K, Sedghpour BS (2010) The effectiveness of life skill training on social adjustment in children. *Procedia Soc Behav Sci* 5:870-4

⁹ Maryam E, Davoud MM, Zahra G, Somayeh B (2011) Effectiveness of life skills training on increasing self-esteem of high school students. *Procedia Soc Behav Sci* 30:1043-7

¹⁰ Ramesh M, Farshad C (2004) Study of life skills training in prevention of drug abuse in students. Third seminar of students' mental health

¹¹ Elias MJ, Gara MA, Schuyler TF, Branden-Muller LR, Sayette MA (1991) The promotion of social competence: longitudinal study of a preventive school-based program. *Am J Orthopsychiatry* 61:409-17

¹² Misener DB (1995) An evaluation of a secondary prevention social skills training programme for children. *Diss Abstr Int* 55:3750

¹³ Smith EA, Swisher JD, Vicary JR, Bechtel LJ, Minner D, Henry KL, et al. (2004) Evaluation of life skills training and infused-life skills training in a rural setting: outcomes at two years. *J Alcohol Drug Educ* 48:51-70

¹⁴ Sukhodolsky DG, Golub A, Stone EC, Orban L (2004) Dismantling anger control training for children: a randomized pilot study of social problem-solving versus social skills training components. *Behav Ther* 36:15-23

¹⁵ Rahmati B, Adibrad N, Tahmasian K, Sedghpour BS (2010) The effectiveness of life skill training on social adjustment in children. *Procedia Soc Behav Sci* 5:870-4

¹⁶ Feindler E, Ecton R, Kingsley D, Dubey D (1986) Group anger-control training for institutional psychiatric male adolescents. *Behav Ther* 17:109-23

¹⁷ Young M, Kelley R, Denny G (1997) Evaluation of selected life-skill modules from the contemporary health series with students in grade.

¹⁸ Elias MJ, Gara MA, Schuyler TF, Branden-Muller LR, Sayette MA (1991) The promotion of social competence: longitudinal study of a preventive school-based program. *Am J Orthopsychiatry* 61:409-17

Life skills and role of parents:

Deficit in skills or lack of skills necessitates training. Skill building should begin in the family. It is the responsibility of the parents to get their children involve in family related activities so as to strengthen life skills. Given below are few examples of such activities that can strengthen life skills in children and adolescents. (Parthasarathy et al. 2009)¹⁹

- Deciding the menu to be prepared every day/special occasion/festivals/birthdays
- Looking after the household chores in the absence of elders at home
- Planning the holiday activities
- Actively involving the children/adolescents when the financial or personal constraints occur
- When too many guests arrive, assisting in sharing the responsibilities
- When a family member becomes sick, takes up the role of that person.
- Interior decoration/arrangement of the articles in the house as a routine as well as during functions
- Daily *rangoli* for pooja
- Interacting/communicating with other family members based on the prevailing family situation
- Understanding the behaviour dynamics of parents and siblings and adjusting with them
- Developing and maintaining verbal communication with family members, visitors, relatives, neighbours, friends, guests and others
- Reading newspapers/story books and sharing the same with family members
- Going for picnics, visiting relatives, attending ceremonies
- Working together during family function
- Encouraging introspection
- Rewarding and punishing for their positive/negative behaviour
- Looking after the sick family members
- Helping the elderly family members
- Facing sorrowful events as well as happy events in the family
- Identifying and following some of the reputed family members as role model
- Learns to adopt the effective stress coping styles of significant family member
- Division of labour at home

II. Conclusion:

The educational philosophy in ancient India was one of *guru-chela/shisya parampara* and stressed on the teacher being responsible both for literacy/knowledge and personality development in the ward. However, education, which is currently prevalent in our country, is achievement oriented than child oriented. It does not address the needs of all the children who in spite of various levels of scholastic competence are capable of learning and need to develop those skills, and become empowered to live effectively in this world. This empowerment is very essential in today's context in India as there is rapid globalization and urbanization with a breaking up of joint families and the traditional support systems. Academic stress, violence including bullying, sexual permissiveness, easy drug availability and abuse, crowding, poor infrastructure, social divide are some of major issues which a youth has to contend with in this rapidly changing social scene of India. An empowered child has the competence to cope with the challenges of life using the available resources even amidst such adversities.

Methods to improve the psychosocial competence and resilience of the adolescent as health promotional activities and development oriented approach need to be included in the school syllabus and provided as much relevance as the Three Rs (reading, writing, arithmetic).

LSE is one such program. By encouraging the children and adolescents in house hold activities, they are enabled to strengthen their life skills. If such activities are accompanied by suitable classroom activities by teachers, the children and adolescents would acquire skills required for happy and healthy life. Mental health professionals directly or through teachers or parents should be involved in skill building exercises and promoting competence among adolescents.

References

- [1]. World Health Organisation (1997) Life skills education in schools (revised edition). Geneva: World Health Organisation - Programme on Mental Health;
- [2]. Vranda MN, Rao MC (2011) Life skills education for young adolescents – Indian experience. *Journal of the Indian Academy of Applied Psychology* 37:9-15;
- [3]. Bharat S, Kishore Kumar KV, Vranda MN (2005) Health promotion for adolescents in schools (8th, 9th and 10th Standard) (English version). Bangalore: NIMHANS-WHO (SEARO) Collaboration;

¹⁹ Parthasarathy R, Renjith RP, Shobitha SK (2009) Life skills education. Psychosocial intervention in child and adolescent mental health - manual. Bangalore: Department of Psychiatric Social Work; 2009

- [4]. Sekar K, Roncalli TA, Manoj K, Raj AE, Kumar S (2008) Life skills education for children in difficult circumstances – my work book. Bangalore: Department of Psychiatric Social Work;
- [5]. Vranda MN, Rao MC (2011) Life skills education for young adolescents – Indian experience. *Journal of the Indian Academy of Applied Psychology* 37:9-15;
- [6]. Mangrulkar L, Whitman CV, Posner M (2001) Life skills approach to child and adolescent healthy human development. Washington, DC: Pan American Health Organization;
- [7]. Smith EA, Swisher JD, Vicary JR, Bechtel LJ, Minner D, Henry KL, et al. (2004) Evaluation of life skills training and infused-life skills training in a rural setting: outcomes at two years. *J Alcohol Drug Educ* 48:51-70;
- [8]. Rahmati B, Adibrad N, Tahmasian K, Sedghpour BS (2010) The effectiveness of life skill training on social adjustment in children. *Procedia Soc Behav Sci* 5:870-4;
- [9]. Maryam E, Davoud MM, Zahra G, Somayeh B (2011) Effectiveness of life skills training on increasing self-esteem of high school students. *Procedia Soc Behav Sci* 30:1043-7;
- [10]. Ramesh M, Farshad C (2004) Study of life skills training in prevention of drug abuse in students. Third seminar of students' mental health
- [11]. Elias MJ, Gara MA, Schuyler TF, Branden-Muller LR, Sayette MA (1991) The promotion of social competence: longitudinal study of a preventive school-based program. *AM J Orthopsychiatry* 61:409-17
- [12]. Misener DB (1995) An evaluation of a secondary prevention social skills training programme for children. *Diss Abstr Int* 55:3750
- [13]. Smith EA, Swisher JD, Vicary JR, Bechtel LJ, Minner D, Henry KL, et al. (2004) Evaluation of life skills training and infused-life skills training in a rural setting: outcomes at two years. *J Alcohol Drug Educ* 48:51-70
- [14]. Sukhodolsky DG, Golub A, Stone EC, Orban L (2004) Dismantling anger control training for children: a randomized pilot study of social problem-solving versus social skills training components. *Behav Ther* 36:15-23
- [15]. Rahmati B, Adibrad N, Tahmasian K, Sedghpour BS (2010) The effectiveness of life skill training on social adjustment in children. *Procedia Soc Behav Sci* 5:870-4
- [16]. Feindler E, Ecton R, Kingsley D, Dubey D (1986) Group anger-control training for institutional psychiatric male adolescents. *Behav Ther* 17:109-23
- [17]. Young M, Kelley R, Denny G (1997) Evaluation of selected life-skill modules from the contemporary health series with students in grade.
- [18]. Elias MJ, Gara MA, Schuyler TF, Branden-Muller LR, Sayette MA (1991) The promotion of social competence: longitudinal study of a preventive school-based program. *Am J Orthopsychiatry* 61:409-17
- [19]. Parthasarathy R, Renjith RP, Shobitha SK (2009) Life skills education. Psychosocial intervention in child and adolescent mental health - manual. Bangalore: Department of Psychiatric Social Work; 2009